Parenting Research Centre

October 2019

Parenting Today in Victoria

Technical Report

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ACKNOWLEDGEMENTS

Parenting Today in Victoria: Technical Report was prepared by the Parenting Research Centre for the Victorian Government Department of Education and Training.

Special thanks to previous and current Parenting Research Centre staff for their contributions to the *Parenting Today in Victoria* study: Dr Christine Millward, Dr Erica Neill, Ms Zvezdana Petrovic, Ms Christine Eastman, Dr Michelle Macvean, Dr Gina-Maree Sartore, Ms Fiona Shackleton, Ms Ann Seward, Dr Myfanwy McDonald, Mr Derek McCormack, Mr Christian Thompson and Ms Kellie Bisset.

Special thanks to Victorian Government personnel for their commitment to and engagement with the study: Ms Dannii deKretser, Ms Janice Robertson, and Ms Genevieve Frisby.

All members of the project governance are also acknowledged for their contributions to this project and report.

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Table of contents

List of Figures

List of tables

Glossary

Alpha coefficient (Cronbach's alpha; α) – Cronbach's alpha is a measure of internal consistency, that is, how closely related a set of items are as a group. It is considered to be a measure of scale reliability. It is a function of the number of items in a test, the average covariance between item-pairs, and the variance of the total score. Alpha levels around 0.7 are considered acceptable, with 0.8 and above considered 'good' and 0.9 and above as 'excellent'.

ANOVA A – parametric statistic, Analysis of Variance (ANOVA) provides a test of whether or not the means of comparison groups are equal.

Beliefs about parenting – Items added in 2019 drawn from the Parenting Research Centre's Perceptions in Parenting Project (Frameworks Institute, 2016).

Bonferroni correction – An adjustment made to p values when several dependent or independent statistical tests are being performed simultaneously on a single data set. We used this when there were multiple comparisons within a variable.

CATI – Computer assisted telephone interview. A surveying technique in which the interviewer follows a script provided by a software application.

Child – The survey respondent's child (aged 18 years and under) whose birthday was closest to the date the survey was administered with the parent. Child can include biological children as well as stepchildren, and adoptive or foster children that the parent is involved in caring for.

Chi Square test – Pearson's chi-squared test ($\chi 2$) is a statistical test applied to sets of categorical data to evaluate how likely it is that any observed difference between the sets arose by chance.

Complex needs – Refers to children whose parent indicated their child had a medical condition or learning difficulty that was chronic (has or is likely to last 6 months or more). This is the same definition used to describe children who had a medical condition or learning difficulty in the 2016 *Parenting Today in Victoria* survey, and as such comparison of findings about children with complex needs in 2019 and children with medial conditions or learning difficulties in 2016 are valid.

Confidence interval – A 95% confidence interval was used in the establishment of an appropriate sample size for the *Parenting Today in Victoria* survey. This means that if the same sampling method was used to select different samples and an interval estimate was computed for each sample, it could be expected that the true population parameter would fall within the interval estimates 95% of the time.

Coping (related to 'Support') – Successfully face and deal with responsibilities, problems or difficulties related to parenting.

Cross-sectional design – Cross-sectional surveys are studies aimed at determining the frequency (or level) of particular attributes in and information from a defined population at a particular point in time.

DET – Victorian Government Department of Education and Training. Funded the *Parenting Today in Victoria* survey.

ECEC – In Victoria, Early Childhood Education and Care (ECEC) refers to paid child care and kindergarten programs. Child care includes centre-based day care, family day care, long day care, occasional care and outside school hours care services.

Educator – Can refer to any professional involved in the education of children and young people. For this report, it refers to early childhood educators who are early childhood professionals. Early child care educators work directly with children in a variety of settings, including kindergarten, long day care, occasional care, family day care and outside school hours care services. Primary and secondary school educators are referred to as 'teachers' or 'school staff' in this report.

Electronic devices – Examples given to parents were Ipads and other tablets, video games like PS4 and Nintendo, and internet and phone use for recreation and social interaction.

Formal supports (related to 'Informal Supports') – For this report, formal supports refer to external sources of information and advice about raising children, and obtaining help from a professional, such as a general practitioner, mental health/behavioural specialist, teacher/educator or member of school staff.

Help-seeking – Obtaining help for parenting – e.g. from a health professional, parenting group, telephone helpline, parent/friend/neighbour, community leader, teacher/educator, member of school staff, a book or online resource.

Informal supports – For example, a trusted person, family member, other parents, friends and neighbours.

Interval level variables – This refers to how individual survey items and scale and subscale scores are presented numerically. Values of interval level variables are in an ordered sequence and the intervals between the values are equally spaced. Averages (e.g. means) can be meaningfully calculated. Interval level variables are required for parametric statistics.

IRSD – The Index of Relative Socio-economic Disadvantage (IRSD) is an Australian general socio-economic index that summarises a range of information about the economic and social conditions of people and households within a geographical area. A low score indicates relatively greater disadvantage in general. A high score indicates a relative lack of disadvantage in general.

Item inter correlation – Refers to the correlation or relationship between items in a test or scale and is an indication of how internally consistent the scale is (e.g. to what extent different items measure the same general concept).

Kessler 6 (K6) – A short version of the Kessler Psychological Distress Scale that has six items on feelings of nervousness, depression, restlessness, hopelessness, effort and worthlessness. It is primarily used as a screening test and has been included in Australian surveys such as the Australian Bureau of Statistics Health Survey and the Longitudinal Study of Australian Children.

Kruskal Wallis test – The Kruskal Wallis H test is a non-parametric test that can be used when the assumptions for ANOVA are not met. Like ANOVA it tests for the statistical significance of differences between groups.

Me as a Parent Scale (MaaPs) – Commissioned by the Victorian Government and developed and normed with Victorian families, this 16-item scale measures parents' perceptions of their parenting efficacy, personal agency, self-management and self-sufficiency. For this survey we used a valid 4-item short form.

Maternal and Child Health (MCH) First-Time Parents Group – The MCH service is funded by the Victorian Government, local government and the Municipal Association of Victoria. First Time Parents Groups provided by local MCH services are attended by parents of babies one month to six months of age. Facilitated by an MCH nurse, the groups are designed to provide support and information aimed at enhancing parental wellbeing, increasing parents' confidence, and establishing informal support networks.

Mean (M) – Calculated by dividing the total of a set of items by the number of items in the set. Can be referred to as 'average' and is one way of describing central tendency.

Monitoring – For this report, monitoring refers to parents' knowledge of their children's whereabouts, and whether they set rules or limits about this.

Non-parametric statistics – These do not require a normal distribution of scores and can be used with categorical and ordinal data. Used in our analyses when the data were not on an interval scale, or when the assumptions for parametric statistics were not met.

Parametric statistics – These were used when the scores were normally distributed and the items were on an interval scale. Where assumptions were violated we conducted a non-parametric analysis.

Parent – A person over the age of 16 years who was the primary caregiver of a child in the relevant age range at the time of the survey. This could be the child's biological parent, or someone other than the biological parent functioning in a parenting role, such as grandparents, stepparents, foster parents or other carers.

Parent engagement – This refers to parents' engagement with their children's learning and educational experience. It included involvement in informal learning activities as well as more formal learning that occurs in ECEC and school.

Parent performance – Measured by four items from the Parent Performance subscale of the Cleminshaw-Guidubaldi Parent Satisfaction Scale.

Parent self-efficacy – The belief about being able to perform parenting tasks successfully. Efficacious parenting beliefs have been shown to be associated with greater competence in performing parenting tasks. Measured in this survey by the short form of the MaaPs.

Parent wellbeing – Shown by parents' ratings of their physical and mental health.

Parenting confidence – This refers to confidence in help-seeking as well as confidence in parenting practices.

Parenting practices – Strategies for addressing child behavioural challenges, and positive parenting techniques. Assessed using three items from the Parent and Family Adjustment Scale (PAFAS; Sanders, Morawska, Haslam, Filus, & Fletcher, 2014) on praise, smacking and arguing or yelling, and an additional item about talking to their children about problems/issues.

Parenting programs/groups – Examples given to parents as part of the survey items were: Triple P and Tuning in to Kids, MCH first time parents group.

Pearson correlation coefficient – A Pearson correlation coefficient is the statistic that shows the correlation between two sets of data and is represented as Pearson's r. The r value given is between +1.0 (positive correlation) and -1.0 (negative correlation). The closer the value is to +1.0 or -1.0, the stronger the relationship. A coefficient close to zero shows little correlation.

Playgroups: Supported & community – Playgroup sessions are held in the community for babies, toddlers and pre-schoolers and their parents/caregivers. The sessions focus on child play and social interaction. They are usually held once a week for two hours. Supported playgroups are facilitated by a trained practitioner and are funded by both Commonwealth and Victorian governments. Victorian government supported playgroups are designed for families living in disadvantaged circumstances. Community playgroups are not facilitated and are funded in a variety of ways in Victoria.

Parenting Research Centre (PRC) – The Parenting Research Centre commenced in 1996. Its focus is on better outcomes for children by increasing effectiveness and fostering innovation in the way parenting is supported. Activities of the Centre include knowledge translation and exchange, research, building organisational capacity to support parenting, and influencing the policy environment.

Personal wellbeing – This was measured by the Personal Wellbeing Index (5th ed., International Wellbeing Group, 2013) which originates from the Comprehensive Quality of Life Scale (ComQol; Cummins, McCabe, Romeo, & Gullone, 1994). The adult version of scale has seven items of satisfaction: standard of living, health, achieving in life, relationships, safety, community-connectedness, and future security.

Psychological distress – Parents indicated whether they had symptoms of mental health problems since becoming a parent. Also, the Kessler 6 measured the parents' current psychological state.

Reliability – A measure is said to have a high reliability if it produces similar results under consistent conditions. For the *Parenting Today in Victoria* survey we reported internal consistency according to Cronbach's alpha (see 'Alpha Coefficient' in this Glossary).

Resilience – Parents' approach to child resilience was measured by their response to the statement: 'I know how to help my child 'bounce back' from difficulties or adversity.'

Sampling frame – The source from which a sample is drawn. It is a list of all those within a population who can be sampled and identifies the inclusion and exclusion criteria. For the *Parenting Today in Victoria* survey the sampling frame was designed to maximise the representativeness of the sample for the Victorian population of parents of children 0 to 18 years inclusive.

Skewness – Skewness is a measure of the symmetry of a distribution of data. A data set is symmetric if it is evenly distributed to the left and right of the centre point. We checked this when a statistical test required a normal (not skewed) distribution.

SPSS – IBM SPSS Statistics is a computer application for statistical analysis of data. All analyses for the *Parenting Today in Victoria* survey were conducted with SPSS.

Standard deviation (SD) – Quantifies the amount of variation or dispersion of a set of data values - indicating how closely the data is clustered around the mean or average value. For the *Parenting Today in Victoria* survey we report standard deviations as well as level of statistical significance of differences.

Statistical significance – Refers to the likelihood that a relationship between two or more variables is caused by something other than chance. For *Parenting Today in Victoria* we used a conservative significance level of $p<.001$ which means that the probability of a result occurring by chance is less than one in a thousand.

Validity – The validity of a measure can be thought of as the degree to which the tool measures what it claims (or is supposed) to measure.

Overview

This Technical Report sets out the background, methodology and findings from the 2019 administration of the *Parenting Today in Victoria* Survey involving 2600 parents of children, birth through 18 years, residing in the state of Victoria. When relevant, we describe how these results compare with the 2016 administration of the same survey items.

Parents were invited to participate using random dialling of landlines and mobile telephone numbers. A quota of 40% fathers was predetermined for the sampling of participants, to ensure responses reflected the views of a large proportion of Victorian fathers as well as mothers. Accordingly, the data collected incorporates the views of one of the largest survey samples of fathers available in Australia.

Participants were interviewed via telephone by a contracted polling company, Ipsos.

We employed a robust methodology to maximise the representativeness of the data collected, and we achieved a sample very close to population estimates of key demographic characteristics of the Victorian parent population.

Detailed descriptive findings from the 123-item survey are augmented in this Technical Report through the inclusion of statistical information.

In this report, findings are grouped according to the following themes:

- Family context
- Parent engagement with their child's learning and education
- Experiences of being a parent
- Beliefs about parenting
- Approach to parenting
- Parent coping, wellbeing and support, and
- Technology and parenting.

In addition, sample characteristics are reported and compared with Australian Bureau of Statistics (ABS) Census data from the broader adult population in Victoria. Data were analysed for the sample as a whole and for these subgroups: mothers and fathers, parents living in regional and metropolitan areas, families living in areas classified as having varying levels of socio-economic disadvantage, and parents of children with and without a medical condition or learning difficulty, which we refer to as children with or without complex needs.

The *Parenting Today in Victoria* survey conducted in 2016 was the first large scale survey examining the experiences of parents in Victoria. This second survey three years later involves a new set of parents, and allows us to: (a) continue to monitor how parents are faring in Victoria, (b) understand changes in parenting experiences over time, (c) continue to explore the impact of current experiences on patterns of help-seeking and support need for parents, and (d) capture new information about emerging areas of interest to the Victorian Government, the Parenting Research Centre and other important stakeholders.

This report, based on population weighted data, is primarily descriptive, providing an overview of the method adopted to administer the survey, along with a summary of participant characteristics and key findings.

A summary of major findings is provided in 0, highlighting areas of strength and weakness for parents in our communities.

Box 1: Summary of major findings

Most Victorian parents in 2019 are faring well:

- Most (around 9 in 10) are confident in their parenting
- Most (around 9 in 10) have someone they can turn to for advice about childrearing
- On average they have a quality of life that compares closely to Australian norms
- Most (7 in 10) felt their community was safe for children
- Over half regularly do something for themselves to relax and re-energise

Most engage in generally positive interactions with their children:

- Most (8 in 10) often used positive consequences for good child behaviour
- Most (three quarters) never smacked their children
- Just under two thirds of parents of 3-5 year olds read to their child daily
- Most (nearly 8 in 10) usually talked to their children about problems and issues their children were experiencing

Electronic device use is an emerging area of interest:

- Across all child age groups, the average time per weekday children spend on electronic devices is two hours; the average for adolescents is four hours
- Just under half of parents say their children spend too much time on devices
- Over half think they themselves use electronic devices too much
- Over a third think their children are concerned about parents' use of electronic devices
- About a third agree that devices may get in the way of interactions with their children

There are strengths and gaps in help-seeking:

- Most (close to nine in ten) have someone they can turn to for parenting advice
- Most (over four in five) know where to go for help if they need it
- Many (over four in five) use the internet for information
- Nearly all (nine in ten) would seek professional help if needed
- Three quarters are satisfied with the professional help they have receivedexperienced anxiety symptoms and seven in ten have experienced stress
- Over half do something to relax and re-energise
- Nearly half felt they did not have enough time to get everything done
- Close to half felt tiredness got in the way of being the kind of parent they wanted to be
- Over a third feel they are too hard on themselves about their parenting
- Many (close to one in five) report difficulties in employment situations that prevent them from meeting parenting responsibilities

Parenting self-care varies:

- Over a third are experiencing at least moderate current psychological distress (6% very high distress)
- Since becoming a parent four in ten have experienced symptoms of depression, while half have experienced anxiety symptoms and seven in ten have experienced stress
- Over half do something to relax and re-energise
- Nearly half felt they did not have enough time to get everything done
- Close to half felt tiredness got in the way of being the kind of parent they wanted to be
- Over a third feel they are too hard on themselves about their parenting
- Many (close to one in five) report difficulties in employment situations that prevent them from meeting parenting responsibilities

Perceptions of parenting vary:

- Over half feel parenting comes naturally
- Over half say parenting is determined by how you were parented
- Almost a quarter think there's no role for government in supporting parents

Many experience parenting challenges:

- A quarter say they smack their child
- Almost half wished they didn't become impatient so quickly with their child
- Close to a third think they are overly critical of their children
- Almost half say they are dissatisfied or have mixed feelings about the amount of time they can give their child
- Just under half report their child's sleep to be of concern
- Most (two thirds) worry about their children's future
- Almost a quarter find parenting to be very or extremely frustrating
- Some (nearly one in five) are concerned about what others think of their parenting

Most report positive engagement in education and learning:

- Most (around nine in ten) report positive interactions with their children's teachers or educators
- About three quarters feel able to participate in decisions about kindergarten or school
- Three quarters feel what they do at home with a young child is important for later learning
- Two thirds think homework is important
- Most (seven in ten) indicate that supporting children with homework is part of their role
- A quarter say helping with homework is stressful

Introduction

Parents play a critical role in the health and wellbeing of their children, and parenting factors have been linked to a wide range of child outcomes. These include physical and mental health, cognitive development and educational attainment, substance misuse, unemployment and juvenile offending (Davidov & Grusec, 2006; Davis-Kean, 2005; Repetti, Taylor, & Seeman, 2002).

Further, parenting plays an important role in determining how the broader social environment influences a child's development (Armstrong, Birnie-Lefcovitch, & Ungar, 2005). As a result, supporting parents in their parenting role is recognised as a powerful way of improving childhood wellbeing, health and educational outcomes, and ultimately reducing social disadvantage (National Academies of Sciences, Engineering, and Medicine, 2016; Teti et al., 2017).

In light of this, the Parenting Research Centre, with support from the Victorian Government Department of Education and Training (DET) explored parenting experiences in Victoria via a state-wide survey in 2016 and then repeated this study (with some adaptations to the survey items) with a new cohort of parents in 2019. The findings from these cross-sectional surveys provide valuable insight into the day-to-day experiences of Victorian parents, including their aspirations, their parenting practices, their concerns and their strengths. The survey results also help us understand changes in parenting experiences over time. This report summarises key findings from the 2019 survey, and where relevant compares these to parenting perceptions and experiences in 2016.

RATIONALE

The Victorian Government has a strong history of investment in parenting support. Better engagement and partnering with parents are key principles underlying the Victorian Early Years Learning and Development Framework (VEYLDF) (see State of Victoria, Department of Education and Training, 2016). Partnership with parents has been a priority across Maternal and Child Health, Early Childhood Intervention and schooling for many years. Furthermore, Victorian Government support for parenting has been demonstrated through ongoing investment in the delivery of smalltalk in Supported Playgroups and through In-Home Support (see Victorian Government, 2017), and through parenting education and support, including Victoria's Early Parenting Centres, Regional Parenting Services, the Strengthening Parenting Support Program and Parentline. Information derived from the *Parenting Today in Victoria* survey has and will continue to be used to enhance professionals' understanding of parenting needs.

A continued commitment to providing access to information-rich resources in order to support evidence-based decision-making in the public sector is a priority of the Victorian Government. As expressed in the Victorian Government Reporting and Analytics Framework (State Government of Victoria, 2014) and the Children and Families Research Strategy 2017-2019 (Victorian Government, 2017), the ability to identify, collect, analyse and use data in the course of service delivery is becoming a key activity that will play an increasingly important role in organisational performance, especially when it comes to children experiencing vulnerability. Data collected through the *Parenting Today in Victoria* 2019 survey will continue to generate knowledge that will help government ensure parenting supports and policies are evidence-informed and data driven. Ultimately this will ensure the current needs of Victoria's parents and families are met, and that emerging trends are identified early to promote a proactive response to contemporary parenting issues.

Until 2016 there was no survey like *Parenting Today in Victoria* that could provide the type of accurate and up-to-date information about parents' attitudes and behaviours, their concerns, and their patterns of help-seeking, collected in a rigorous way from a large proportion of the Victorian parenting population. The repeated administration of this survey three years later allows for continued insight into the experiences of parents in Victoria and provides an opportunity to observe changes in that population since 2016.

While other surveys of parents do exist, they are small scale, limited to certain parent or child characteristics (e.g., child age), or they have a limited focus on parenting or, due to the survey method used (e.g., online survey), are not representative of the broader parenting population. In contrast, the *Parenting Today in Victoria* survey is a repeated cross-sectional survey of a large and representative proportion of Victorian parents. As such, it provides vital up-to-date

insights on changing patterns in parenting issues, concerns and experiences that can be used by decision makers to improve policy and service systems in Victoria.

The impacts of the 2016 survey are evident in the contributions of the survey findings to numerous policy- and practice-relevant decisions in Victoria in the past two years, and to our understanding of parenting. Survey findings were used as evidence to underpin the need for key policy changes which were announced as part of the lead up to the 2018 Victorian State Government election. When the returning Government was re-elected, a number of these strategic policy reforms were implemented, including reforms relating to supporting parents of newborns and supporting fathers.

The impact of the 2016 survey is also evident in numerous products that were developed to communicate the findings. Using data from the 2016 survey we produced a detailed Key Findings Report and a Technical Report (see https://www.parentingrc.org.au/publications/parenting-today-in-victoria/). As of July 2019, the *Parenting Today in Victoria* project team have had one paper published in the peer-reviewed iterature (plus five papers currently in production), four op-ed publications (published in The Conversation and The Mandarin), engaging communications materials (an infographic and animation), and five Research Briefs (i.e., policy briefs, which are also useful for service providers and professionals).

The findings and implications of the 2016 survey have also been presented at numerous national conferences and seminars and discussed in radio broadcasts, print and television media.

AIMS

The aim of the Parenting *Today in Victoria* survey in 2019 was to help build an understanding of parenting attitudes, behaviours, practices, help-seeking and concerns. A further aim was to identify any changes in parenting experiences between 2016 (when the first survey was undertaken) and 2019. The second wave of the *Parenting Today in Victoria* survey in 2019 uses a repeated cross-sectional survey, which has advantages over a longitudinal survey because it is more cost effective, is not impacted by sample attrition and is a better reflection of a changing population.

We sought to achieve these aims by employing a scientifically rigorous methodology for developing and administering the survey. Where relevant and possible, we used items from existing scales with known psychometric properties, as well as surveys published in peer reviewed literature and government reports. Where we could not locate existing items relating to the key constructs under consideration, we considered the best evidence from the published literature, and the advice of experts from relevant fields.

This report provides an overview of the methodology along with a detailed summary of key findings from the survey. It serves as the Technical Report and can be used to inform future communications about the survey, its findings and implications.

The 2019 survey includes items across five parenting domains which were identified as priority areas of interest by multiple stakeholders. In addition to demographic items about respondents and their families, items were included under the following domains:

- parent engagement with children's learning
- experiences of being a parent
- beliefs about parenting
- parent coping, wellbeing and support, and
- technology and parenting.

Conduct of the Parenting Today in Victoria survey

SURVEY DESIGN

This is the second survey of a series of planned surveys. A repeated cross-sectional design was deemed most appropriate to the aims of this study. The benefits of using repeated cross-sectional surveys over longitudinal surveys include: increased cost effectiveness; no limitations associated with sample attrition; and a better reflection of the circumstances and support needs of a changing population (Yee & Niemeier, 1996).

Survey design principles

Many of the items included in the 2019 version of the survey are repeated from 2016, to allow for examination of changes in experiences over time. Some 2019 items are new.

The principles adopted to guide the selection of survey items in both 2016 and 2019 are listed in Table 1 and are in line with expert recommendations (DeVellis, 2012) and the design principles underpinning item selection for the Longitudinal Study of Australian Children (Zubrick et al., 2014).

These principles were used as a hierarchical guide for survey item selection, with criteria graded by level of importance (essential, desirable, useful); acknowledging that in many cases, it was not possible to identify existing items which met all of the criteria highlighted in Table 1.

Table 1. Item Selection Principles

IMPORTANCE	ITEM/MEASURE SELECTION GUIDE
Essential	Items adequately quantify the constructs of interest
Essential	Items are appropriately matched to the age range of participants
Essential	Items do not require specific training to administer or complete
Desirable	Items have been demonstrated to be sensitive to change as a result of an intervention (relevant for established scales)
Essential	Administration time (tolerability): The complete set of items should be limited to a length/time duration that does not overburden participants Based on what was achieved in the 2016 survey, in 2019 the survey ideally would 30-40 minutes to complete, around 100 questions
Essential	Items are relevant to the construct of interest: face validity, construct validity
Essential	Items have social validity: stakeholder acceptability, items acceptable to targeted participant group (e.g., brief, simple response format, easily understood, accessible language), items are translatable into community languages
Desirable	Established scales have demonstrated internal consistency
Desirable	Items have demonstrated temporal stability (test-retest reliability)
Desirable	There is an absence of redundancy (data from these items are not available elsewhere)
Desirable	Availability: A preference where appropriate, is given to measures that are free to use or inexpensive, or available in the public domain
Desirable	Item response scales are appropriate to the question, easy to comprehend and avoid ambiguity
Desirable	Items are applicable across the age groups
Useful	Items allow for comparison with other international or national studies or data
Useful	There are Australian norms available for items or scales

Pilot survey

Before commencing the first survey in 2016 we conducted a pilot survey to ensure the appropriateness of the created items and the items adopted from local and international surveys and scales. Conducting a pilot study is a crucial step in good survey design (van Teijlingen & Hundley, 2001). It fulfils a range of important functions including the refinement and reduction of items, the clarification of instructions and the determination of the reliability of scales in a new sample (van Teijlingen & Hundley, 2001). Pilots are an important step when developing a survey and increase the likelihood that the data collected will provide the information requested by stakeholders (Salkind, 2010).

Comprehensive details of the pilot study rationale, methodology, item origin and selection, and results can be found in Section 3 of the Technical Report (Parenting Research Centre, May 2017) of the initial survey.

The first step of the pilot of the 2019 version of the survey involved completion of an electronic (Word document) version of the survey by up to 15 staff members at the Parenting Research Centre who were the parents of children of varying ages. The aim of this first step was to determine the face validity of items, and to identify any spelling or grammatical errors. The second step involved administration of the survey by the selected survey administration company (Ipsos Social Research Institute). The 100 participants in the Computer Assisted Telephone interview (CATI) conducted by Ipsos formed this pilot sample. During this time any issues with items were communicated from Ipsos to the survey developers at the Parenting Research Centre, with adjustments made where needed (e.g., wording clarity, adjustment to skip logic).

SAMPLING FRAME

The parent was the sampling unit of interest. The sampling frame that was adopted aimed to achieve a sample representing all Victorian parents of children aged zero to 18 years. As such, the sample was intended to be representative of all Victorian parents across child ages and across geographic regions, that is, proportional to the regional distribution of the Victorian population.

We applied a quota to sample recruitment so that fathers constituted approximately 40% of respondents. No other quotas were applied, given advice by Ipsos that decisions regarding the representativeness of the sample across characteristics such as geographic location, child age and parent age could be made at any point during the survey administration period, with quotas applied at any time if required.

As with the initial survey in 2016, the option for sample stratification at a mid-way point was available, meaning that if the data did not look representative mid-way through survey administration, underrepresented groups could be specifically targeted for the remainder of recruitment to ensure representativeness was achieved. If needed, statistical weighting techniques could be used to artificially create representativeness after data collection.

At the mid-way point in the 2019 CATI process 40% of respondents were male, so the focus on recruiting fathers was not a priority from then on. However, at the mid-way point Ipsos did report the need to boost numbers of parents of younger children. As a result, we increased the use of mobile phone lists and parents were asked to select their youngest child for the survey. There were also a smaller than expected proportion of parents of 18-year-olds in the sample. This may have been due to the wording in the interview script which indicated that the survey was for parents or carers with a child *aged between newborn and 18 years*. In 2016, the survey script stated that the survey was for parents of a child *aged from birth up to and including 18 years*. To ensure we captured a representative sample, we reverted to the 2016 script so it was more clearly inclusive of parents of 18 year olds.

Because the survey was delivered by CATI, it did not exclude those with poor English literacy skills. Further, the survey was designed to be inclusive of individuals with English as a second language because of the simplicity of the language used. Interpreters from Ipsos were available for participants who spoke Mandarin, Cantonese, Vietnamese and Arabic. These are the four most common languages spoken in Victoria by adults aged 18-60 years who do not also speak English

(i.e., Italian and Greek are more commonly spoken, but most in this age group also speak and understand English). According to ABS Census data, people who speak these four selected languages make up 11.4% of the Victorian population in this age group (ABS, 2016).

As with the first survey in 2016, a limitation of this study is parents who do not have a landline or mobile number (e.g., potentially some homeless families, new migrants and refugees) could not be sampled.

The study did not adopt approaches aimed at over-sampling (meaning specifically targeting) particular sub-populations (e.g., grandparents or Aboriginal or Torres Strait Islander parents). This decision was based on an understanding that oversampling for small subgroups can often provide only limited improvement to the statistical precision of population estimates (see Soloff, Lawrence, & Johnstone, 2005).

SAMPLE SIZE ESTIMATIONS

In general, calculations for ideal sample size estimates are influenced by a range of factors, including: the specific research questions, types of analyses, study design, question/item response design, missing data and sample attrition. In the case of a cross-sectional survey like *Parenting Today in Victoria*, where a broad range of research questions may be asked of the data by a variety of stakeholders, it was challenging to calculate the necessary statistical power at the outset of survey administration.

An estimate of appropriate sample size was based on the calculations undertaken for the 2016 survey (See Section Characteristics of Sample of the Technical Report; Parenting Research Centre, May 2017).

PARTICIPANTS

To be eligible, participants needed to be parents or caregivers who were aged 16 years and over and have sufficient spoken English, Arabic, Cantonese, Mandarin or Vietnamese to participate.

A 'parent' was defined as any person functioning in a parenting role who views themselves as a primary caregiver to a child who at the time of the survey was aged 0 to 18 years inclusive. To ensure respondents were adequately knowledgeable about their child, an additional inclusion criterion was imposed: that the parent spent at least 4 days in a typical month with their child. The person referred to as 'parent' may be any person, biologically related to the child or not, who fulfils the caregiving role. Such a person might not be the child's biological parent. This definition therefore may include grandparents, stepparents, foster parents or other carers. When the report identifies 'mothers' and 'fathers', this refers to the gender of the parent and includes carers other than the child's biological parents, including stepparents, foster parents and adoptive parents.

Parents who had more than one child aged under 18 were asked to complete the survey with regard to the child whose last birthday was closest to the time of conducting the survey. This was to ensure random selection of the 'study child' across parents. We changed this halfway through the interview timeframe to obtain information from parents of younger children. From then on, we asked parents to keep their youngest child in mind when completing the survey.

SURVEY ADMINISTRATION

The survey was administered using randomly selected telephone numbers from a sample of landline and mobile phone numbers to allow for data collection from a randomly recruited and representative sample of the Victorian parent population.

An independent survey and polling company, Ipsos, was selected to administer the survey via CATI. Ipsos have access to datasets sourced from Veda and SamplePages. Veda is Australia's largest credit reporting bureau. Veda are fully compliant with the Privacy Act and have a Compliance Team dedicated to ensuring they remain compliant. SamplePages is the leading provider of accurate and representative data for market and social research in Australia.

Ipsos are fully compliant with the International Standard for Market and Social Research (ISO 20252), and to ISO 9001 the International Standard for Quality Management Systems.

The database used to recruit via mobile phones was obtained by Ipsos from Veda at the beginning of survey administration. Primary data sources for this mobile phone dataset come from the aggregation of over two dozen commercially available privacy compliant lists, including credit assessment lists. The core sources for this dataset are:

- Government - data collated through Veda's relationships with various government departments
- Public – publicly available data that Veda sources directly or through partner organisations
- Veda Proprietary - data collected through Veda's direct relationship with consumers
- Third Party - data acquired from third party partners.

When contacted by Ipsos, all respondents are actively invited to opt out of future calls during the initial introduction. Recipients of calls can also opt out online or via a 1800 number. Opt-out lists are maintained by Veda, Sample Pages and Ipsos. Telephone numbers on the opt-out lists are never included in any future research campaign using these sample sources. These lists never expire.

The mobile phone sample was taken from the database sourced by Ipsos from Veda (as described above) and was made up of 18-34 year old mobile phone owners (including mobile only users and dual mobile plus landline users).

Interviewing procedure

The study was approved by the Parenting Research Centre Human Research Ethics Committee (Project Number: App 47 Approval Date: 7/12/2018). When ethics approval was received, the final survey items and instructions were given to Ipsos, who provided feedback on the appropriateness of the survey formatting for CATI delivery. The Ipsos CATI team then conducted the survey with 100 parents in their mobile and landline lists to review the clarity and wording of the CATI script, as well as response prompting and item wording. Adjustments were made as necessary to the CATI script prior to commencing the full survey administration. Full survey administration took place in six consecutive weeks over February and March 2019.

The CATI involved a trained interviewer administering the survey by reading the survey items to each respondent. The interviewer followed a script with the survey items and the possible response options which allowed them to provide prompts when necessary. This method of survey administration was designed to minimise data entry errors and missing data, ensure timely data collection, and enhance the representativeness of the study sample (through the use of quotas).

The CATI team made initial contact with potential respondents over the phone. If respondents requested an alternate time to complete the survey, the CATI team sent a SMS reminder to mobile users before calling them again to complete the survey. To ensure high quality data collection, the CATI team monitored interviewer performance and invited the Parenting Research Centre project team to observe an interview being conducted to ensure it met expectations. Decisions about when phone calls were made, and the number of attempts to contact the owner of each phone number were made by the CATI team.

The CATI interviewer began by explaining to the potential respondent who was calling and why they were being called. The interviewer then explained that the number was dialled randomly. The interviewer mentioned they were conducting a survey for the Parenting Research Centre on behalf of the Victorian Government for parents raising a child aged from birth up to and including 18 years. Next, potential participants were asked if they were a parent or caregiver with a child in that age range. If so, they were given a small amount of information about the survey aims and an opportunity to seek clarification. Following this, participants were informed about confidentiality and privacy assurances associated with their participation in the survey and the time it would take to complete. Potential participants were also told they could terminate the call and cease their participation at any time and that if they did so their answers would be deleted and not

used. However, participants were also told that if they finished the survey and changed their mind later the information they provided could not be withdrawn because the survey was anonymous, and therefore it was not possible to locate their specific responses.

At this point the interviewer sought the participant's consent to participate by asking questions about whether they would like to take part in this survey, if they understood who the survey was being conducted for and why, and if they understood that information collected from them would be anonymous. A script for the interviewer to obtain informed consent is provided in Appendix 3.

Interviewers asked consenting participants a series of screener questions to verify their eligibility and to assess whether quotas were being filled (i.e., parent age and gender, postcode, and time spent with child in a typical month) to ensure representativeness of the survey findings.

If participants had multiple children, they were asked to keep one of their children in mind when answering child-relevant questions. Initially this was the child whose last birthday was closest to the date the survey was undertaken. Halfway through the interview timeframe this was changed to the youngest child due to an underrepresentation of parents of young children.

The average time to complete the survey was 27 minutes (range 15 to 97).

At the end of each survey, the CATI interviewer thanked the participant and asked them if they had any further questions about their participation in the survey. Appendix 4 outlines the specific scripts that were read aloud to participants at the end of the survey. There were three script options. The choice of which option to use was determined by the level of the participant's total, automatically calculated, Kessler 6 (K6) score. The K6 is a brief measure of psychological distress. It was used in the survey as a measure of parents' current psychological distress. If indicated (e.g. if the automatically calculated K6 score was high), participants were offered the phone numbers of various helplines (Lifeline or Parentline) or encouraged to speak to their general practitioner.

Data collection continued until a total sample of 2600 parents was reached and the specified quota for fathers was met. The CATI facility provided regular updates on data collection to the project team, including sample sizes across subgroups of interest (metropolitan and regional areas, fathers, child age groupings). The Parenting Research Centre research team received non-identifiable participant data at the conclusion of data collection.

THE SURVEY

The final survey for the Parenting *Today in Victoria* study had 123 items consisting of domain specific and demographic items. In addition, there were four introductory questions asked at the start of the interview that established participant eligibility and quota inclusions. All participants were asked questions in all domains, however, the number and type of questions within domains were different according to their relevance for the child's age. Table 2 shows the number of items in all domains and identifies the source of the items from existing scales and surveys, as well as the relevant child ages. It also indicates the items that were used to collect demographic information from participants.

Table 2. Source of final items included in the *Parenting Today in Victoria* 2019 survey

SOURCE	NO. OF ITEMS	CHILD AGES
DOMAIN: Family context, structure and parenting roles		
Devised by Parenting Today in Victoria team	6	all
Wynter et al (2017) partner relationship	1	all
LSAC - Partner support	1	all
Devised by Parenting Today in Victoria team - Partner support	1	all
DOMAIN: Parents engagement with children's learning & education		
Australian Bureau of Statistics survey (reading)	1	0-12 years
Devised by Parenting Today in Victoria team (e.g., ECEC/school attended, importance of early learning/activities, homework)	10	Various depending on question
Kids Matter survey (participation/satisfaction, school/staff)	3	Kindergarten & over
Education State items (govt/non-govt)	1	1 -kindergarten & school age
DOMAIN: Experience of being a parent		
Me as a Parent Scale - Short Form	4	all
Devised by Parenting Today in Victoria team	5	all
Sanders et al (1999) Parenting demanding/rewarding	2	all
DOMAIN: Technology and parenting		
Devised by Parenting Today in Victoria team	11	all
McDaniel & Radesky (2017) technoference item	1	all
DOMAIN: Beliefs about parenting		
Devised by Parenting Today in Victoria team – related to Frameworks Institute (2016) survey (new)	6	all
DOMAIN: Approach to parenting		
Cleminshaw-Guidubaldi Parent Satisfaction Scale: Parent Performance subscale (items from scale)	4	all
Parenting & Family Adjustment Scale (items from scale)	3	all
Parental Communication (item from Parental Communication Scale of the Life Skills Training Questionnaire)	1	4-18 years
DOMAIN: Parent coping, wellbeing and support		
Kessler 6 (psychological distress)	6	all
Personal Wellbeing Index	7	all
Devised by Parenting Today in Victoria team (mental health)	2	all
Fatigue survey devised by Parenting Research Centre	1	all
Devised by Parenting Today in Victoria team (information & support)	5	all
Devised by Parenting Today in Victoria team (quality of help)	3	all
Devised by Parenting Today in Victoria team (groups & online)	4	all
Devised by Parenting Today in Victoria team (safety & child's future)	2	all
Devised by Parenting Today in Victoria team (wellbeing & happiness)	3	all
Father survey- Like Father like Son project (reasons for non-participation in groups)	1	If no participation in groups
Devised by Parenting Today in Victoria team (employment flexibility)	1	all
ABOUT YOUR CHILD (demographics, health & sleep)		
Demographics (e.g., age, gender, no. of children)	2	all
LSAC Child sleep	1	all
Child health	11	all
Child temperament (Australian Temperament Project)	1	all
Devised by Parenting Today in Victoria team (child sleep)	2	1=all, 2=if sleep problem
ABOUT PARENT (demographics)		
Devised by Parenting Today in Victoria team (household, child & partner, living arrangements)	1	all
Devised by Parenting Today in Victoria team – physical health	1	all
LSAC language spoken, ATSI	2	all
LSAC survey & Parenting Today in Victoria team (employment, education, income)	5	all

Existing scales and subscales used

Three existing scales used were the *Me as a Parent scale*, the *Kessler 6* (K6) and the *Personal Wellbeing Index* (PWI).

We used a 4-item short form of the *Me as a Parent scale* (MAAPs). The full version is a 16-item, self-report inventory aimed to measure a parent's global (not task-specific) self-perception of skills, competence, and efficaciousness within the parenting role (Hamilton, Matthews, & Crawford, 2014). MaaPs items are largely drawn from Bandura's (1977, 1982; 1993) notion of self-efficacy and Karoly's (1993) and Sanders' (2008) conceptualization of 'self-regulation'. The original full measure comprises the following constructs: Self-efficacy (self-confidence as a parent), Personal Agency (extent to which child behaviours and outcomes are attributed to one's own efforts), Self-sufficiency (capacity to solve parenting-related problems), and Self-management (degree of parental autonomy regarding goal-setting, self-monitoring and evaluation). Each subscale has four items, all of which underlie the latent (theoretically inferred) variable 'Parental self-regulation' (Hamilton et al., 2014).

To establish the short form we conducted exploratory and confirmatory factor analysis using full scale data from two separate datasets: the 2012 Parenting Self-Efficacy (PSE) study (n = 160), which had pre and post data from an intervention, and the 2016 *Parenting Today in Victoria* survey (n = 2600). This resulted in a reliable 4-item MaaPs short-form (MaaPs-SF) comprising three self-efficacy items plus one self-management item. Pre-intervention and post-intervention PSE results showed similar findings for the long form and the short version. Selected analyses of the *Parenting Today in Victoria* data predicting parenting outcomes were repeated using the MaaPs-SF and gave very similar results to the long-form MaaPs. The conclusion was that the 4-item MaaPs-SF could be reliably substituted for the 16-item scale.

Items are scored on a 5-point Likert scale, from 1 ("strongly disagree") to 5 ("strongly agree"). The short form MaaPs has scores ranging from 4 to 20. The current survey shows internal consistency reliability for the MaaPs-SF to be .823 (Cronbach's alpha).

The *Kessler 6* (K6) is a short version of the Kessler Psychological Distress Scale with six items on feelings, over a limited time frame, of nervousness, depression, restlessness, hopelessness, effort, and worthlessness. In the *Parenting Today in Victoria* survey, this period was specified as 'during the past 30 days'. It is primarily used as a screening test and has been included in Australian surveys such as the Australian Bureau of Statistics Health Survey and the Longitudinal Study of Australian Children. With a Cronbach's alpha level of 0.89, the scale has demonstrated excellent internal consistency (Kessler et al., 2002). For the 2016 *Parenting Today in Victoria* sample, a Cronbach's alpha coefficient of .80 was found across K6 items. For the current (2019) *Parenting Today in Victoria* sample, a Cronbach's alpha coefficient of .836 was found across K6 items.

Validity of the K6 has been demonstrated in a number of international studies by good concordance with independent clinical ratings of serious mental illness (Kessler et al., 2010). Clinical validation studies of the K6 against structured diagnostic interviews have shown the test to have a sensitivity of 0.36, specificity of 0.96, and total classification accuracy of 0.92 at a cut-point ≥ 13 (Kessler et al., 2003).[1] This cut-point is used as an indicator of clinical levels of psychological distress. In this instance, sensitivity refers to the extent to which a positive test finding is associated with the presence of psychological distress, and specificity refers to the extent to which a negative test finding is associated with the absence of psychological distress.

The *Personal Wellbeing Index* (5th ed., International Wellbeing Group, 2013) originates from the Comprehensive Quality of Life Scale (ComQol; Cummins, McCabe, Romeo, & Gullone, 1994). This Index was used in the current survey but not in the 2016 survey. The adult version of the PWI scale has seven items of satisfaction, each one corresponding to a quality

1 Australian scoring of the K6 uses item response scaling of 1-5, rather than 0-4 (ABS, 2012). Therefore the total K6 score range reported herein is 6-30 rather than 0-24, and the clinical cut-off is 19 rather than 13. Moderate distress is considered with scores of 11-18 and low distress with scores 6-10.

of life domain: standard of living, health, achieving in life, relationships, safety, community-connectedness, and future security. For our survey we used these seven items but not the optional eighth item: 'How satisfied are you with your life as a whole?' Responses are on an 11-point scale from 0 = 'No' satisfaction, to 10 = 'Completely satisfied'. Items can be standardised to a scale of 0 to 100 for comparison with norms, which involves a simple linear multiplication of item scores (or item means) by 10. To illustrate, a mean item score of 7.42 would become a standardised mean item score of 74.2. A total score can also be calculated which is the mean of all seven item scores. Normative data is available for this conversion from raw to standard scores. The normative range for items and total scores for Australia is 73.4 to 76.4 points. According to Mead and Cummins (2010), scores that fall below these ranges are suggestive of poorer wellbeing and an increased risk of depression. Increasingly lower scores translate to progressively higher risk of depression.

Australian and international data indicates the PWI has moderate to good internal consistency, with Cronbach's alphas ranging from .70 to .85 (International Wellbeing Group, 2013). Inter-domain correlations are reported between .30 to .55, indicating moderately strong correlations. The PWI has good test-retest reliability, with an intra-class correlation coefficient of .84 over a 1 to 2-week interval (International Wellbeing Group, 2013).

According to the International Wellbeing Group (2013), the unique and shared variance of all seven domains explains between 40% to 60% of variance in 'satisfaction with life as a whole'. This, in addition to the seven domains consistently establishing a single factor that accounts for approximately 50 percent of variance in Australian samples, supports the construct validity of the PWI as a measure of quality of life (International Wellbeing Group, 2013).

There is a moderately strong correlation (r=.78) between the PWI and the Satisfaction with Life scale (a 5-item scale measuring life satisfaction; Diener, Emmons, Larsen, & Griffin, 1985), suggesting good convergent validity.

Items from existing scales

Three items were taken from the *Parent and Family Adjustment Scales* (PAFAS; Sanders, Morawska, Haslam, Filus, & Fletcher, 2013), a 30 item questionnaire measuring parenting practices and family adjustment. Items on the full PAFAS tap into two factors, Parenting, and Family Adjustment, which are broken down into seven subscales (Parental Consistency, Coercive Parenting, Positive Encouragement, Parent-Child Relationship, Parental Adjustment, Family Relationships, and Parental Teamwork).

Psychometric information about the PAFAS support its validity and reliability. The published literature shows the PAFAS has: good convergent validity for parental teamwork, emotional adjustment, and family relationships, and moderate convergent validity for parenting practices; satisfactory discriminant validity (moderate correlations between factors); good predictive validity in terms of its associations with child adjustment and parental self-efficacy as measured by the Child Adjustment and Parental Efficacy Scale (CAPES). Confirmatory factor analysis has supported the scales and subscales; there has been good internal consistency reported (**α** coefficients .70 to .87, Sanders et al., 2014); and existing literature reports satisfactory reliability and validity when the PAFAS is used in different cultural contexts (Guo, Morawska & Filus, 2016; Mejia, Filus, Calam, Morawska, & Sanders, 2014). More recent cross-cultural research examining the internal consistency of the PAFAS subscales reveals low to moderate alphas for some scales (e.g., .52 for Coercive Parenting and .60 for Positive Encouragement), and stronger alphas for other subscales (up to .80 for the Parental Adjustment subscale; Morawska et al., 2019).

There were two considerations that influenced whether the PAFAS or its subscales were included in the final survey in 2016. One was the need to substantially reduce the length of the survey and another was the modest degree of internal consistency shown in the analysis of the pilot data in 2016. Nevertheless, individual items showed strong face validity for the survey purposes, as judged by expert consensus.

Of the three PAFAS items used in the survey one was from the Positive Encouragement subscale and two from Coercive Parenting Subscale. Wording of two of these items was modified slightly from the original: 'When my child behaves well, I

reward them with praise/a treat/attention' ('praise/a treat/attention' replaced 'treat, reward or fun activity' in the original), and we added the phrase 'or yell at' to the original item, 'I argue with my child about their behaviour or attitude'.

Four items were selected from the 10-item *Parent Performance* subscale of the *Cleminshaw-Guidubaldi Parent Satisfaction Scale* (Guidubaldi & Cleminshaw, 1985). On a scale of 1 (strongly disagree) to 5 (strongly agree), parents were asked how much they agreed with four statements about their parenting behaviour. Items were: becoming impatient quickly; consistency in parenting behaviours; being too critical; and, satisfaction with the amount of time they could spend with their child. For the whole 10-item subscale, internal consistency has been quoted as good (alpha .83). With the weighted data available as part of the 2019 *Parenting Today in Victoria* survey, Cronbach's alpha for the four items was .419.

One item adapted from the *Parental Communication Scale* of the *Life Skills Training Questionnaire* (Botvin, 2007) asked parents to indicate the extent to which they talked to their child about problems or issues they might be dealing with.

Two items were introduced in 2019 that were taken from the *Parenting Experience Survey* (Sanders et al., 1999). These items were: 'Parenting is rewarding' and 'Parenting is demanding'. Thinking about their experience as a parent in the past six weeks, respondents were asked to rate these statements on a 5-point scale with 1 = 'not at all', 2 = 'slightly', 3 = 'moderately', 4 = 'very' and 5 = 'extremely'. A 'don't know' option was also provided. Using the style of these two questions, the survey developers at the Parenting Research Centre also added two further items in 2019, which were 'Parenting is frustrating' and 'Parenting is enjoyable'.

Little information is available about the psychometric properties of the Parenting Experience Survey, although results from a large random telephone survey of parents of 0-12 year olds in Queensland (Sanders et al., 1999) revealed that 86% of parents report their parenting experience to be very or extremely rewarding and 63% found parenting to be very or extremely demanding.

Existing surveys used

Longitudinal Study of Australian Children (LSAC): Commencing in 2004, this is a major study following the development of 10,000 children and families from all parts of Australia. LSAC is being conducted in waves, and in the latest wave, conducted in 2018, the children in the two cohorts were 12-13 years and 16-17 years old. LSAC is investigating the contribution of children's social, economic and cultural environments to their adjustment and wellbeing. Having included relevant LSAC items in the *Parenting Today in Victoria* survey permits comparisons with this large data set. There were nine items altogether – seven demographics, one item on the child's sleeping difficulties and an item on partner support and understanding.

Australian Bureau of Statistics (ABS): There was one item asking parents about how many days a family member read to their child in the last week. This item was taken from the ABS Childhood Education and Care Survey (Australian Bureau of Statistics, 2014).

Kidsmatter Parent Survey: Kidsmatter was funded up until 2017 by the Australian Government and *beyondblue* as a mental health and wellbeing initiative focused on schools and early childhood education and care services. Kidsmatter has since been replaced by the Mental Health in Education Program referred to as 'BeYou'. The Parent Survey was freely available on the Kidsmatter website up until 2017. The Kidsmatter Parent Survey had 23 items for obtaining parents' perspectives on their experience with their child's school. Four items from this survey were included in the *Parenting Today in Victoria* 2016 survey. These items related to: how well parents felt they could participate in decision-making and communicate with staff at their child's school or early care and educational setting, and whether parents know how to help their child do well at school or in the early child care and education setting. These four items have been retained for use in the 2019 survey.

Father Survey: One item was adapted from the online *Father Survey* used for the *Like Father Like Son Project*, conducted in 2015-2016 by the University of Sydney with 1001 fathers (Tully et al 2017). This item required all parents (mothers and fathers) to select from eight options to explain their reasons for not attending a parenting program.

We adapted one item from **McDaniel and Radesky** (2017) on 'technoference'. The original item 'I feel like I use my mobile phone too much' was adapted to 'I feel like I use my mobile phone or device too much'. Parents responded on a 5-point scale (strongly disagree, disagree, mixed feelings, agree, strongly agree). This response scale differs from the original 6-point scale used by McDaniel and Radesky.

We adapted one item from a validated scale created by **Wynter and colleagues** (2017) to assess one aspect of the co-parenting relationship. The original item asks parents to rate 'on a scale of 1 (not at all fair) to 5 (very fair), how fair does the current sharing of child care / household tasks between you and your partner feel?'. We used the same response scale, but modified the wording slightly to say 'On a scale of 1 (not at all fair) to 5 (very fair), how fair does the current sharing of child care and other parenting tasks between you and this person feel?', where 'this person' relates to the other person (if anyone) who the parent sees as the most significant other parent for their focus child.

We used one item developed by the Parenting Research Centre for the ***Parent Wellbeing and Fatigue Study*** (2008-2012) which involved over 800 parents who completed an online survey about their experiences with fatigue (Parenting Research Centre, unpublished). Respondents are asked to indicate, on a 5-point scale (strongly agree, agree, not sure, disagree, strongly disagree), whether 'Tiredness gets in the way of being the kind of parent they would like to be'. In the Parent Wellbeing and Fatigue study, 65% of parents who completed the online survey agreed or strongly agreed that tiredness gets in the way of them being the kind of parent they would like to be (Parenting Research Centre, unpublished).

We used one item from a survey developed as part of the ***Australian Temperament Project*** (Prior, Sanson, Smart, & Oberklaid, 2000). The item 'Thinking about your child's temperament, compared to other children, do you think your child is very easy, easy, average, difficulty, very difficult, or cannot say'.

In 2019 six new items were asked of respondents, based on items used by the Frameworks Institute in a piece of research commissioned by the Parenting Research Centre in 2016. This piece of research, *Perceptions of Parenting*, polled experts and the general public about their perceptions of parents and parenting (Frameworks Institute, May 2016). The research found differences in views of parenting between parenting and child development experts and the general public of Australia (i.e., not specifically parents' views). These differences are thought to have implications for the way parenting challenges are perceived and responses to parents in need. To explore how parents themselves felt about some of the areas where expert and public views differed, we asked parents who participated in the Parenting Today in Victoria survey to indicate, on a scale from 1 (strongly disagree) to 5 (strongly agree), their agreement with the following statements:

- Parenting comes naturally
- Parenting can be learned
- The current generation is doing a better job at parenting than the previous generation
- The way one raises their child is determined by how they were parented themselves
- Parenting advice can be helpful given individual differences of each child
- Governments should help families with their parenting.

Items devised for the *Parenting Today in Victoria* survey

As can been seen in Table 2, items were created for components of domains where items from existing measures and surveys were not deemed suitable. This was done for four of the five domains and for demographic information. These new items were based on existing literature, advice from content experts and the information desired by DET. The new items were subject to the face validity checking described for the development of the pilot study, as well as the scrutiny of the Project Board, Steering Committee and the Technical Advisory Group.

Indicator of socio-economic disadvantage

As a broad measure of socio-economic circumstances, we used the Index of Relative Socio-Economic Disadvantage (IRSD) from the Socio-Economic Indexes for Areas (SEIFA) 2001 (Australian Bureau of Statistics, 2001, 2006). The IRSD provides an indication of neighbourhood disadvantage for each family, based on their postcode. Devised by the Australian Bureau of Statistics, this calculation of disadvantage is informed by a range of economic and social conditions of people and households in a geographical area (combining several community-level socio-economic indicators such as income, unemployment, occupation and education of residents in areas). Area scores have been standardised to a distribution with a mean of 1000 and a standard deviation of 100, whereby roughly two-thirds of Australian areas have scores between 900 and 1100 (Pink, 2008). Lower scores indicate more disadvantaged areas and higher scores indicate less disadvantaged areas. Deciles are created by dividing a distribution into ten equal groups. The lowest scoring 10% is given a rank of 1, the second-lowest scoring 10% is given a rank of 2 and so on, up to a highest rank of 10. We used quintiles for our analyses, so the 10 ranks are divided into five, and our analyses were performed on these five ranks.

The validity of the SEIFA and IRSD scales has been established (Australian Bureau of Statistics, 2001).

As an IRSD value is applied to individuals according to their postcode of residence. The IRSD value can be viewed as an indicator of likely socio-economic disadvantage, acknowledging that within a single postcode there may be variability in the actual socio-economic status of households, and that some postcodes will have a broad range of socio-economic wellbeing while others will be more homogenous.

Area of residence – Remoteness

We needed a way to categorise respondents as residing in metropolitan, rural or regional areas based on the postcodes they provided to us.

We used information from the Australian Bureau of Statistics (ABS, 2018) to classify postcodes into Remoteness Area categories. This ABS data uses the Remoteness Areas Structure within the Australian Statistical Geography Standard (ASGS), which divides Australia into five categories of remoteness on the basis of a measure of relative access to services. Access to services are measured using the Accessibility and Remoteness Index of Australia (ARIA) which is produced by the Hugo Centre for Migration and Population Research at the University of Adelaide. The five categories of remoteness are: major cities, inner regional, outer regional, remote, and very remote. Postcodes are the only information we have to identify the geographic location for *Parenting Today in Victoria* respondents, however remoteness classifications based on postcode alone are somewhat inaccurate, as some postcodes include differing categories of remoteness. For instance, the postcode 3216 (Geelong) incorporates two remoteness categories: 'major city' and 'inner regional'.

There are only 96 postcodes that are not classified as a single remoteness category. For each of these postcodes, the ABS provides a breakdown of the proportions of remoteness (ABS, 2018). In most cases, these 96 postcodes are predominantly (i.e., >90%) classified as one specific remoteness category, although in some cases a more even spread between of remoteness classifications exists (e.g., 8% of the 96 postcodes had its largest classification below 60% of the total population distribution within that postcode).

Given that we don't know the precise location of *Parenting Today in Victoria* respondents we applied the dominant (i.e., >50%) remoteness category for anyone residing in one of the 96 postcodes with multiple remoteness classifications. Thus, for instance, if the proportion of the postcode classified as a major city was over 50%, we classified it as a major city.

RESPONSE RATE

Exactly 2600 parents of children aged 0 to 18 years (i.e., birth through to 18 years, 11 months) who were living in Victoria at the time of the survey were recruited to complete the survey.

Response rate is the estimated proportion of all eligible people in the sample population who completed the survey. It can be useful when considering the representativeness of the data. There are many different ways of estimating response rate. We have used the American Association for Public Opinion Research (AAPOR) Standard Definition guidelines (The American Association for Public Opinion Research, 2016) to inform the categorisation of calls and calculation of response rates. Table 3 presents a breakdown of the number of calls made in each category.

Table 3. Number and outcomes of phone calls made through the Parenting Today in Victoria project

	CALL OUTCOMES	NO, OF CALLS
Eligible	Completed interview	2600
	Terminated mid-way	496
	Not available in study period	90
Unknown eligibility	Contact made, but no screener completed (e.g., refusal, language barrier)	8,739
	No answer, answering machine, or engaged	30,747
Not eligible	No eligible respondent (eg., not a parent in Victoria)	18,708
	Exceeded maximum attempts to make contact	35,060
	Ineligible phone number (e.g., fax line, business number, disconnected)	10,480
	Quota already filled	34
	Total	106,954

Response rate was calculated, taking into account the number of cases of unknown eligibility who would have been eligible to complete the survey (see Figure 1). Of all the calls made as part of this study, 3% were eligible to participate. Therefore, it is assumed that 3% of the calls where it was not possible to determine eligibility, would also have been eligible. The resulting estimated response rate for this study was 51.8%, meaning that of all eligible parents in Victoria who were contacted as part of the study, 52% completed the survey. This figure of 52% compares well to the previous survey in 2016 (57% response rate) and to other population-level surveys involving parent respondents. For instance, the Australian Child and Adolescent Survey of Mental Health and Wellbeing reported a response rate of 55% of eligible households who participated in their survey of parents and carers of young children (Lawrence et al., 2015).

Estimated Eligibility Proportion:

Total Eligible / Total Eligible + Not Eligible
3168 / 67,468 = 0.047

Response Rate:

Completed Interviews / Total Eligible + Unknown Eligibility*estimated eligibility proportion

2600 / 3168 + 39468*0.098 = 51.78

Figure 1. Response rate calculations

DATA CLEANING AND OPTIMISATION

Missing data

An advantage of the CATI methodology adopted for *Parenting Today in Victoria* is the high quality of the data collected and the low amount of missing data (compared to other survey methods). Missing data can be due to: a refusal to answer a question; an accidently missed question, a 'don't know' response; or a skipped question (the respondent was not eligible to answer the question and so was filtered out).

Excluding instances where respondents were not eligible to answer an item, a very small amount of missing data due to refusal or 'don't know/unsure' was evident, with only five variables containing more than 1% missing data. Missing data for three of these items ranged from 1.2% to 2.9%, and the remaining two items had missing data rates of 5.3% (respondent's birthday) and 6.8% (household income).

Due to the small amount of missing data, missing values were not imputed for the analyses in this report (that is, for example, missing data were not replaced with average or estimated values), but were excluded for analyses (by listwise deletion), so only valid responses were used in analyses.

Data exploration and cleaning

All data analyses for this report were performed using SPSS.

Prior to detailed analysis, the following steps were undertaken to prepare the data provided by Ipsos to the Parenting Research Centre for analysis:

- Data verification and cleaning: Ensures the range of responses are valid (i.e., there are no unusual outliers), and that data are coded accurately and consistently. Missing data were scrutinised to explore whether there were any systematic reasons why particular data might be missing.
- Establishment of a data codebook and recoding where required: Provides complete information to define each variable, including variable names, descriptive variable labels, the type of variable (e.g., ordinal, continuous, nominal) and value labels (numbers assigned to data item responses, e.g., "1" is for male, "2" is for female, "99" indicates missing data). Coding of nominal and ordinal scale data occurs by converting responses to numerical values that can be quantitatively analysed, where appropriate. Open-ended questions were also numerically coded, where possible (e.g., "other" responses). Some recoding of variables occurred whereby response categories were grouped into fewer categories where meaningful.
- Construction of scales and multiple item variables: Statistical calculations were conducted to verify that items do in fact relate to a multi-item scale (e.g. through the calculation of intra-scale item correlations). Following this, where relevant, total or mean scale scores were calculated for multiple item measures. Some other recoding of items was also performed at this point, to create variables to be included in analyses. For instance, we created a remoteness variable based on postcodes using information available from the ABS to classify postcodes into Remoteness Area categories.

SAMPLE REPRESENTATIVENESS

To examine to what extent the parents who completed the *Parenting Today in Victoria* survey are representative of the broader population, key demographic characteristics from this sample are presented in the following table, relative to Australian Bureau of Statistics (ABS) 2016 Census figures for Victorian parents of children aged 0-18 years and their partners.

Although, for the majority of characteristics examined, the distribution of the *Parenting Today in Victoria* 2019 study sample broadly matched the distribution of parents and partners in the 2016 Census, variables with a discrepancy of 5% or more between the *Parenting Today in Victoria* 2019 sample and the Census population were considered for weighting, with consideration of appropriateness of each relevant variable for weighting also influencing the final calculation of weights. Consequently, data were weighted on respondents' educational level and type of residential location – metropolitan or regional. Table 4 shows the survey percentages, the percentages weighted according to the ABS data, and the percentages from the ABS 2016 Census of parents and partners, as well as the percentages from the 2016 *Parenting Today in Victoria* weighted data.

- In regards to the **Aboriginal and Torres Strait Islander** population, the Parenting Today in Victoria study sample appears representative of the broader Victorian population and the weightings do not make a noticeable difference to proportions in the sample.
- The data weighting resulted in little change in the proportions across **child age** groups.
- The applied weightings changed the **remoteness** proportions to more accurately reflect the proportions of Victorian parents living in major cities, inner regional areas and outer regional and remote areas.
- Parents who speak a **language other than English** at home appear to have been underrepresented in the current sample. While this was also the case in 2016, it is important to clarify that for the Census the ABS phrase their question about the main language spoken at home differently to how it was phrased for the Parenting Today in Victoria survey. In the Census, the ABS asks, 'What is the main language other than English spoken at home?', while our survey asked, 'What is the main language you speak at home?'. Thus, English is included in our proportional calculations of languages spoken, but for the Census data, it may be that respondents speak English plus another language at home, thereby inflating the percentage of respondents who speak a language other than English. We have therefore determined that it is inappropriate to apply a weight to enhance the representation of language other than English speakers in the Parenting Today in Victoria data.
- The comparison of **family income** suggests that the lower income categories were slightly underrepresented in the unweighted data, with improvements shown in the weighted data.
- A larger proportion of individuals in **full-time employment** and with a **postgraduate degree** were included in the study sample than in the general population of Victoria. Weighting the data brought the percentage of full-time employees in the sample down somewhat and improved the population representativeness of parent education so that it closely matched the ABS data.
- Relative to other projects of this kind, this study recruited a large proportion of fathers (41%), which compares to a population estimate of 46% in the ABS 2016 Census. However, the data weighting did not change the population representativeness for **parent gender** – the proportion of fathers remained 41% for weighted data.

TECHNICAL ANALYSES OF THE DATA

This report presents what Victorian parents said about their parenting experiences. Therefore, we adopted a descriptive approach to data analysis. Results are described in the following sections by the weighted percentage of participants who responded in various categories, and, where relevant, measures of central tendency (e.g., mean scores) are used to describe the *average* responses for the weighted sample.

For parent characteristics of interest we sought to determine if there were *statistically significant* differences in responding to the survey questions (for example, if parent gender was related to different levels of confidence in parenting). For such a large sample size, the likelihood of a statistically significant difference emerging is increased, even for very small differences between groups. To account for this, a conservative significance probability threshold of $p<.001$ was adopted for this report.

For continuous data, we used analysis of variance (ANOVA) to determine if there were *statistically significant* differences in the mean scores reported by parents across different groups. Where the data did not satisfy the assumptions for ANOVA, we used a non-parametric alternative.

The assumption that comparison groups will have the same variation or spread of answers (equal variance) is usually required for ANOVA, but this assumption was violated for some analyses. In such cases, the significance of results was confirmed using a Welch Test (which does not assume equal variance between groups).

Another requirement of ANOVA, the assumption of normally distributed scores, was also violated for some analyses. Some researchers consider ANOVA to be a robust test against violations of the normality assumption (as this has little influence on the chance of reporting a relationship between variables that does not really exist, particularly when the sample size is large, e.g., see Glass, Peckham, & Sanders, 1972). Nevertheless, all statistically significant findings (at $p<.001$) were confirmed using the non-parametric Kruskal-Wallis test, which does not assume normally distributed scores.

Table 4. Population characteristics

POPULATION CHARACTERISTICS	Parenting Today 2019 unweighted *N* (%)	Parenting Today 2019 weighted *N* (%)	Parenting Today 2016 weighted %	Victorian parents & partners, 2016 census (abs, 2019) %*
CHILD AGE				
0–2 years	421 (16.2%)	413 (15.9%)	18.1%	NA
3–5 years	480 (18.5%)	481 (18.5%)	17.6%	NA
6–12 years	1034 (39.8%)	1037 (39.9%)	36.7%	NA
13–18 years	665 (25.6%)	666 (25.6%)	27.7%	NA
PARENT AGE				
16-34 years	472 (19.2%)	494 (19.0%)	22.5%	22.8%
35-44 years	1184 (48.1%)	1174 (45.2%)	44.5%	41.8%
45-54 years	630 (25.6%)	624 (24.0%)	28.7%	29.8%
55+ years	173 (7.0%)	167 (6.4%)	4.4%	5.6%
PARENT GENDER				
Male	1076 (41.4%)	1068 (41.1%)	39.7%	45.6%
Female	1524 (58.6%)	1528 (58.9%)	60.3%	54.4%
DIVERSITY				
Aboriginal or Torres Strait Islander population	45 (1.7%)	51 (1.9%)	0.9%	0.7%
Language other than English spoken at home	244 (9.4%)	228 (8.8%)	9.7%	32.5%
REMOTENESS				
Major cities of Australia	1945 (75.1%)	2047 (78.8%)	76.3%	78.8%
Inner regional Australia	526 (20.3%)	438 (16.9%)	19.1%	21.2%
Outer regional & remote Australia	119 (4.6%)	102 (3.9%)	4.4%	
FAMILY INCOME				
<$1000 per week	418 (16.1%)	461 (17.7%)	19.3%	16.3%
$1000–1499 per week	296 (11.4%)	312 (12.5%)	14.9%	15.0%
$1500–1999 per week	403 (15.5%)	410 (15.8%)	18.4%	15.0%
$2000–2499 per week	353 (13.6%)	350 (13.5%)	11.1%	14.4%
$2500–2999 per week	279 (10.7%)	276 (10.6%)	9.3%	9.9%
$3000–3499 per week	213 (8.2%)	199 (7.7%)	5.9%	6.1%
>$3500 per week	462 (17.8%)	407 (15.7%)	9.4%	15.4%
Don't know/not stated	176 (6.8%)	181 (6.9%)	11.7%	7.9%
EDUCATION				
Postgraduate degree level	538 (20.7%)	418 (16.1%)	13.2%	35.7%
Bachelor degree level	728 (28.0%)	555 (21.4%)	17.2%	
Less than year 12	539 (20.7%)	322 (12.4%)	21.8%	13.7%
EMPLOYMENT				
Full time	1368 (52.6%)	1342 (51.7%)	43.4%	48.5%
Part time	387 (14.9%)	374 (14.4%)	21.7%	25.2%
Unemployed	39 (1.5%)	40 (1.5%)	3.2%	3.6%

*Abs census data (collected in 2016) is based on the person who is used as the basis for determining the familial and non-familial relationships within a household, and their partners aged 16 years and over, in families containing children aged 0–18 years.

ANOVA assumes the dependent variable of interest is a continuous measure (e.g., there is equal distance between each point on the scale, such as days in the week). Many of the variables of interest were measured on a 5-point Likert scale, which asks parents to report their level of agreement with a statement (e.g., from (1) Strongly Disagree to (5) Strongly Agree). There is some debate about whether or not it is appropriate to use data from Likert scales in parametric comparisons (such as ANOVA), as these are not strictly continuous variables but rather rank ordered categories (Glass et al., 1972; Jamieson, 2004). To account for this potential issue, a conservative approach was adopted and significant findings were confirmed using an appropriate non-parametric analysis (except for a small number of analyses where there was no non-parametric alternative, because multiple variables were included).

All ANOVA findings that were found to be statistically significant at $p<.001$ were also significant using the non-parametric alternative, and so the ANOVA results have been reported throughout this Technical Report.

When we found statistical significance using ANOVA we also calculated a measure of effect size (partial eta squared). This method of determining effect size gives an indication of the proportion of variance accounted for. An effect side of 0.01 can be considered small, 0.06 medium and 0.14 large.

Where relevant, we used the non-parametric Pearson's chi-Square test to determine if there were *statistically significant* differences in the proportion of parents who reported a particular outcome. Chi-Square tests are non-parametric comparisons and can be used with categorical data as well as data that is not normally distributed.

Relationships between interval-level data, such as numeric scales, were tested with Pearson correlation coefficient (*r*) or its non-parametric alternative.

Subgroup analyses

This *Technical Report* presents results for the total weighted sample, as well as comparing parenting experiences of parents or children in different circumstances. These include: fathers (male carers) and mothers (female carers), parents living in regional/remote areas (defined as Inner/Outer Regional or Remote/Very Remote by ABS remoteness classification, based on postcodes) versus metropolitan areas (defined as Major Cities by ABS remoteness classification, based on postcodes), families living in socio-economically disadvantaged or more advantaged areas (using the IRSD based on postcode), and parents of children with medical conditions or learning difficulties, which we refer to as 'children with complex needs'.

We have also reported, where relevant, how the 2019 data compared with the initial Parenting Today in Victoria survey conducted in 2016. Rather than statistical analyses of differences, we have simply compared descriptive data – usually percentages – to illustrate change in population-level (i.e., prevalence) experiences over the three years between surveys.

The analyses presented in this report do not attempt to explain why differences might exist between groups. For example, in some cases differences between how mothers and fathers responded to the survey questions might be explained by factors such as parents' age or education rather than parents' gender per se. There may be explanations for observed differences other than just the subgroup membership. The analyses described in the current report are indicative of the existence of differences between subgroups, but they do not attempt to explain all the variation in the data – more complex analyses would be needed to do this. Further analyses, examining relationships between multiple variables, would be required to understand the differences we describe between groups.

Furthermore, analyses in this report have not attempted to capture any potential moderating effects that might exist. For example, there might be more parents of children with complex needs in metropolitan than regional areas – and thus there may be a possible moderating effect of area of residence if there is a difference in scores of parents of children with and without complex needs. Further analyses would be required to identify and account for any possible moderating effects.

Characteristics of sample

PARENT CHARACTERISTICS

A total of 2600 parents or caregivers (hereafter referred to as parents) completed the *Parenting Today in Victoria* survey in 2019. Sections 0, 0, and 0 report on data about the unweighted sample, and therefore these sections are a record of what the individuals participating in this survey said. Beside the figures with the unweighted data are figures with the weighted data and the text below provides a description of how the weighting changed the proportions in the parent and child characteristics and their living arrangements. Detailed information about characteristics of survey respondents is also provided in Table 5 and Table 6.

Of the total number of survey respondents, 1076 were men and 1524 were women (41% male compared to 40% in 2016).

Of parents interviewed, close to 2% identified themselves as being of Aboriginal or Torres Strait Islander descent (it was closer to 1% in 2016). Parents were asked the main language they spoke at home, 9% of parents (12% fathers and 7% mothers) spoke a main language other than English at home (the total was 11% in 2016). As seen in Table 5, the weighting did not change the proportions of respondents of Aboriginal or Torres Strait Islander decent, and there was minimal (0.6%) change for language other than English spoken at home.

The common languages spoken by respondents who spoke a language other than English at home included Cantonese, Arabic, and Vietnamese.

The majority of parents surveyed were biological parents (96% of mothers and 96% of fathers for the unweighted data and no change in proportions for weighted data), with a small proportion of stepparents, foster parents, adoptive parents, grandparents and 'others'. These proportions were very similar to those observed in the previous survey in 2016.

Parents were aged from 20 to 85 years. Similar to 2016, on average mothers were aged 41 years and fathers 43 years (unweighted and weighted data). The distribution of mothers' and fathers' ages are presented in Figure 2. Parent age by mothers and fathers (unweighted data)

and Figure 3. Parent age by mothers and fathers (population weighted data). Mothers' and fathers' data here do not include grandparents and 'others'. Figure 3 presents the weighted distribution which shows very limited change in proportions in age categories compared to the original survey findings in 2016.

Parents were asked about the highest level of education they had completed. Of the parents surveyed, 50% of fathers and 48% of mothers had a university degree (bachelor or postgraduate) (in 2016, the figures were 45% and 44% for fathers and mothers, respectively). In 2019, 11% of fathers and 10% of mothers left school before completing year 12 (in 2016, the figures were 12% and 13% for fathers and mothers, respectively). See Figure 4 and Figure 5 for unweighted and weighted parent education proportions by parent gender, for 2019.

Participants were asked to report their current main work or study activities and, if applicable, were able to select more than one option from the categories presented in Figure 6. The majority of fathers reported they were in paid employment (80% full time; 79% in 2016) and 28% of mothers were in full time paid employment (21% in 2016).

Thirty percent of mothers reported 'home duties' were currently a main work activity (see Figure 6), which is lower than in 2016 when over a third reported home duties as a main work activity. Nevertheless, as for 2016, a higher proportion of mothers reported home duties as a main occupation compared to fathers; in both the 2019 and 2016 surveys, just 8% of fathers reported home duties as a main occupation.

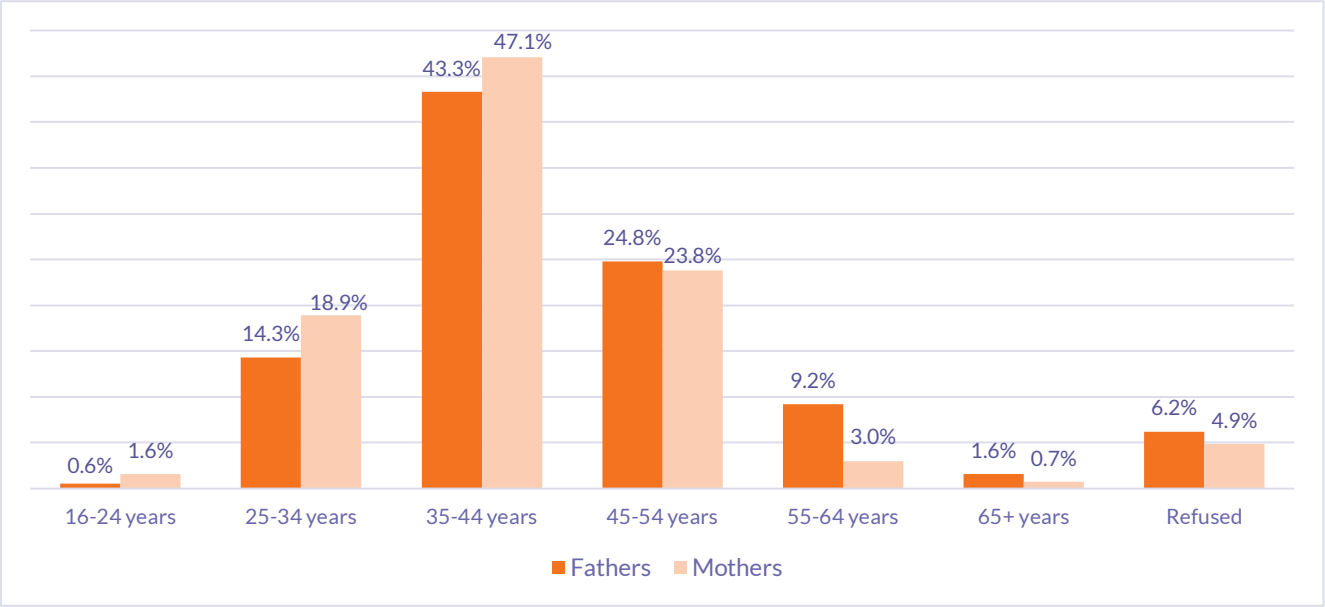

Figure 2. Parent age by mothers and fathers (unweighted data)

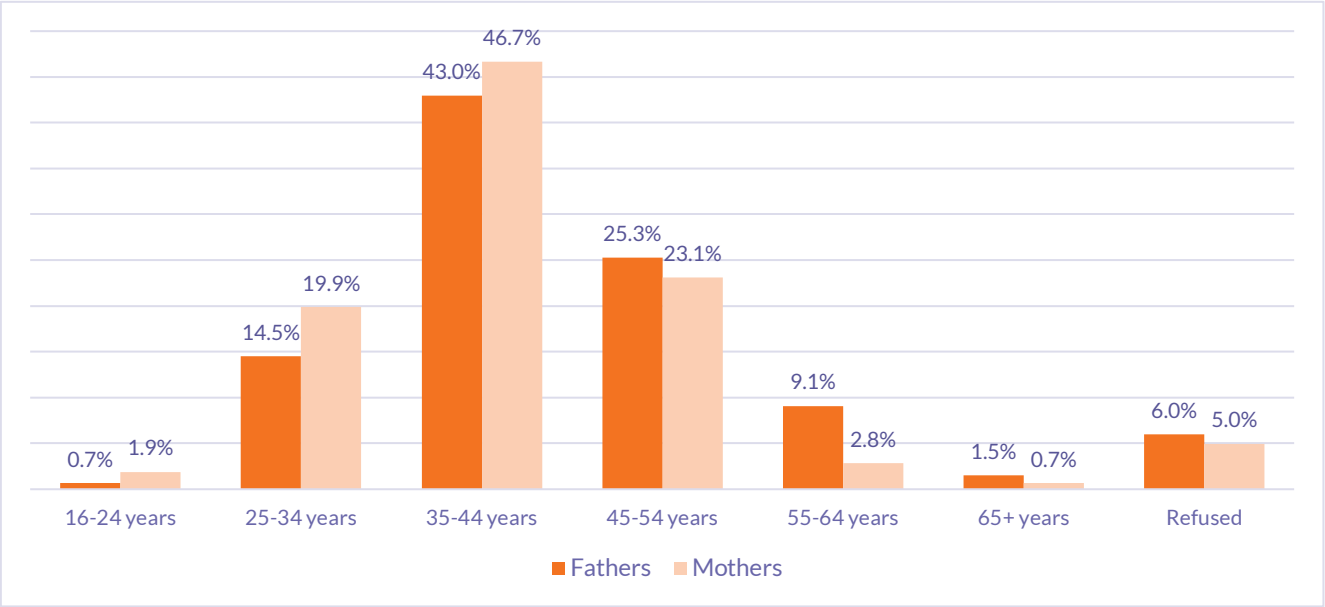

Figure 3. Parent age by mothers and fathers (population weighted data)

Figure 5 and Figure 7 show the population weighted estimates for parent education level and employment. The weighted representation of Diploma, Bachelor and Postgraduate education was 54% for fathers and 57% for mothers, compared to 62% and 64% respectively with unweighted data. The weighted proportions for Diploma and vocational education were higher in the weighted sample, and there were higher percentages for year 12 and below using weighted data for both mothers and fathers. Thus, applying the sample weight reduced the influence of those with higher levels of education, and increased the influence of those with below university level education. The same was true in 2016.

Apart from very small decreases in the proportion of mothers engaged in full or part time paid employment and a small increase in the proportion of mothers engaged in home duties (see Figure 7), there were no other noteworthy differences the proportions within different categories of employment after weighting. In 2016 only a small increase in home duties was evident in the weighted data.

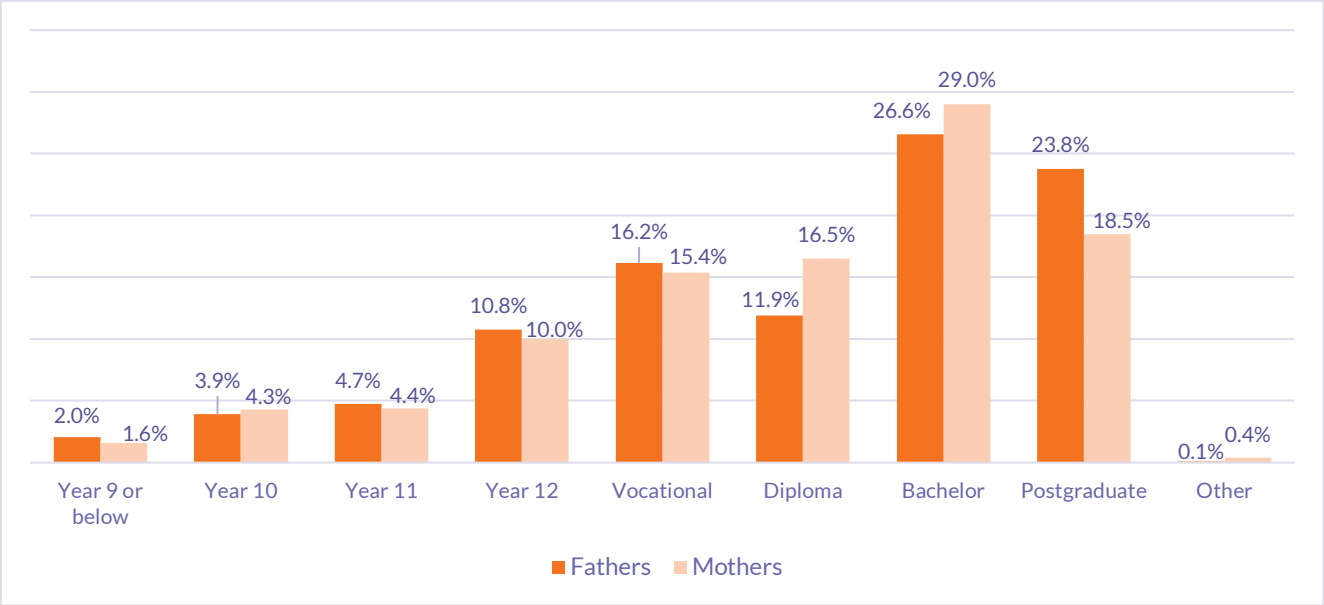

Figure 4. Parent education by mother and fathers (unweighted data)

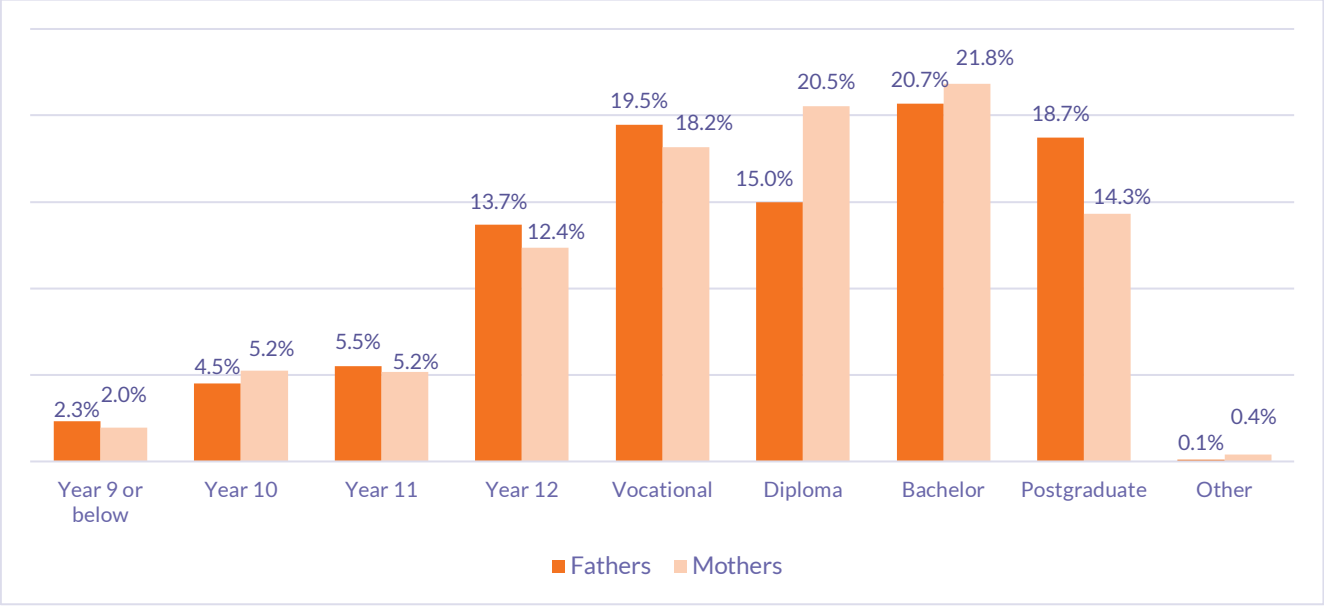

Figure 5. Parent education by mothers and father (population weighted data)

Family income was determined by asking parents to report the total income for their household (before tax) from work, investments or government benefits, including all adults who live in their home; this data is presented in Figure 8.

The median household income reported was $104,000 to $129,948 annually or $2000-$2499 per week (in 2016 the median was lower, at $78,000 to $103,948 annually or $1500 to $1999 per week). A larger proportion of fathers than mothers reported a household income above this median level (48% vs. 30%).

Figure 9 shows similar percentages to the unweighted sample but with some movement towards lower proportions in the high-income brackets (i.e., above $130,000 annual income) than the unweighted survey findings.

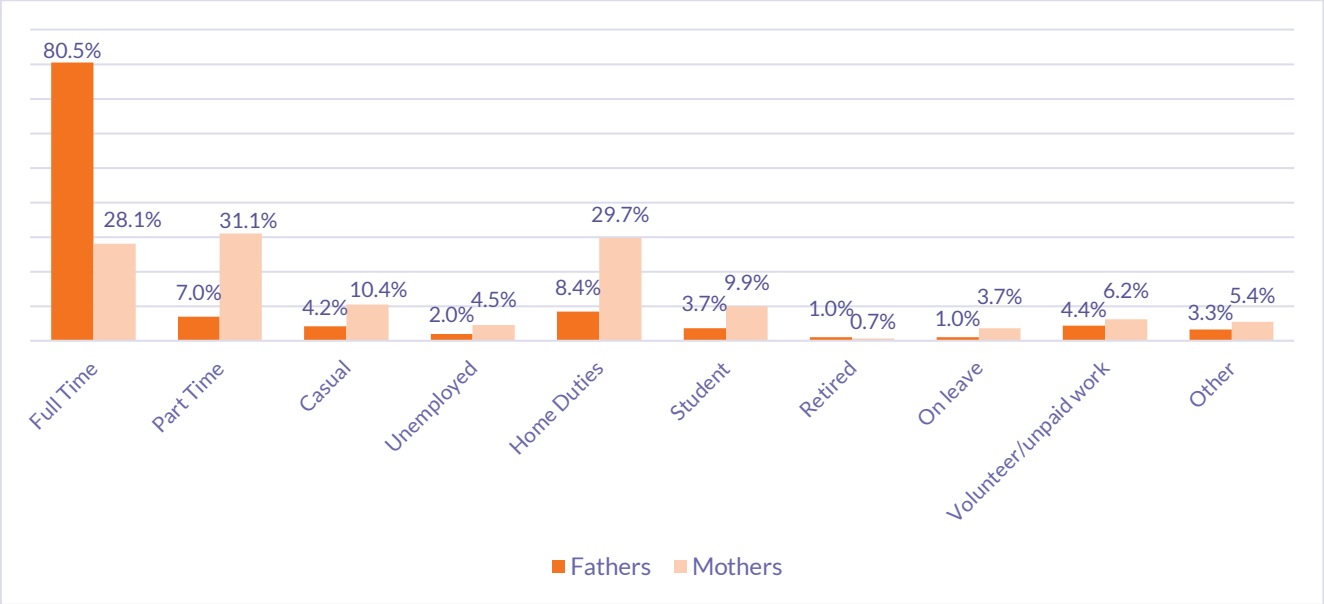

Figure 6. Parent employment by mothers and fathers (unweighted data)

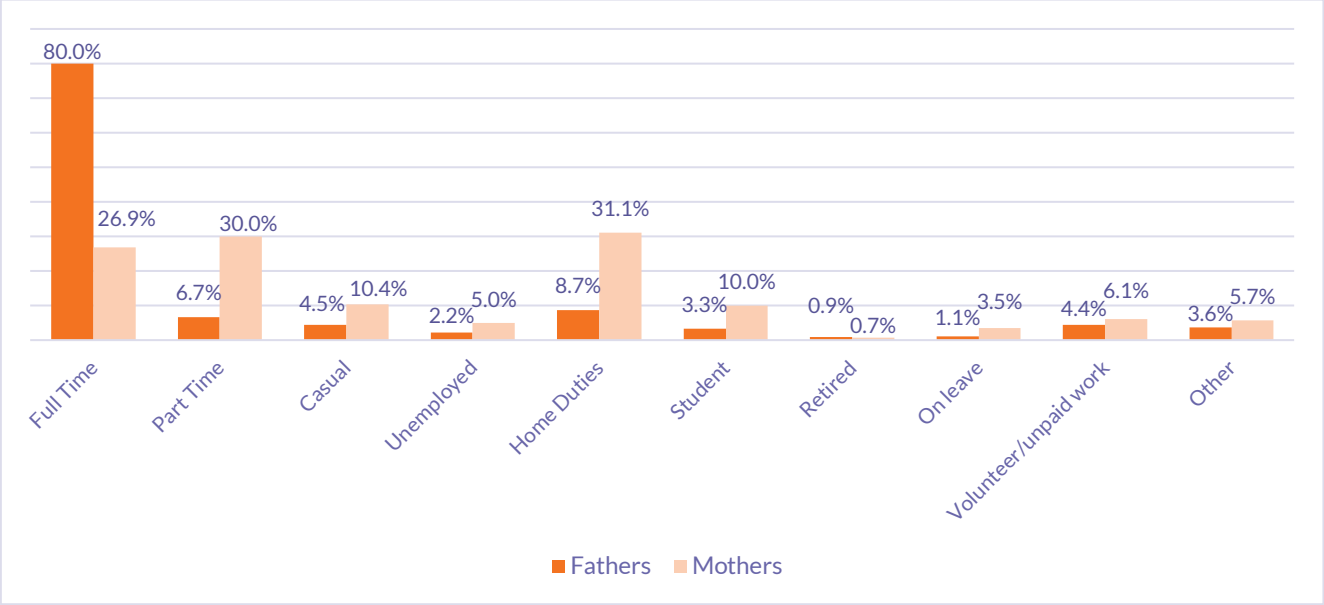

Figure 7. Parent employment by mothers and fathers (population weighted data)

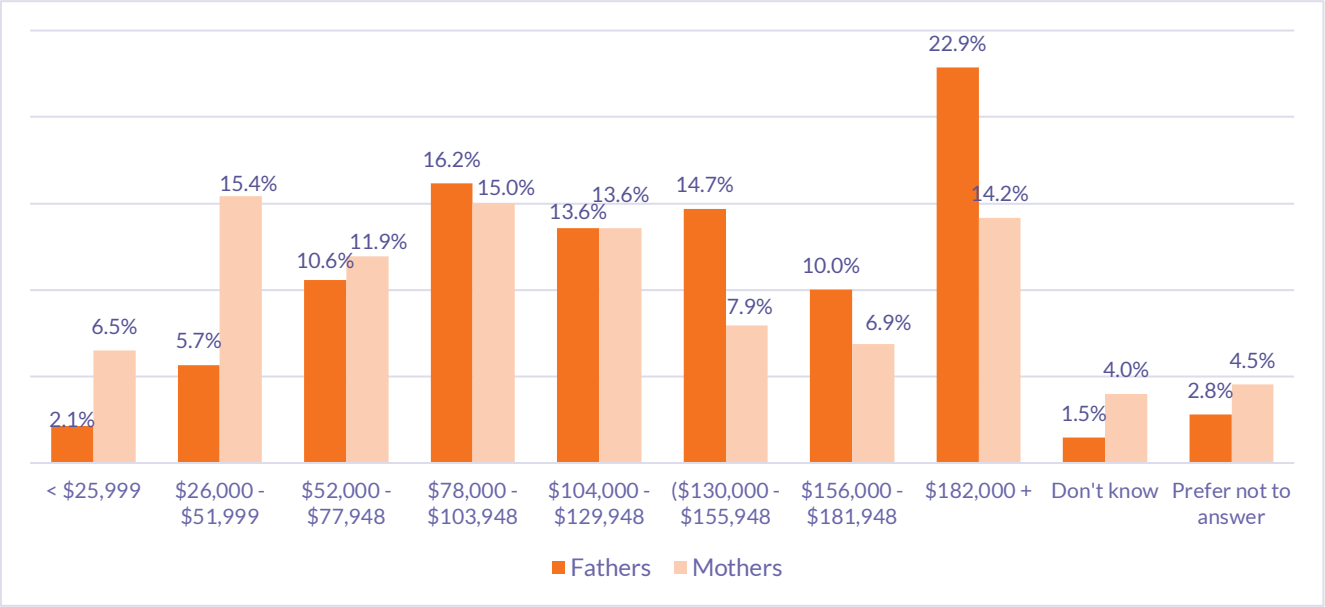

Figure 8. Household income by mothers and fathers (unweighted data)

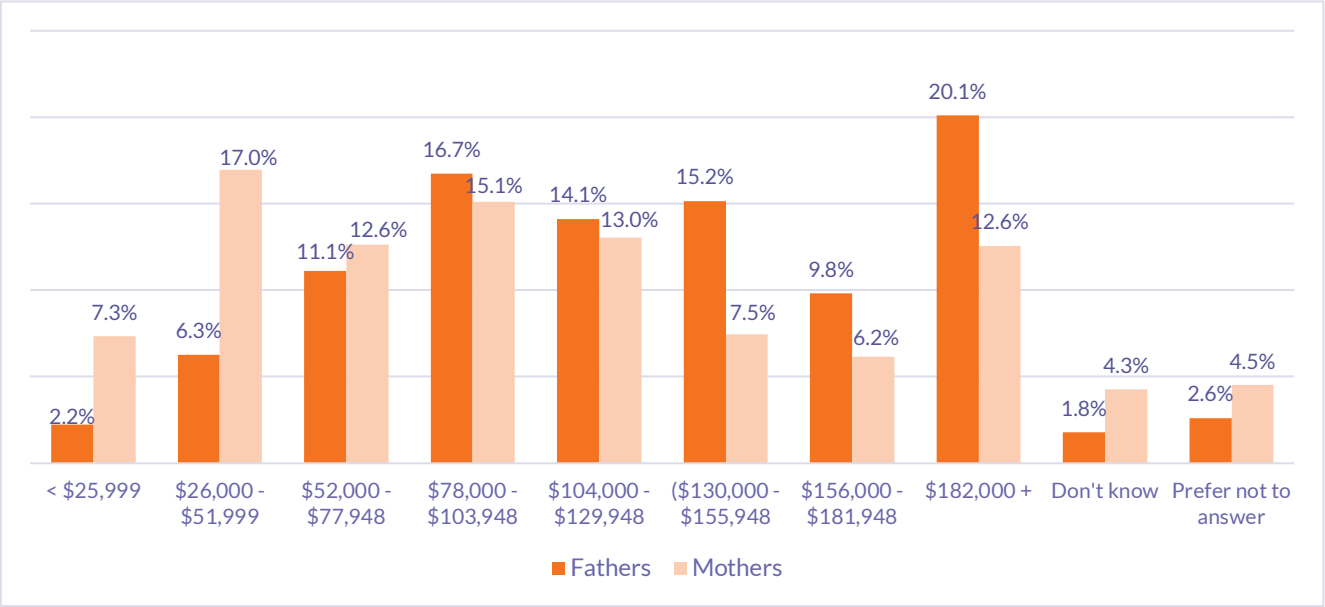

Figure 9. Household income by mothers and fathers (population weighted data)

Table 5. Parent and family sample characteristics, *N* (%) (unweighted data)

PARENT CHARACTERISTICS	Male N = 1076	Female N = 1524	Total N = 2600
RELATIONSHIP TO CHILD			
Biological Parent	1035 (96.2%)	1455 (95.5%)	2490 (95.8%)
Foster Parent	5 (0.5%)	10 (0.7%)	15 (0.6%)
Stepparent	19 (1.8%)	19 (1.2%)	38 (1.5%)
Adoptive Parent	8 (0.7%)	5 (0.3%)	13 (0.5%)
Grandparent	3 (0.3%)	20 (1.3%)	23 (0.9%)
Other	6 (0.6%)	31 (2.0%)	21 (0.8%)
PARENT AGE			
16 – 24 years	6 (0.6%)	24 (1.6%)	30 (1.2%)
25 – 34 years	154 (15.3%)	288 (18.9%)	422 (17.0%)
35 – 44 years	466 (46.2%)	718 (47.1%)	1184 (45.5%)
45 – 54 years	267 (26.5%)	363 (23.8%)	630 (24.2%)
55 – 64 years	99 (9.8%)	46 (3.0%)	145 (5.6%)
65 years +	17 (1.7%)	11 (0.7%)	28 (1.1%)
Refused	67 (6.2%)	74 (4.9%)	141 (5.4%)
AREA			
Major Cities	822 (76.6%)	1123 (74%)	1945 (75.1%)
Inner Regional	206 (19.2%)	320 (21.1%)	526 (20.3%)
Outer Regional	45 (4.2%)	72 (4.7%)	117 (4.5%)
Remote Australia	0 (0%)	2 (0.1%)	2 (0.1%)
Missing	3	7	-
IDENTIFY AS ATSI			
Aboriginal or Torres Strait Islander	13 (1.2%)	32 (2.1%)	45 (1.7%)
MAIN LANGUAGE			
English	945 (87.8%)	1411 (92.6%)	2356 (90.6%)
Cantonese	10 (0.9%)	5 (0.3%)	15 (0.6%)
Arabic	1 (0.1%)	5 (0.3%)	6 (0.2%)
Vietnamese	5 (0.5%)	5 (0.3%)	10 (0.4%)
Other	115(10.7%)	98 (6.4%)	213 (8.19%)

PARENT CHARACTERISTICS	Male *N* = 1076	Female *N* = 1524	Total *N* = 2600
EMPLOYMENT			
Full Time	866 (80.5%)	429 (31.1%)	1295 (49.8%)
Part Time	75 (7.0%)	474 (31.1%)	549 (21.1%)
Casual	45 (4.2%)	158 (10.4%)	203 (7.8%)
Unemployed seeking work	22 (2.0%)	69 (4.5%)	91 (3.5%)
Home duties	90 (8.4%)	453 (29.7%)	543 (20.9%)
Full time student	13 (1.2%)	54 (3.5%)	67 (2.6%)
Part time student	27 (2.5%)	97 (6.4%)	124 (4.8%)
Retired	11 (1.0%)	10 (0.7%)	21 (0.8%)
On leave	11 (1.0%)	56 (3.7%)	67 (2.6%)
Volunteer/ unpaid work	47 (4.4%)	95 (6.2%)	142 (5.5%)
Other	35 (3.3%)	83 (5.4%)	118 (4.5%)
EDUCATION			
Year 9 or below	22 (2.0%)	24 (1.6%)	46 (1.8%)
Year 10	42 (3.9%)	65 (4.3%)	107 (4.1%)
Year 11	51 (4.7%)	67 (4.4%)	118 (4.5%)
Year 12	116 (10.8%)	152 (10.0%)	268 (10.3%)
Vocational qualification	174 (16.2%)	234 (15.4%)	408 (15.7%)
Diploma	128 (11.9%)	252 (16.5%)	380 (14.6%)
Bachelor Degree	286 (26.6%)	442 (29%)	728 (28.0%)
Postgraduate Degree	256 (23.8%)	282 (18.5%)	538 (20.7%)
Other	1 (0.1%)	6 (0.4%)	7 (0.3%)
Refused	0 (0.0%)	0 (0.0%)	0 (0.0%)
ANNUAL HOUSEHOLD INCOME			
<$25,999	23 (2.1%)	99 (6.5%)	122 (4.7%)
$26,000-$51,999	61 (5.7%)	235 (15.4%)	296 (11.4%)
$52,000 - $77,948	114 (10.6%)	182 (11.9%)	296 (11.4%)
$78,000 - $103,948	174 (16.2%)	229 (15.0%)	403 (15.5%)
$104,000 - $129,948	146 (13.6%)	207 (13.6%)	353 (13.6%)
$130,000 - $155,948	158 (14.7%)	121 (7.9%)	279 (10.7%)
$156,000 - $181,948	108 (10.0%)	105 (6.9%)	213 (8.2%)
$182,000 +	246 (22.9%)	216 (14.2%)	462 (17.8%)
Don't know	16 (1.5%)	61 (4.0%)	77 (3.0%)
Prefer not to answer	30 (2.8%)	69 (4.5%)	99 (3.8%)

CHILD CHARACTERISTICS

Table 6 presents key characteristics of the focus children of respondents in the 2019 sample. The focus children were aged from zero to 18 years (inclusive) with 51% boys and 49% girls. On average, both the boys and girls were 8.3 years old. There was an even spread of boys and girls across infancy, preschool, primary and secondary school age categories, as shown in the figures below.

When population weightings were applied, there were minimal differences between the unweighted (Figure 10) and weighted proportions for the four child age categories (Figure 11).

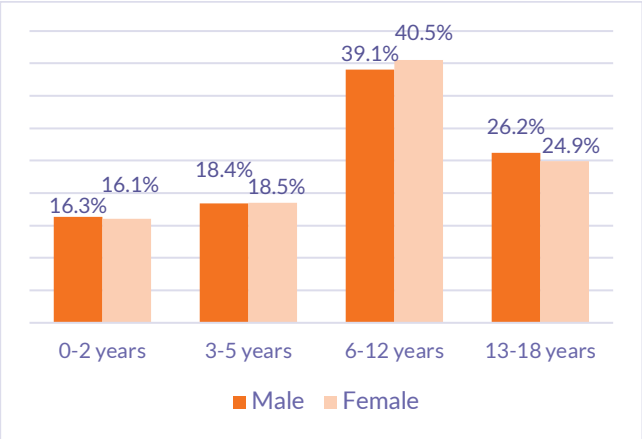

Figure 10. Child age by boys and girls (unweighted data)

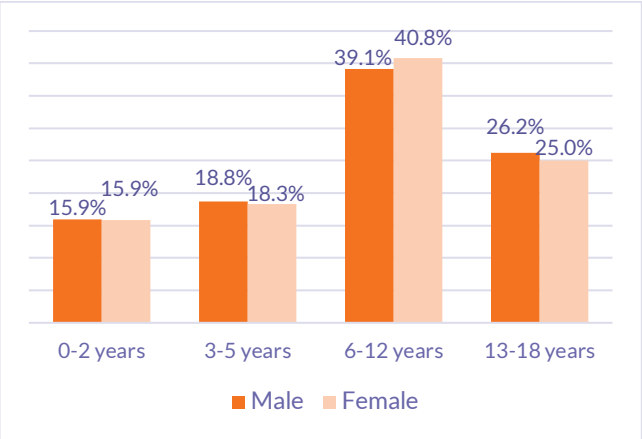

Figure 11. Child age by boys and girls (population weighted data)

Parents were asked whether the child they were reporting on was their first child (meaning the first child they had been involved in raising). Fifty-seven percent of the children in the original sample were their parent's first child (44% in 2016), and this proportion did not differ for boys and girls. When weighting was applied, the proportion of children who were their parents' first child was the same (57%).

The majority of children (97% boys, 98% girls) were said to be in good to excellent health (see Figure 12), which closely compared to 2016 findings (96% and 97% respectively). Weighted data revealed minimal differences in these proportions (96.5% boys, 97.2% girls, see Figure 13).

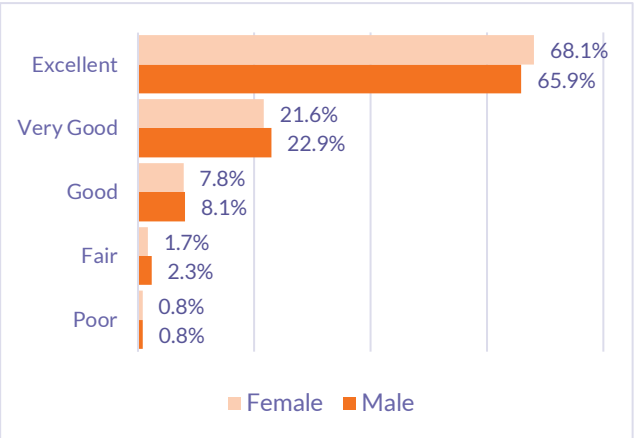

Figure 12. Child health by boys and girls (unweighted data)

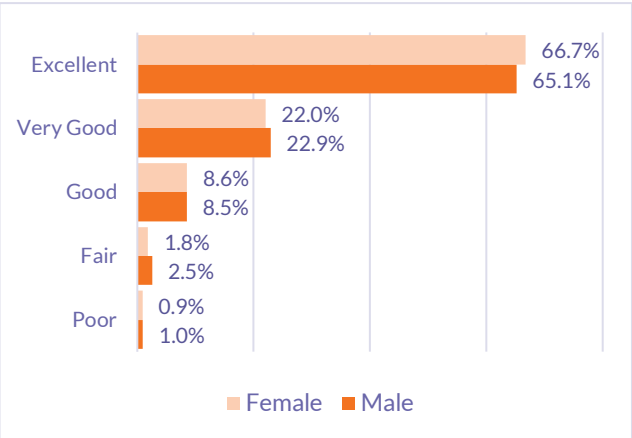

Figure 13. Child health by boys and girls (population weighted data)

A series of survey items asked parents about any medical conditions or learning difficulties their children were currently experiencing. Responses to these items about the focus child were recoded into a single variable which indicated whether or not the focus child had 'complex needs'. According to the survey questions, a child with 'complex needs' had, at the time of the survey, been experiencing a medical condition or learning difficulty that had lasted or was likely to last at least 6 months.

When it came to responses to the questions about a focus child's complex needs, particular effort was taken to recode responses given by parents under the 'other' response option. It may be that the way these 'other' responses were recoded in 2019 was different than in 2016 (i.e., potentially more or less stringent). However, in general when parents report that the child's condition met the criteria for a 'complex need' this was accepted, unless it was clear to the researchers that the condition was minor or unlikely to be considered chronic (e.g., 'runny nose', 'moody').

Twenty-eight percent of children were reported to have complex needs (29% weighted data, compared to 26% in 2016), and this proportion was statistically significantly higher for boys (32% unweighted, 33% weighted) than for girls (24% unweighted, 24% weighted), $\chi^2(1) = 243.553$, $p<.001$. Of those children with complex needs, a third were reported to have multiple conditions (range 2–11). In comparison, a quarter of children with medical conditions or learning difficulties in 2016 had multiple conditions/difficulties (range in 2016 was 2 to 5). The 2019 weighted data on the presence of child complex needs show few differences from the unweighted data. Where there are differences, they are within one percentage point.

In 2019 we asked a new question, using an item developed by the Australian Temperament Project, which asked parents to think about their child's temperament, and rate it compared to other children as: very easy, easy, average, difficult or very difficult. A 'cannot say' option was also permitted.

Most respondents (63% unweighted and weighted) rated their child as easy or very easy to manage. Just over a quarter (27% unweighted, 26% weighted) viewed their child as having an average temperament, and one in ten described their child's temperament as difficult or very difficult (see Figure 14 and Figure 15). Although boys were slightly more likely to be rated as having a difficult temperament, this gender difference but did not meet the conservative statistical significance level defined for this report (that is, $p<.001$).

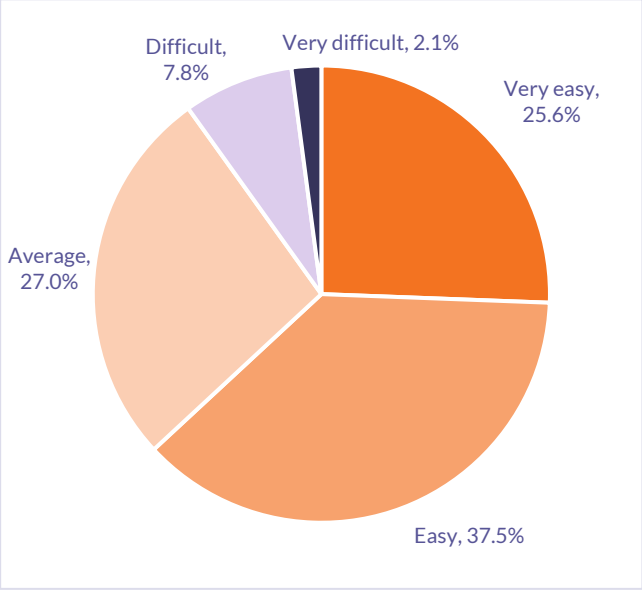

Figure 14. Child temperament by boys and girls (unweighted data)

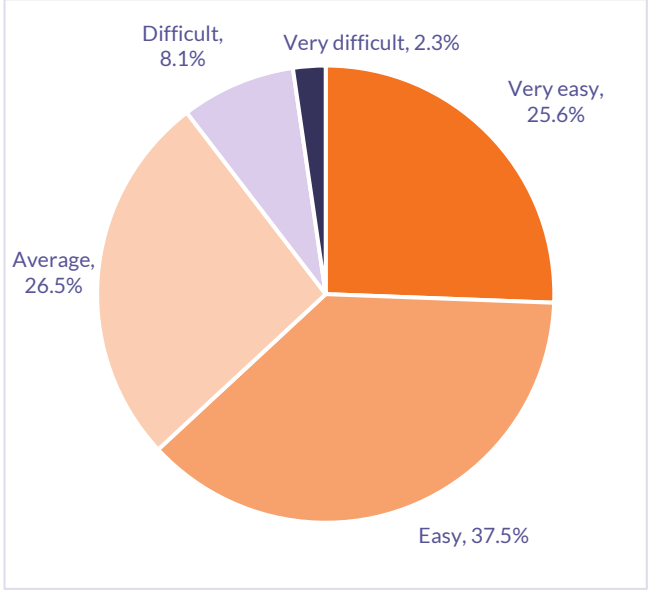

Figure 15. Child temperament by boys and girls (population weighted data)

Table 6. Target child sample characteristics, *N* (%) (unweighted data)

Child Characteristics	Male *N* = 1336	Female *N* = 1264	Total *N* = 2600
CHILD AGE			
0 - 2 years	218 (16.3%)	203 (16.1%)	421 (16.2%)
3 - 5 years	246 (18.4%)	234 (18.5%)	480 (18.5%)
6 - 12 years	522 (39.1%)	512 (40.5%)	1034 (39.8%)
13 - 18 years	350 (26.2%)	31.5 (24.9%)	665 (25.6%)
FIRST CHILD			
Yes	768 (57.5%)	717 (56.7%)	1485 (57.1%)
MEDICAL CONDITION OR LEARNING DIFFICULTY/COMPLEX NEEDS			
Yes	431 (32.3%)	305 (24.1%)	736 (28.3%)
One condition	276 (20.7%)	214 (16.9%)	490 (18.8%)
Multiple conditions	155 (11.6%)	91 (7.2%)	246 (9.5%)
CHILD HEALTH			
Excellent	878 (65.9%)	859 (68.1%)	1737 (66.9%)
Very Good	305 (22.9%)	273 (21.6%)	578 (22.3%)
Good	108 (8.1%)	99 (7.8%)	207 (8.0%)
Fair	31 (2.3%)	21 (1.7%)	52 (2.0%)
Poor	11 (0.8%)	10 (0.8%)	21 (0.8%)
Unsure	3 (0.2%)	2 (0.2%)	5 (0.2%)
CHILD TEMPERAMENT			
Very easy	321 (24.1%)	343 (27.2%)	664 (25.6%)
Easy	505 (37.9%)	468 (37.1%)	973 (37.5%)
Average	350 (26.3%)	349 (27.7%)	699 (27.0%)
Difficult	118 (8.9%)	84 (6.7%)	202 (7.8%)
Very difficult	39 (2.9%)	16 (1.3%)	55 (2.1%)

LIVING ARRANGEMENTS

In total, 2378 (92%) of respondents indicated their focus child had another person in their lives who the parent viewed as the child's other parent. In 84% of these cases the other parent lived with the respondent (83% in the weighted sample). For fathers, this rate was higher (90% unweighted; 89% weighted) compared to mothers (80% unweighted; 78% weighted). Within the total sample the rate of 'two-parent' households was 77% (86% in the unweighted sample for male respondents and 70% for female respondents). These parent gender differences reflect discrepancies also found in 2016, and were minimally affected by sample weights (84% for males, 68% for females).

As presented in Table 7, the number of children currently living in surveyed households ranged from 0 to 10 (0-8 in 2016), with 31% (unweighted) of parents reporting that they lived with one child (31% weighted), 44% with two children (44% weighted) and 17% with three children (17% weighted). These proportions are very similar to 2016 data.

Table 7. Number of children living in the household four days per week or more, *N* (%) (unweighted data)

CHILDREN IN HOUSEHOLD	MALE *N* = 1076	FEMALE *N* = 1524	TOTAL *N* = 2600
0	42 (3.9%)	17 (1.1%)	59 (2.3%)
1	337 (31.3%)	475 (31.2%)	812 (31.2%)
2	470 (43.7%)	677 (44.4%)	1147 (44.1%)
3	184 (17.1%)	250 (16.4%)	434 (16.7%)
4	30 (2.8%)	74 (4.9%)	104 (4.0%)
5	6 (0.6%)	21 (1.4%)	27 (1.0%)
>5	7 (0.7%)	10 (0.7%)	17 (0.7%)

Eleven percent (*n*=273) of respondents (unweighted data) indicated they were neither living with the child's other parent or with another partner who could be viewed as the child's other 'parent'. Therefore, we can consider these respondents to be 'single parents'. The parent gender differences for these single parenting data are large; 7% of fathers and 15% of mothers are single parents. These parent gender differences were also observed in 2016.

Respondents were asked how many children they had helped to raise, including biological, adopted, fostered or stepchildren. Responses generally ranged from one (the focus child) to 21, although two respondents gave very high numbers to this question (43 and 145 children). Certainly, the majority of respondents (86%) had been involved in raising just one, two or three children. Figure 16 shows the distribution of responses to this item using unweighted data. Weighting did not alter the distribution by more than one percentage point for any values.

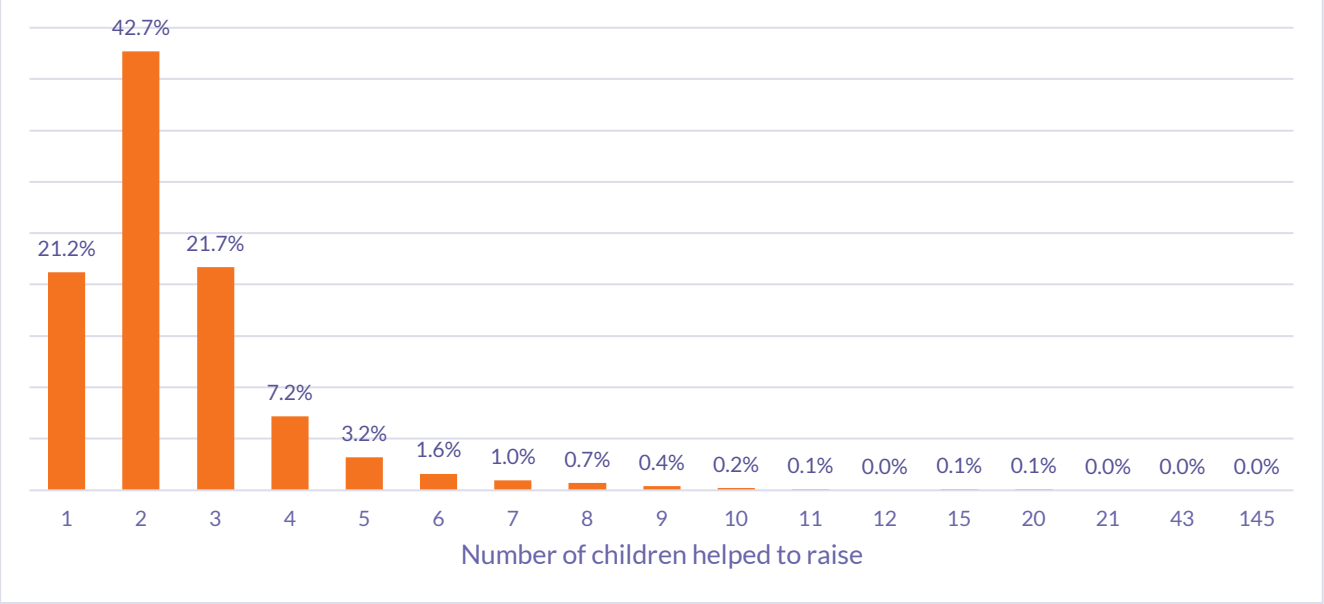

Figure 16. Distribution of how many children respondents had helped to raise in % (unweighted data)

Parent engagement with children's learning and education

This section presents findings based on the population weighted data describing parents' views about participation in their children's learning and educational experience.

It includes parents':

- reports on the time spent engaged with their children's reading and out of school activities
- views on the importance of early learning
- views on homework given to the children
- satisfaction with and confidence about interactions with school staff and early childhood education and care (ECEC) educators.

The survey results for this domain are in two parts. In the first part, we report upon what parents do and think in terms of their children's learning and educational experiences. In the second part, we report upon what parents say about their experiences with their children's educators.

Detailed results for particular questions are presented for the whole population weighted sample, then by child age, mother/father status, socio-economic profile of residential area, regional/metropolitan location, and whether the child has complex needs, that is, a medical condition or learning difficulty. Where applicable, there are comparisons between the responses of parents whose children attended government education and those whose children attended non-government education (kindergartens/schools).

WHAT ARE CHILDREN'S LEARNING AND EDUCATIONAL EXPERIENCES?

Frequency of parents' engagement with children in learning and activities outside early childhood education and school

Time spent reading

Parents of children aged 0 to 12 years were asked how many days in the last week a family member had spent time reading to their children.

Among this age group, on average, someone read to the focus child four to five days per week (mean of 4.71 days). For 44.5% of focus children, someone read to them every day. Figure 17 shows responses by child age group.

There were statistically significant differences in the number of days someone read to the focus child across ***child age groups***. Children aged 0-2 and 3–5 years were read to most often (58% and 60% every day). However, 12% of children aged 0–2 years, 26.7% of those aged 6–12 years and 5% of children aged 3-5 years were read to only one day or less per week, $F(3,1805) = 65.280$, $p<.001$. These results differed from the 2016 survey which had lower percentages of children being read to at 0-2 and 3-5 years.

There was no statistically significant difference in reporting between *mothers and fathers*. However, the survey did not allow direct mother–father comparisons, given that the wording of the question refers to any family member reading to the focus child.

No statistically significant differences were found according to: *metropolitan versus regional* areas; *socio-economic residential area;* or *child with complex needs.*

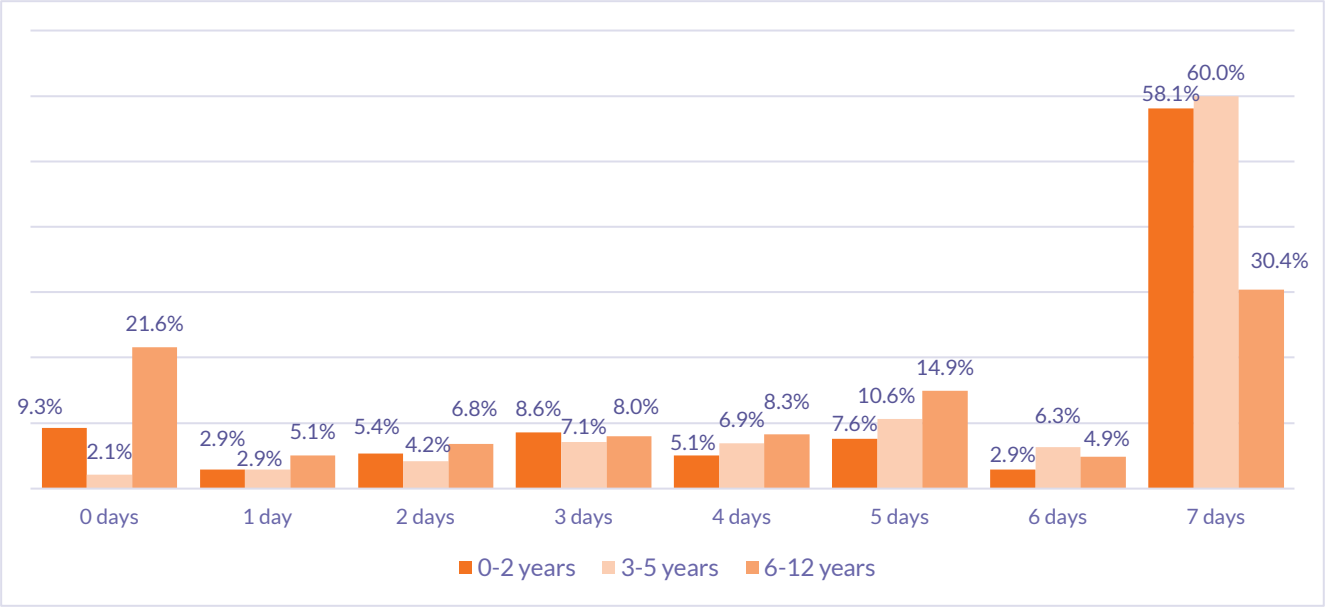

Figure 17. Number of days in the last week a family member spent time reading to child (population weighted data).

There was a (non-significant) trend for the child of a responding parent with higher education qualifications to be read to slightly more often, on average (see Figure 18). Across all parent education groups these means seem to be slightly above 2016 results, indicating children are being read to more frequently in recent times compared to three years ago.

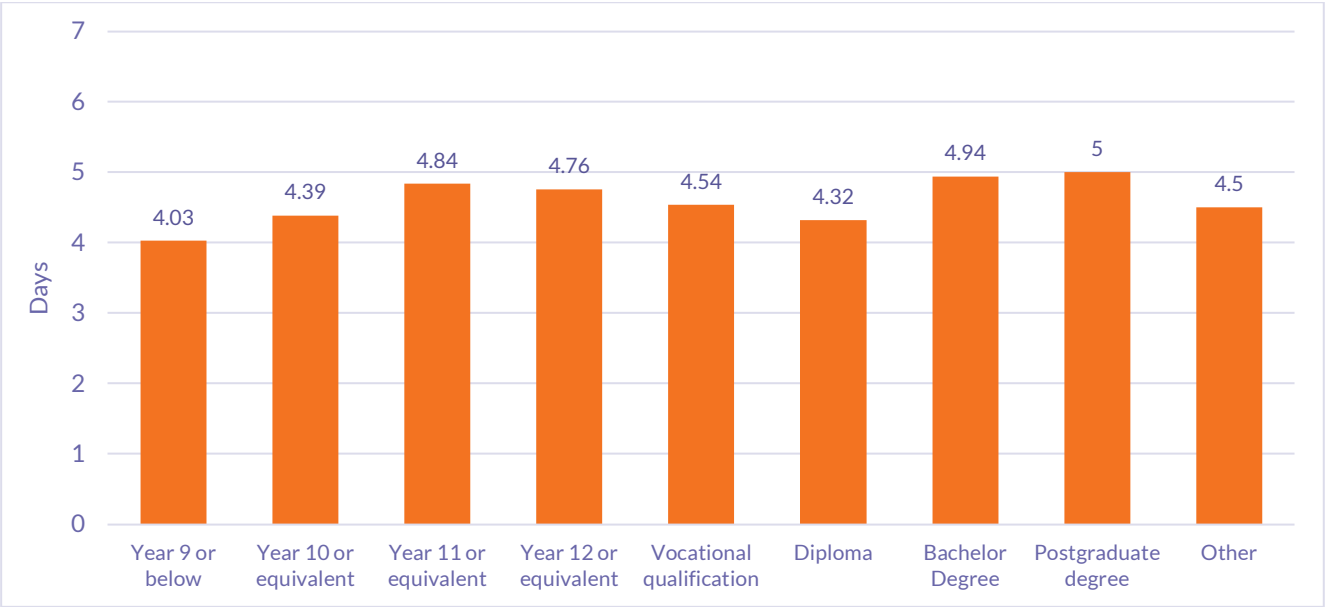

Figure 18. Average number of days in the last week a family member spent time reading with child, by parents' education (population weighted data).

WHAT IMPORTANCE DO PARENTS PLACE ON LEARNING EXPERIENCES INSIDE AND OUTSIDE THE HOME?

Early home learning

Parents were asked about the importance of what they did with their children in the years leading up to primary school, in terms of their children's later development. Ratings were 1 (not at all important) to 5 (extremely important) with a rating of 3 indicating this was 'somewhat important'.

Seventy five percent of parents believed that what they did with their children in the years before primary school was extremely important for their children's later development and a further 17.2% reported that this was moderately important. Only 3.2 % of parents thought that what they did with their children in these years was not at all important, or only slightly important for their children's later development.

There was a significant relationship between ***child age*** and the importance parents placed on early learning experiences in the home, with parents of younger children assigning higher importance on what they do with their child in the years before primary school, $F(3,2589) = 23.133$, $p<.001$ (see Table 8).

Table 8. Parent reported importance of early learning activities in the home, by child age groups, N (%) (population weighted data).

	0-2 years (*N* = 413)	3-5 years (*N* = 480)	6-12 years (*N* = 1036)	13-18 years (*N* = 663)	Total (*N* = 2592)
Not at all important	1 (0.2%)	1 (0.2%)	12 (1.2%)	15 (2.3%)	29 (1.1%)
Slightly important	6 (1.5%)	5 (1.0%)	24 (2.3%)	20 (3.0%)	55 (2.1%)
Somewhat important	12 (2.9%)	10 (2.1%)	48 (4.6%)	49 (7.4%)	119 (4.6%)
Moderately important	40 (9.7%)	70 (14.6%)	197 (19.0%)	139 (21.0%)	446 (17.2%)
Extremely important	354 (85.7%)	394 (82.1%)	755 (72.9%)	440 (66.4%)	1943 (75.0%)
M (SD)	**4.80 (0.57)**	**4.77 (0.57)**	**4.60 (0.78)**	**4.46 (0.92)**	**4.63 (0.77)**

When reporting on the importance of early learning experiences in the home, there were no significant differences in the responses of *mothers and fathers*, parents of children with *complex needs*, *parents in metropolitan or regional areas*, or areas of *disadvantage*.

In the initial survey (2016) the mother/father findings assigned a significantly higher level of importance for early learning experiences in the home. However, the difference in ratings was very small and the means for both parent groups were high in 2016 (mothers 4.75, fathers 4.65).

Formal early learning

For this area, all parents rated - on the same 5-point scale - the importance of early learning settings such as childcare and kindergarten for their children's future success. Findings indicated that 63% of parents thought that learning experiences in ECEC/kindergarten were extremely important and 23% felt these were somewhat or moderately important. Only 6% indicated early learning experiences were not at all or only slightly important.

There was a statistically significant relationship between ***child age*** and the importance parents placed on early learning experiences in formal early learning settings, with parents of children aged 3-5 years assigning higher importance to this than parents of 13-18 year olds, $F(3,2592) = 15.066$ $p<.001$ (see Table 9).

When it came to this data, no differences were seen in the ratings of *mothers and fathers*, parents of children with or without *complex needs*, *metropolitan and regional areas*, and *areas of socio-economic disadvantage*.

The current results for the importance of formal early learning activities are consistent with those from the 2016 survey.

Table 9. Parent reported importance of formal early learning activities, by child age (population weighted data).

	0-2 years (N = 413)	3-5 years (N = 481)	6-12 years (N = 1037)	13-18 years (N = 665)	Total (N = 2597)
Not at all important	6 (1.5%)	9 (1.9%)	20 (1.9%)	33 (5.0%)	68 (2.6%)
Slightly important	14 (3.4%)	8 (1.7%)	31 (3.0%)	27 (4.1%)	80 (3.1%)
Somewhat important	38 (9.2%)	35 (7.3%)	82 (7.9%)	74 (11.1%)	229 (8.8%)
Moderately important	90 (21.8%)	92 (19.1%)	231 (22.3%)	173 (26.0%)	586 (22.6%)
Extremely important	265 (64.2%)	337 (70.1%)	673 (64.9%)	358 (53.8%)	1633 (62.9%)
***M* (*SD*)**	**44.4 (0.90)**	**4.54 (0.85)**	**4.45 (0.90)**	**4.20 (1.11)**	**4.40 (0.96)**

Activities outside the home

In the first survey (2016) most parents (62%) thought that out-of-home activities, for example playgroup and swimming lessons, were extremely important for their child's development, with 35% reporting that these activities were somewhat or moderately important. The current survey specified some different examples – such as soccer, music lessons and tutoring as well as swimming lessons. Parents of kindergarten and school aged children were asked how many days their child did these activities but, this time, they were not asked to rate the importance of those activities.

On average, parents reported their child does activities outside the home 2.06 days per week. Parents of older children reported their children engaged in activities outside the home on a greater number of days per week, $F(3,2015) = 31.562$, $p<.001$ (see Table 10). Post hoc analysis using Bonferroni corrections showed that the significant differences ($p<.001$) were between parents of children aged 3-5 years and parents of children 6-12 and 13-18. No other age comparisons were significant.

Fathers reported their child participated in activities outside the home on a greater number of days per week, $F(1,2016) = 14.833$, $p<.001$. The mean for fathers was 2.23 days per week and the mean for mothers was 1.94 days per week. This is consistent with the findings of the 2016 survey where the number of days per week was slightly higher for fathers, though not significantly different.

Table 10. Number of days per week parents reported children's out of home activities by child age group (population weighted data)

DAYS PER WEEK	0-2 years (*N* = 16)	3-5 years (*N* = 340)	6-12 years (*N* = 1034)	13-18 years (*N* = 631)	Total (*N* = 2017)
0	5 (31.3%)	107 (31.5%)	185 (17.9%)	163 (25.9%)	460 (22.8%)
1	4 (25.0%)	107 (31.5%)	181 (17.5%)	71 (11.3%)	363 (18.0%)
2	3 (18.8%)	82 (24.1%)	251 (24.3%)	114 (18.1%)	450 (22.3%)
3	1 (6.3%)	26 (7.6%)	208 (20.2%)	129 (20.5%)	364 (18.0%)
4	2 (12.5%)	11 (3.2%)	119 (11.5%)	82 (13.0%)	214 (10.6%)
5	0 (0.0%)	5 (1.5%)	53 (5.1%)	32 (5.1%)	90 (4.5%)
6	0 (0.0%)	0 (0.0%)	18 (1.7%)	23 (3.7%)	41 (2.0%)
7	1 (6.3%)	2 (0.6%)	17 (1.6%)	15 (2.4%)	35 (1.7%)
Mean (SD)	**1.88 (2.08)**	**1.27 (1.24)**	**2.20 (1.63)**	**2.25 (1.86)**	**2.06 (1.69)**

Descriptive comparisons with the previous survey in 2016 show differences in the number of days per week parents reported children's out of home activities. In the previous survey, 14% of parents reported that their child participated in no out of home activities, compared with 23% in the current survey, and 4% reported activities on seven days per week compared with 2% in the current survey.

The *child complex needs* comparison showed a very small difference, with parents of a child with such needs, reporting fewer days of out of home activity. However, the difference did not reach statistical significance.

In regards to the number of days children participated in activities outside the home, there were significant differences in the reports of parents in ***metropolitan versus regional areas*** and in more or less ***disadvantaged areas***. Metropolitan parents reported an average of 2.31 days and regional parents 1.8 days a week, $F(1,2009) = 13.761$, $p<.001$. Parents in less disadvantaged areas (quintile 5) reported an average of 2.52 days a week compared to an average of 1.69 days for parents in more disadvantaged areas (quintile 1), $F(4,2007) = 18.046$, $p<.001$ (

Table 11). By comparison, the 2016 survey found no differences between metropolitan/regional areas or areas of socio-economic disadvantage in number of days per week children participated in out of home activities.

Table 11. Number of days of children's out of home activities by socio-economic area of disadvantage (quintiles) (population weighted data).

Days per week	1 (N = 206)	2 (N = 318)	3 (N = 402)	4 (N = 531)	5 (N = 553)	Total (N = 2010)
0	74 (35.9%)	83 (26.1%)	115 (28.6%)	109 (20.5%)	78 (14.1%)	459 (22.8%)
1	42 (20.4%)	63 (19.8%)	82 (20.4%)	103 (19.4%)	73 (13.2%)	363 (18.1%)
2	29 (14.1%)	72 (22.6%)	85 (21.1%)	118 (22.2%)	143 (25.9%)	447 (22.2%)
3	32 (15.5%)	53 (16.7%)	70 (17.4%)	96 (18.1%)	111 (20.1%)	362 (18.0%)
4	4 (6.3%)	29 (9.1%)	29 (7.2%)	63 (11.9%)	78 (14.1%)	212 (10.5%)
5	4 (1.9%)	9 (2.8%)	11 (2.7%)	25 (4.7%)	42 (7.6%)	91 (4.5%)
6	6 (2.9%)	4 (1.3%)	6 (1.5%)	7 (1.3%)	18 (3.3%)	41 (2.0%)
7	6 (2.9%)	5 (1.6%)	4 (1.0%)	10 (1.9%)	10 (1.8%)	35 (1.7%)
***M* (*SD*)**	**1.69 (1.84)**	**1.84 (1.62)**	**1.74 (1.58)**	**2.09 (1.66)**	**2.51 (1.69)**	**2.06 (1.69)**

EXPERIENCES WITH THE EDUCATION SECTOR

This section presents parents' views about their ability to participate in decisions that affect their children, satisfaction with and comfort in communicating with ECEC staff and school teachers, and experiences of seeking help from teachers and educators. Parents were asked these questions if their children were attending ECEC, primary school or secondary school. Parents were only asked to specify if their child attended a government or non-government school if their child was attending kindergarten or school and not if they were attending other types of ECEC.

Findings are presented by child age groups (0–2 years, 3–5 years, 6–12 years and 13–18 years), consistent with the other sections of this report. These age groups were selected to generally represent the functional groups of ECEC, kindergarten, primary and secondary school.

Parents were asked if their children were in day care, kindergarten, primary, secondary school or another form of education — as appropriate to their child's age. Sixty nine percent of children were attending primary or secondary school, while 17% of children were attending day care or kindergarten or pre-kinder (see Figure 19).

How satisfied are parents with their interactions with educational services?

Children attending government and non-government schools

Findings regarding child attendance at a government or non-government school or kindergarten are (see also Figure 20):

- 66.7% of parents reported their child attended a government kindergarten or school, while 31.6% reported their child attended a non-government kindergarten or school (1.7% responded 'not applicable').
- Figure 20 shows attendance at government and non-government schools by child age. The percentage differences between government and non-government kindergarten or school attendance were greater for children aged 3-5 and 6-12 years. There was still a difference for older children, however, a higher proportion of 13-18 year olds attended a non-government school.
- There were no differences in the percentages of children in metropolitan and regional areas attending government and non-government schools.
- Children with ***complex needs*** were more likely to attend a government school (72.1%) compared to children without complex needs (64.2%), $\chi 2(2) = 14.368$, p<.001. This difference is not consistent with the 2016 survey which found no difference.

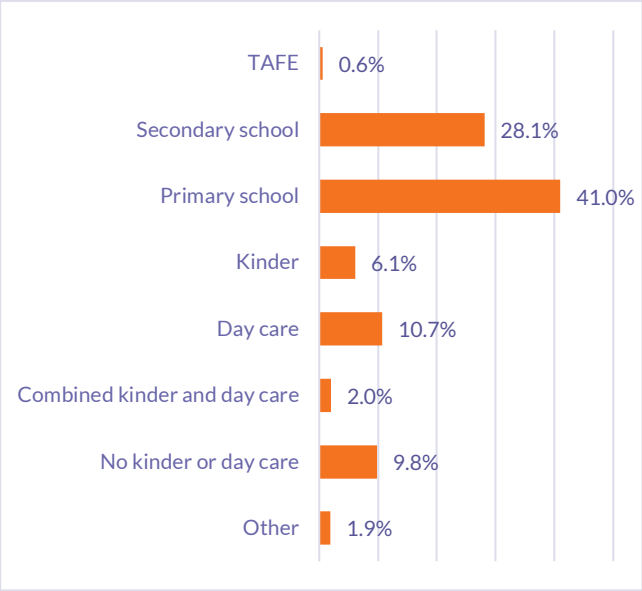

Figure 19. Proportion of children attending ECEC, primary and secondary school (population weighted data).

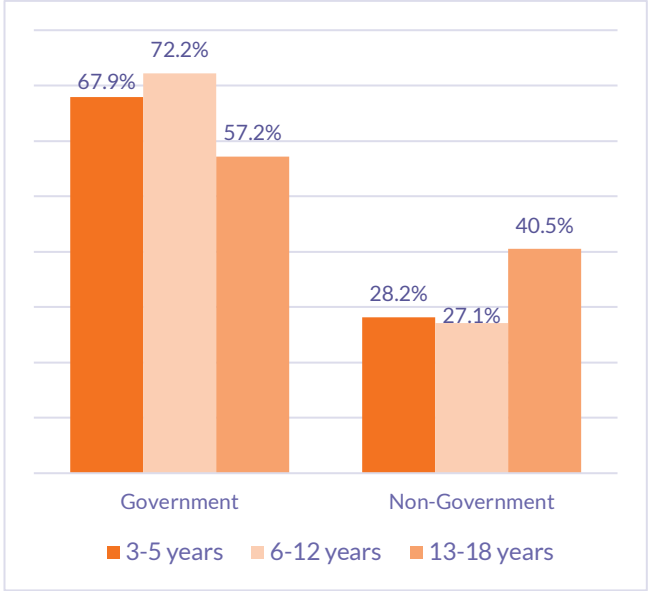

Figure 20. Proportion of children attending government and non-government kindergartens and schools (population weighted data).

Figure 21 illustrates attendance at government and non-government kindergartens and schools broken down by *residential areas of relative socio-economic disadvantage* (IRSD). Children in the least disadvantaged areas (quintiles 4 and 5) were significantly more likely to attend non-government kindergartens/schools, $\chi^2(4) = 27.53$, $p<.001$.

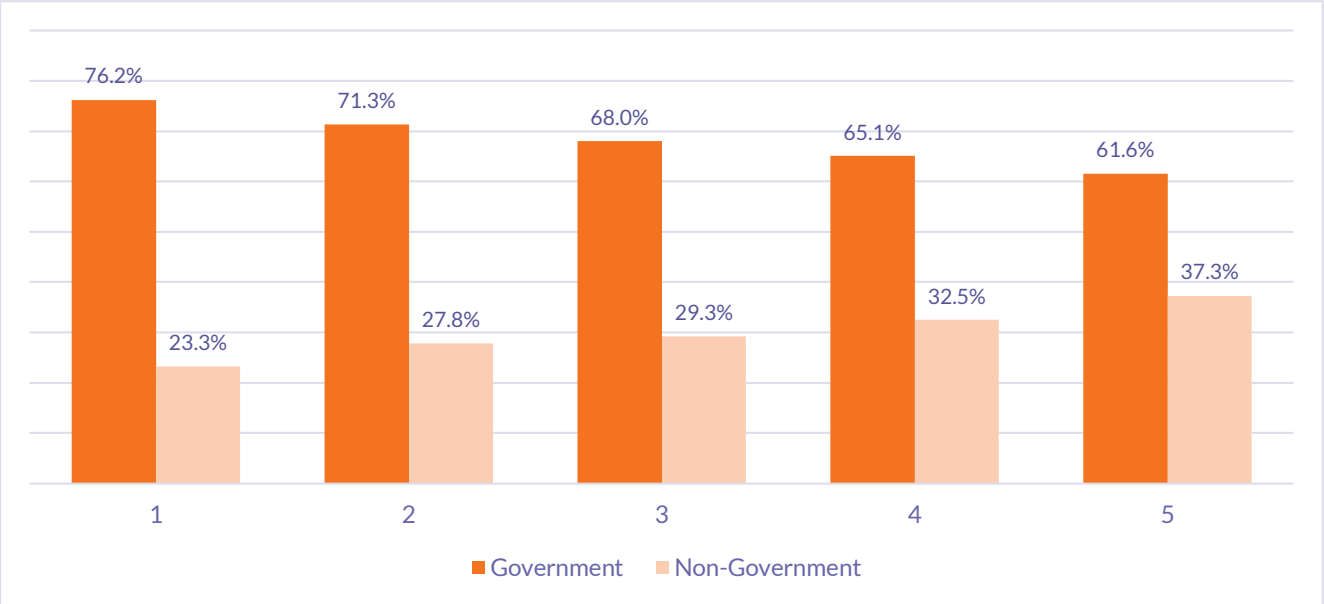

Figure 21. Proportion of children attending government and non-government kindergartens or schools by socio-economic area quintiles along the horizontal axis (population weighted data)

Able to participate in decisions

Overall, 74% of parents of children attending kindergarten or school agreed or strongly agreed that they felt able to participate in decisions that affect the focus child at kindergarten or school. This is a lower percentage than in the first survey in 2016 (80%).

Parents' levels of agreement regarding participation in kindergarten or school decisions varied slightly across ***child age groups,*** $F(3,2301) = 12.278$, $p<.001$, with parents of older, secondary school aged children reporting relatively less agreement (see Table 12). Post hoc analysis using the Bonferroni correction showed the only significant difference was between the 3-5 and 13-18 age groups which means that when compared to the parents of younger children, a greater proportion of parents of older children feel less able to participate in decisions that affect their children.

Table 12. Parents reporting the degree to which they feel able to participate in decisions at school or kindergarten by child age group, *N* (%) (population weighted data)

	0-2 years (*N* = 209)	3-5 years (*N* = 436)	6-12 years (*N* = 1033)	13-18 years (*N* = 628)	Total (*N* = 2309)
Strongly disagree	1 (0.5%)	5 (1.1%)	18 (1.7%)	23 (3.7%)	47 (2.0%)
Disagree	9 (4.3%)	14 (3.2%)	50 (4.8%)	42 (6.7%)	115 (5.0%)
Mixed feelings	35 (16.7%)	63 (14.4%)	191 (18.5%)	143 (22.8%)	432 (8.7%)
Agree	77 (36.8%)	147 (33.7%)	355 (34.4%)	200 (31.8%)	779 (33.8%)
Strongly agree	87 (41.6%)	207 (47.5%)	419 (40.6%)	220 (35.0%)	933 (40.5%)
***M* (*SD*)**	4.15 (0.89)	4.23 (0.89)	4.07 (0.97)	3.88 (1.08)	4.06 (0.99)

In the 2016 survey *mothers* reported feeling more able to participate in kindergarten or school decisions than *fathers*, however we found no difference in the current survey. In 2016 parents living in *regional areas* also reported feeling slightly more able to participate in kindergarten or school decisions, however, this was not the case in the current survey with responses showing no statistically significant differences. Furthermore, unlike the findings of the 2016 survey in

which parents of children with complex needs reported feeling more able to participate in kindergarten or school decisions, no such difference was found for the current survey. See Table 13 for details about 2019 results on this item.

Table 13. Mean parent ratings regarding the degree to which they feel able to participate in school or kindergarten decisions by participant characteristics (population weighted data)

	Mean (*SD*)
Mothers	4.10 (.98)
Fathers	3.99 (1.0)
Metropolitan	4.03 (.98)
Regional	4.16 (.99)
Child with complex needs	4.04 (1.02)
No complex needs in child	4.06 (.97)

There were no significant differences in how parents of children attending government and non-government kindergartens or schools or parents living in *different areas of socio-economic disadvantage* reported being able to participate in decisions, consistent with the 2016 survey.

Satisfaction with communication from school/early childhood educators

On a 5-point scale where 5 indicates strong agreement and 1 indicates strong disagreement, 79% of parents overall agreed or strongly agreed that they were satisfied with how educators and teachers communicated with them. This is consistent with 2016 findings (81%).

The level of satisfaction parents reported with the way ECEC (including kindergarten) or school communicated with them varied across ***child age groups,*** with parents of secondary school aged children reporting relatively less satisfaction than parents of younger children, $F(3,2300) = 17.778$, $p<.001$, see Table 14. Bonferroni corrected post hoc analyses of mean differences showed significant ($p<.001$) differences between parents of 3-5 year olds and 6-12 year olds, and between 3-5 year olds and 13-18 year olds.

Table 14. Parents reporting the degree to which they are satisfied with the communication from school or ECEC by child age, *N* (%) (population weighted data)

	0-2 years (N =209)	3-5 years (N = 434)	6-12 years (N = 1033)	13-18 years (N = 628)	Total (N = 2304)
Strongly agree	100 (47.8%)	252 (58.1%)	474 (45.9%)	254 (40.4%)	1080 (46.9%)
Agree	72 (34.4%)	129 (29.7%)	336 (32.5%)	206 (32.8%)	743 (32.3%)
Mixed feelings	20 (9.6%)	35 (8.1%)	133 (12.9%)	79 (12.6%)	267 (11.6%)
Disagree	11 (5.3%)	15 (3.5%)	60 (5.8%)	55 (8.8%)	141 (6.1%)
Strongly Disagree	6 (2.9%)	3 (0.7%)	30 (2.9%)	34 (5.4%)	73 (3.2%)
M **(*SD*)**	4.19 (1.01)	4.41 (0.83)	4.13 (1.03)	3.94 (1.17)	4.14 (1.05)

Table 15 shows the extent to which parents with children at government and non-government schools agree that they are satisfied with the communication from their child's educational setting.

Parents of children attending government kindergarten or school reported slightly less satisfaction with communication from their child's kindergarten or school, $F(2,2011) = 16.641$, $p<.001$. Parents of secondary school aged children

attending government schools reported the lowest level of satisfaction with communication from staff. Seventeen percent of parents of 13-18 year olds in government schools disagreed or strongly disagreed they were satisfied, compared to 9.4% of parents of 13-18 year olds in non-government schools.

Figure 22 shows the mean agreement scores for parents' satisfaction with kindergarten or school communication by way of *child age* and government or non-government education setting.

Table 15. The degree to which parents are satisfied with communication from school or ECEC by government versus non-government breakdown, *N* (%) (population weighted data)

	Govt (N =1343)	Non- Govt (N = 637)	N/A (N = 32)	Total (N = 2012)
Strongly agree	591 (44.0%)	330 (51.8%)	16 (50.0%)	937 (46.6%)
Agree	415 (30.9%)	221 (34.7%)	6 (18.8%)	642 (31.9%)
Mixed feelings	183 (13.6%)	52 (8.2%)	4 (12.5%)	239 (11.9%)
Disagree	97 (7.2%)	28 (4.4%)	1 (3.1%)	126 (6.3%)
Strongly Disagree	57 (4.2%)	6 (0.9%)	5 (15.6%)	68 (3.4%)
M (SD)	4.03 (1.12)	4.32 (0.87)	3.91 (1.46)	4.14 (1.046)

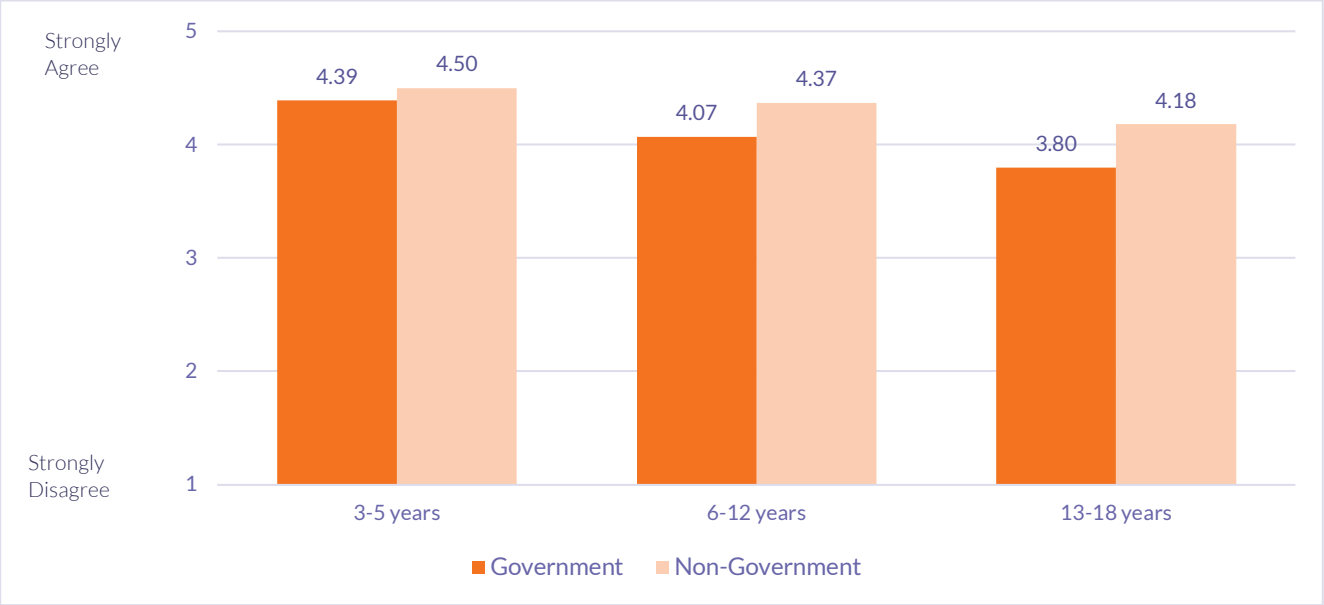

Figure 22. Mean satisfaction with kindergarten/school communication (population weighted data)

In the 2016 survey there was a trend towards *mothers* being more satisfied with communications, but this trend was not observed in the current survey. There were no significant differences for *metropolitan vs. regional areas*, or different *socio-economic areas*, also consistent with the 2016 survey. Parents of children with complex needs tended to report less satisfaction than other parents. Twenty six percent of parents of children with complex needs strongly disagreed, disagreed or had mixed feelings, compared to 19% of other parents. These differences were close to but not statistically significant.

Feeling welcome at the child's early education centre or school

We asked parents whose child attended childcare, kindergarten or school to rate how much they agreed they felt welcome at their child's educational setting. This was a new survey question, not asked in 2016.

Ninety percent of parents agreed or strongly agreed that they felt welcome. *Mother/father*, *metropolitan/regional* and *socio-economic areas* comparisons showed no significant differences, although parents of ***older children*** were less likely to agree they felt welcome $F(3,2301) = 33.706$, $p<.001$ (see Table 16). Post hoc analyses revealed significant differences between the responses of parents of 13-18 year olds and all other age groups. Significant differences were also found between the 3-5 and 6-12 age groups. The trend indicated that parents of older children tended to feel less welcome at their child's educational setting than parents of younger children.

Table 16. The extent to which parents felt welcome at their child's educational setting by child age group, *N* (%) (population weighted data)

	0-2 years (N = 209)	3-5 years (N = 436)	6-12 years (N = 1034)	13-18 years (N = 628)	Total (N = 2307)
Strongly agree	162 (77.5%)	339 (77.8%)	670 (64.8%)	334 (53.2%)	1505 (65.2%)
Agree	43 (20.6%)	75 (17.2%)	265 (25.6%)	189 (30.1%)	572 (24.8%)
Mixed feelings	1 (0.5%)	15 (3.4%)	67 (6.5%)	61 (9.7%)	144 (6.2%)
Disagree	0 (0.0%)	5 (1.1%)	20 (1.9%)	21 (3.3%)	46 (2.0%)
Strongly Disagree	3 (1.4%)	2 (0.5%)	12 (1.2%)	23 (3.7%)	40 (1.7%)
M (SD)	4.73 (0.60)	4.71 (0.62)	4.51 (0.80)	4.26 (1.01)	4.50 (0.84)

Parents of children in both government and non-government educational settings had high levels of agreement they felt welcome. However, the difference between government and non-government settings was statistically significant with 92% agreement/strong agreement (non-government) compared to 88% (government), $\chi^2(8) = 31.854$, $p<.001$.

Parent's comfort in talking to educators and teachers

Parents were also asked to indicate their level of agreement with a broad statement about how comfortable they were talking to early childhood educators or schoolteachers about their child. Overall, a high proportion (92%) agreed or strongly agreed they felt comfortable talking to their child's teachers or educators – the same percentage as the previous survey in 2016.

While the majority of parents reported they felt comfortable talking to their child's ECEC (including kindergarten) educator or school teacher, there was a significant relationship between ***child age group*** and the level of comfort parents felt talking to ECEC/school staff; parents of younger children reported that they felt more comfortable talking to ECEC/school staff, $F(3,2301) = 16.144$, $p<.001$, see Table 17. Post hoc analysis showed statistically significant differences between the parents of 13-18 year olds and the other three age groups. This result is consistent with the 2016 survey.

Table 17. Extent to which parents felt comfortable talking to their children's teachers/educators, *N* (%) (population weighted data)

	0-2 years (N = 208)	3-5 years (N = 435)	6-12 years (N = 1033)	13-18 years (N = 628)	Total (N = 2304)
Strongly agree	159 (76.4%)	327 (75.2%)	696 (67.4%)	381 (60.7%)	1563 (67.8%)
Agree	39 (18.8%)	88 (20.2%)	260 (25.2%)	167 (26.6%)	554 (24.0%)
Mixed feelings	8 (3.8%)	14 (3.2%)	50 (4.8%)	47 (7.5%)	119 (5.2%)
Disagree	0 (0.0%)	4 (0.9%)	16 (1.5%)	13 (2.1%)	33 (1.4%)
Strongly Disagree	2 (1.0%)	2 (0.5%)	11 (1.1%)	20 (3.2%)	35 (1.5%)
***M* (*SD*)**	4.70 (0.62)	4.69 (0.61)	4.56 (0.75)	4.39 (0.95)	4.55 (0.78)

Figure 23 indicates the mean agreement ratings for comfort in talking to teachers or educators by child age group, within the government and non-government kindergarten or school sectors. However, differences shown here failed to reach statistical significance.

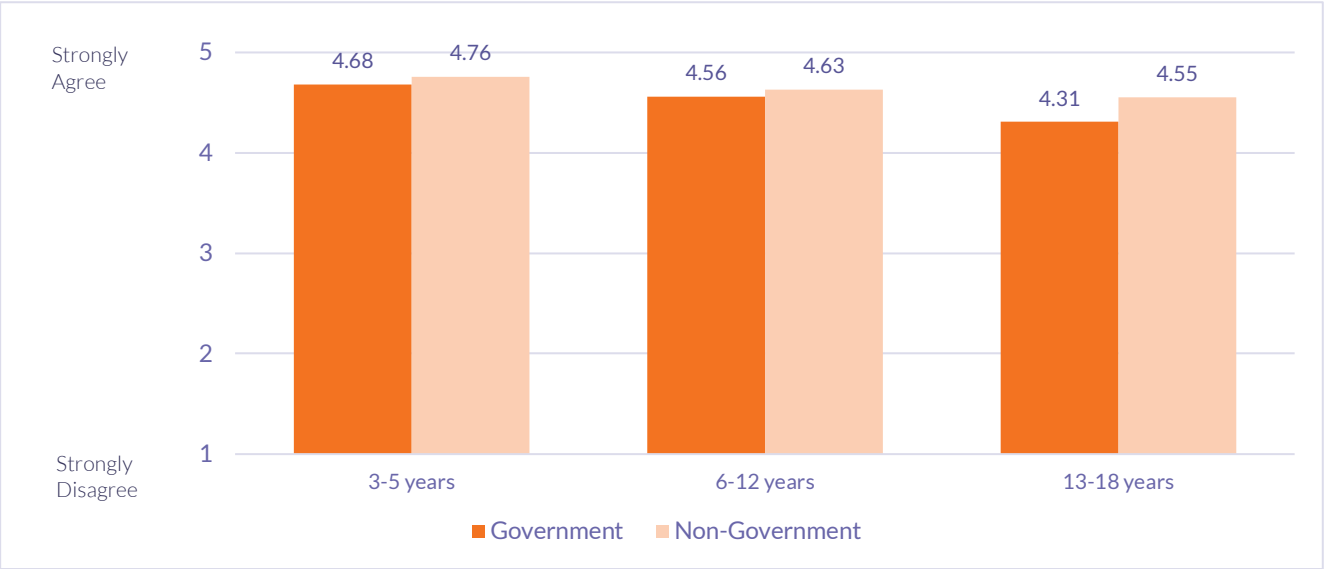

Figure 23. Mean comfort talking to ECEC and school staff by child age and government/non-government school attendance (population weighted data)

Table 18 shows the mean agreement ratings across different subgroups of respondents. There are no significant differences for *mothers and fathers*, and *metropolitan and regional* areas. The difference for parents of children with and without ***complex needs,*** though small, was statistically significant $F(1,2303) = 15.281$, $p<.001$.

Table 18. Parents reporting the degree to which they are comfortable talking to their child's teachers/educators across parent subgroups (population weighted data)

	Mean *(SD)*
Mothers	4.57 (.780)
Fathers	4.53 (.788)
Metropolitan	4.55 (.784)
Regional	4.57 (.766)
Child with complex needs	4.61 (.721)
No complex needs in child	4.48 (.865)

There were no differences in the mean ratings of the five areas of *socio-economic disadvantage*, with means ranging from 4.54 to 4.58.

Homework

Parents who had children attending school were asked four questions about homework. These questions were not asked in the 2016 survey.

Importance of homework

Sixty five percent of parents agreed or strongly agreed homework other than reading is important for their child's learning. ***Fathers*** were more likely to agree or strongly agree (72.1%) than ***mothers*** (60.3%). Findings were statistically significant (mothers' mean = 3.68, fathers' mean = 4.01, $F(1,2012)=31.006$, $p<.001$.

In regards to this question, there was a trend for child age group; parents of older children were more likely to strongly agree – see Table 19. However, child age group differences failed to reach statistical significance.

Table 19. The degree to which parents agree homework is important by child age group, *N* (%) (population weighted data)

	3-5 years (N = 340)	6-12 years (N = 1030)	13-18 years (N = 629)	Total (N = 2015)
Strongly agree	112 (32.9%)	397 (38.5%)	280 (44.5%)	795 (39.5%)
Agree	95 (27.9%)	264 (25.6%)	151 (24.0%)	514 (25.5%)
Mixed feelings	69 (20.3%)	196 (19.0%)	107 (17.0%)	376 (18.7%)
Disagree	41 (12.1%)	99 (9.6%)	52 (8.3%)	193 (9.6%)
Strongly Disagree	23 (6.8%)	74 (7.2%)	39 (6.2%)	137 (6.8%)
M (SD)	3.68 (1.24)	3.79 (1.25)	3.92 (1.23)	3.81 (1.24)

There were no significant differences for *metropolitan/regional* areas, areas of *socio-economic disadvantage*, whether the child had *complex needs* and whether the child attended a government or non-government educational setting.

Amount of homework

Parents were asked their opinion on whether the homework given to their child, other than reading, was too much or too little. Responses ranged from 1 = far too much to 5 = far too little. There were no differences between *mothers and fathers*, *metropolitan and regional areas*, areas of *socio-economic disadvantage*, children who did or did not have complex needs and whether the children attended government or non-government education**.**

Findings differed for children of different ***ages*** (see Table 20). Post hoc analysis revealed the mean difference between children aged 6-12 and 13-18 years was statistically significant, $F(3,1988)=19.714$, $p<.001$.

Table 20. Parent's opinion about the amount of homework given to their child by child age group, *N* (%) (population weighted data)

	3-5 years (N = 323)	6-12 years (N = 1023)	13-18 years (N = 625)	Total (N = 1987)
Far too much	11 (3.4%)	39 (3.8%)	54 (8.6%)	105 (5.3%)
A bit too much	18 (5.6%)	67 (6.5%)	99 (15.8%)	184 (9.3%)
About right	243 (75.2%)	61.4 (61.4%)	366 (58.6%)	1249 (62.9%)
A bit too little	30 (9.3%)	188 (18.4%)	65 (10.4%)	286 (14.4%)
Far too little	21 (6.5%)	101 (9.9%)	41 (6.6%)	163 (8.2%)
***M* (*SD*)**	3.10 (0.73)	3.24 (0.86)	2.90 (0.93)	3.11 (0.88)

Parents responsibilities regarding homework

Parents were asked how much they agreed with the statement 'It's my job to help my child with their homework'. Over 70% of parents agreed or strongly agreed it was their job to help their child. There were no significant differences between *mothers and fathers*, areas of *socio-economic disadvantage* or *metropolitan and regional* areas and parents of children with and without complex needs.

There were ***child age*** differences with parents of children aged 3 to 5 years and 6 to 12 years more likely to agree or strongly agree (see Table 21). These differences were statistically significant as revealed by Bonferroni adjusted post hoc analyses, $F(3,2000)=57.944$, $p<.001$.

Table 21. Parental responsibility for helping with homework by child age, *N* (%) (population weighted data)

	0-2 years (N = 16)	3-5 years (N = 328)	6-12 years (N = 1028)	13-18 years (N = 626)	Total (N = 1998)
Strongly agree	6 (37.5%)	199 (60.7%)	486 (47.3%)	177 (28.2%)	868 (43.4%)
Agree	4 (25.0%)	80 (24.4%)	310 (30.2%)	160 (25.6%)	554 (27.7%)
Mixed feelings	4 (25.0%)	38 (11.6%)	143 (13.9%)	159 (25.4%)	344 (17.2%)
Disagree	0 (0.0%)	6 (1.8%)	56 (5.4%)	78 (12.5%)	140 (7.0%)
Strongly disagree	2 (12.5%)	5 (1.5%)	33 (3.2%)	52 (8.3%)	92 (4.6%)
***M* (*SD*)**	3.75 (1.37)	4.4 (0.88)	4.13 (1.05)	3.53 (1.25)	3.98 (1.14)

There was also a small difference for government/non-government education. Parents with children in non-government education were less likely to agree or strongly agree that helping with homework was their job, compared to parents of children in government education (63.8% compared to 74%). The mean difference in agreement ratings, though small, was statistically significant (3.83 compared to 4.05), $F(2,1998) = 8.383$, $p<.001$.

Stress related to helping with homework

The final homework question asked parents whether helping with homework was stressful, with responses ranging from strongly agree to strongly disagree.

Mothers were more likely to agree or strongly agree (31%) than ***fathers*** (19.1%). Mean differences (mothers 2.68; fathers 2.24) were statistically significant, $F(1,1997) = 50.009$, $p<.001$.

How stressful parents found homework was also related to ***child age*** with parents of older children reporting stronger agreement (see Table 22). Post hoc analyses showed the mean differences between parents of children 13-18 years and the two other age groups were statistically significant, $F(3,1997) = 26{,}361$, $p<.001$.

Table 22. Degree to which helping with homework is stressful for parents by child age (population weighted data)

	3-5 years (*N* = 329)	6-12 years (*N* = 1027)	13-18 years (*N* = 627)	Total (*N* = 2000)
Strongly agree	18 (5.5%)	109 (10.6%)	130 (20.7%)	258 (12.9%)
Agree	29 (8.8%)	140 (13.6%)	96 (15.3%)	267 (13.3%)
Mixed feelings	68 (20.7%)	159 (15.5%)	118 (18.8%)	349 (17.4%)
Disagree	77 (23.4%)	267 (26.0%)	134 (21.4%)	481 (24.1%)
Strongly disagree	137 (41.6%)	352 (34.3%)	149 (23.8%)	644 (32.2%)
***M* (*SD*)**	2.13 (1.20)	2.40 (1.35)	2.88 (1.46)	2.51 (1.39)

When it came to how stressful parents found helping their child with homework, there were no significant differences between parents in *metropolitan and regional* and different *socio-economic areas* or between parents whose children were in government or non-government education.

Parents of children with ***complex needs*** reported a stronger level of agreement with the statement that helping their child with their homework was stressful. Twenty-two percent of parents whose child did not have *complex needs* agreed or strongly agreed, compared to 34.8% of parents whose child had *complex needs*. The mean for parents with a child with *complex needs* was 2.78 compared to 2.38. This difference, though small, was statistically significant, $F(1,1997) = 37.392$, $p<.001$.

Experience of being a parent

In this section we present the results of the weighted sample data for items tapping into aspects of the parenting experience. Five of the items in this section have been repeated from the 2016 *Parenting Today in Victoria* survey, while six items are new.

Items covered in this section address:

- Confidence in parenting/ parenting self-efficacy (repeated from 2016)
- Child resilience (new)
- Parents' thoughts about their own parenting (e.g., how they feel other people perceive their parenting, how hard they are on themselves) (new)
- Parents' views on how frustrating, rewarding, demanding, and enjoyable parenting can be (new).

Most of the items in this section were devised by the team at the Parenting Research Centre. The exceptions are the new items that ask parents about how frustrating, rewarding, demanding and enjoyable parenting can be. Two of these items (rewarding and demanding) were taken directly from the Parenting Experience Survey (Sanders et al., 1999), and the other two items in this series (frustrating and enjoyable) were created by the Parenting Research Centre team and used the same format as the two items from the Parenting Experience Survey.

HOW EFFICACIOUS DO PARENTS FEEL IN THEIR PARENTING ROLE?

Parents' perceptions of how efficacious they are in their parenting role were obtained with an established scale – the short form of the *Me as a Parent scale*. This consisted of four items rated on a 5-point scale from 'strongly disagree' to 'strongly agree', with a midpoint of 'mixed feelings'. For each item the minimum score is 1 and the maximum score is 5. A total short form score was also obtained by adding the four item scores together; the minimum score that can be obtained for the total short form score is 4 and the maximum score is 20.

The mean *Me as a Parent – Short Form* total score for the sample was 17.20 (*SD*=2.40). In 2016 the mean total score of these four items was 16.89 (*SD*=2.03). Inspection of the total and item scores in Table 23 shows, on average, parents are responding in the positive range.

Table 23. Average responses to individual items from the "Me as a Parent Scale – Short Form" (population weighted data)

	Mean (*SD*)
I have confidence in myself as a parent	4.38 (.714)
I have the skills necessary to be a good parent to my child	4.43 (.675)
I know I am doing a good job as a parent	4.30 (.727)
I can stay focused on the things I need to do as a parent even when I've had an upsetting experience	4.09 (.848)
Total short form	17.20 (2.404)

Note: Item Range 1 (strongly disagree) – 5 (strongly agree). Item scores calculated excluding missing data

As well as examination of mean scores, parents' results can be represented by the proportion of parents who scored in the positive range for the total short form score and item scores. For the total score, 77% of parents scored in the positive range, with a score between 16 and 20. Nine in ten parents (90%) agreed or strongly agreed with the item 'I have confidence in myself as a parent'. Ninety-two percent agreed or strongly agreed 'I have the skills necessary to be a good parent to my child'. For the item 'I know I am doing a good job as a parent', 87% agreed or strongly agreed, while for the item 'I can stay focused on the things I need to do as a parent even when I've had an upsetting experience' 79% agreed or strongly agreed.

There were no statistically significant differences between the subgroups of interest (*socio-economic area*, *child age groupings*, *parent gender*, *having a child with complex needs*, *or metro versus regional areas*) on individual *Me as a Parent Short Form* items or on the Total short form score.

This contrasts somewhat with 2016 data using the full version of the *Me as a Parent Scale*, where child age group comparisons showed statistically significant differences with higher scores for parents of younger children (for three of the four subscales and for the total scale score), and higher scores on average for *mothers* compared to *fathers* for two subscales and for the total score in 2016. Also, there were significant differences across *socio-economic areas* in 2016 for one subscale, with parents living in lower socio-economic areas having lower ratings on the 'Personal Agency' subscale. In 2016 there were no significant differences in *Me as a Parent* subscale scores for parents with or without a target child with *complex needs* or for parents living in *metropolitan or regional areas*.

PARENTS' PERCEPTIONS OF THEIR PARENTING

Two new items added to the 2019 survey addressed parents' cognitions in relation to their own parenting, by exploring how they think others perceived their parenting, and how hard the parent felt they were on themselves. These items are thought to tap into an aspect of parenting related to self-compassion.

Items were rated on a 5-point scale with 1= 'strongly disagree', 2= 'disagree', 3 = 'mixed feelings', 4= 'agree' and 5= 'strongly agree'.

For the item 'I worry about what others think of my parenting', the majority (70%) disagreed, although over 11% agreed and 6% strongly agreed with this statement.

There was a significant difference on this item for ***mothers*** compared to ***fathers***, $F(1,2593)=54.737$, $p<.001$. Mothers were more likely to worry about what others think of their parenting (see Figure 24 and Figure 25).

There was a significant overall difference on this item by ***child age groups***, $F(3,2591)=19.501$, $p<.001$, with Bonferroni adjusted post hoc tests revealing parents of 13-18 year olds were significantly less worried about what others think of their parenting than each of the other age groups ($p<.001$).

There were no statistically significant differences by *socio-economic groups*, for *metropolitan versus regional areas* or according to whether the parent's child had *complex needs*.

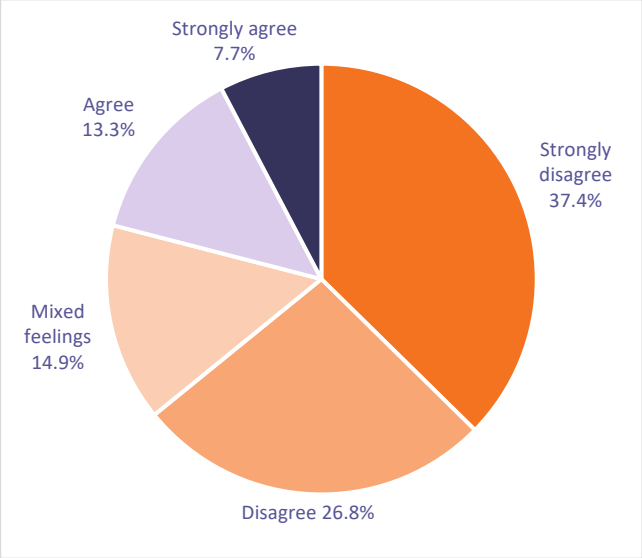

Figure 24. Mothers' ratings of likelihood to worry about what others think of their parenting (population weighted data)

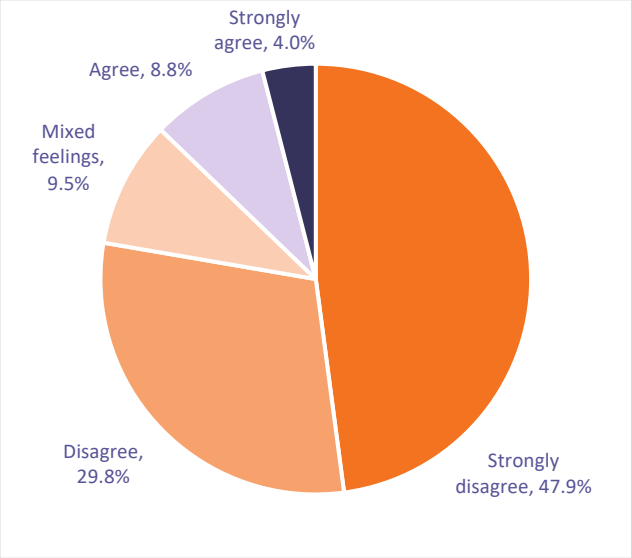

Figure 25. Fathers' ratings of likelihood to worry about what others think of their parenting (population weighted data)

For the item '*I am often hard on myself for not being the kind of parent I really want to be*' a substantial proportion of respondents expressed 'mixed feelings' (24%). While 39% disagreed they were too hard on themselves, a large proportion (37%) either agreed or strongly agreed they were often too hard on themselves for not being the kind of parent they really wanted to be.

There was a significant ***parent gender*** difference on this item, $F(1,2593)=64.547$, $p<.001$, with mothers more likely to agree they were too hard on themselves (Figure 26 and Figure 27).

There was a significant difference on this item according to whether the parent's child had ***complex needs***, $F(1,2593)=32.046$, $p<.001$, with parents of children with complex needs more likely to agree they were too hard on themselves (Figure 28).

There were no statistically significant differences by *child age groups*, *socio-economic groups* or for *metropolitan versus regional areas*.

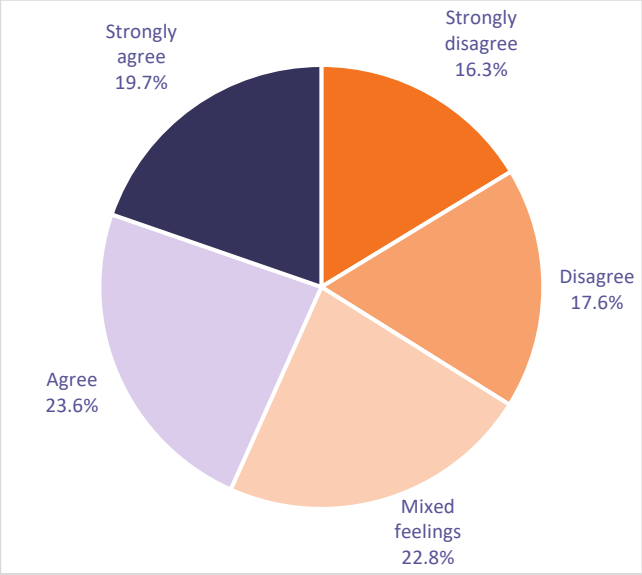

Figure 26. Mothers' responses to the item 'I am often hard on myself for not being the kind of parent I really want to be' (population weighted data)

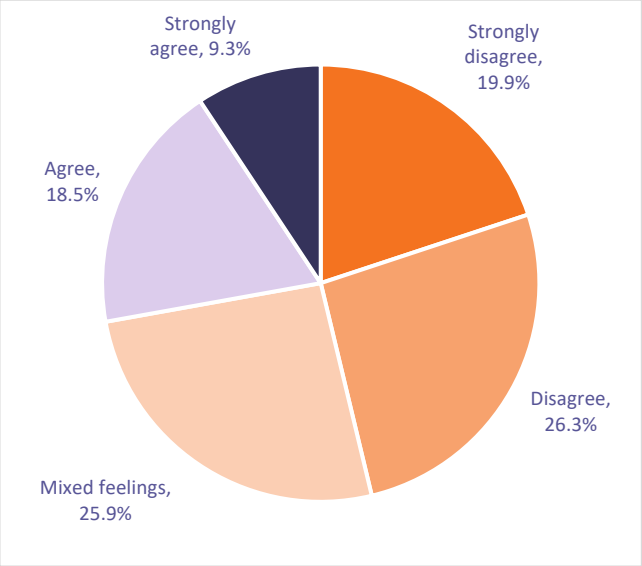

Figure 27. Fathers' responses to the item 'I am often hard on myself for not being the kind of parent I really want to be' (population weighted data)

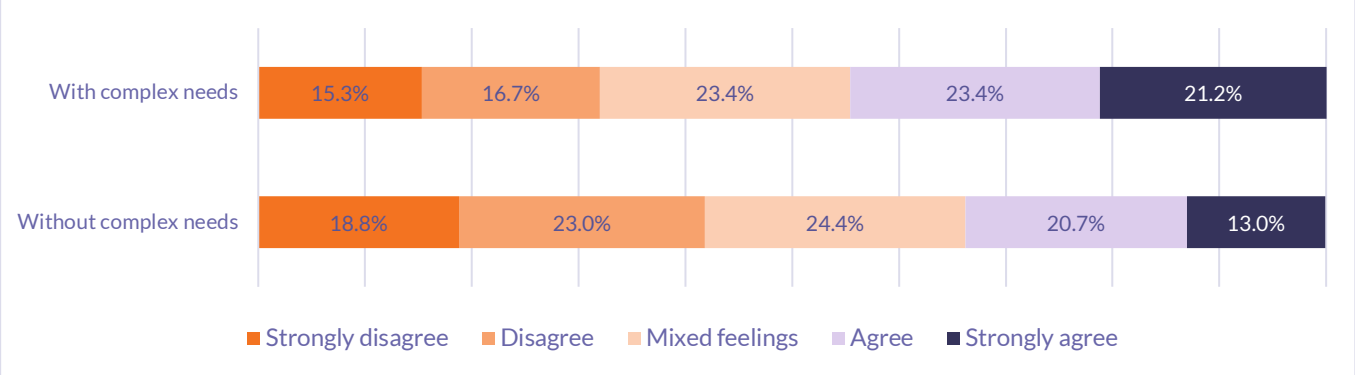

Figure 28. Parents responses to the item 'I am often hard on myself for not being the kind of parent I really want to be' for children with and without complex needs (population weighted data)

PARENTS' VIEWS OF THE PARENTING EXPERIENCE

Four new items added to the 2019 survey asked parents to rate a series of statements about their experience as a parent in the past six weeks, on a 5-point scale with 1= 'not at all', 2= 'slightly', 3 = 'moderately', 4= 'very' and 5= 'extremely'. A 'don't know' option was also provided. Results are presented in Figure 29.

Across the total sample, responses to these items reflect a generally positive view of parenting. The majority (85%) found parenting to be very or extremely enjoyable and 93% agreed parenting was very or extremely rewarding. Nevertheless, some parents agreed that parenting in the past six weeks had been frustrating; 9% saying 'extremely' so, 14% 'very' and close to a third (32%) saying parenting had been 'moderately' frustrating over that time. Furthermore, the majority of respondents agreed that parenting was demanding, with three quarters of parents saying this was 'very' or 'extremely' true.

Compared to findings from a large random telephone survey of parents of 0-12 year olds in Queensland (Sanders et al., 1999) the *Parenting Today in Victoria* respondents reported greater levels of demand (76% compared to 63% in the Queensland survey found parenting very or extremely demanding); and more reward from parenting (93% versus 86% in the Queensland sample found parenting very or extremely rewarding). Rather than reflecting differences between jurisdictions these differences could be the result of different sampling approaches (including the different child age ranges included in each survey) or variations in parenting expectations and experiences over time.

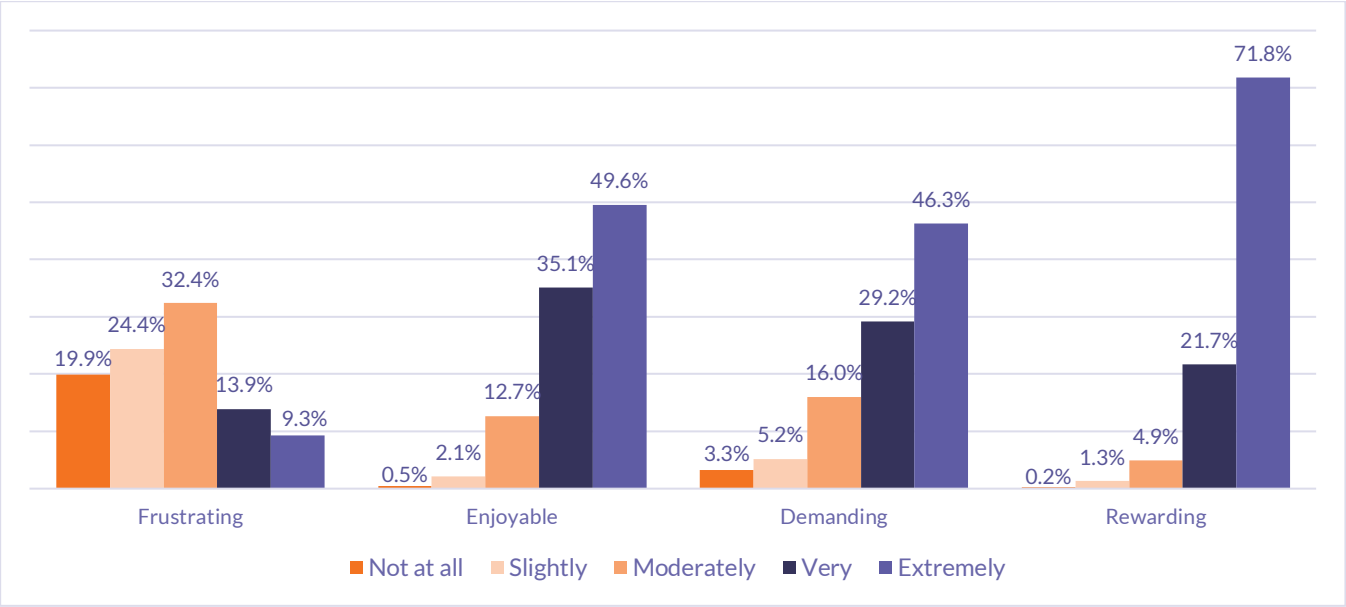

Figure 29. Proportion of responses to items about their experience of parenting (population weighted data).

There were no significant differences on these four item items across *socio-economic groups* or for *metropolitan versus regional areas*.

Fathers reported finding parenting less frustrating than ***mothers*** did, $F(1,2592)=56.163$, $p<.001$ (see Figure 30 and Figure 31). Fathers also found parenting less demanding than mothers did, $F(1,2592)=38.081$, $p<.001$ (see Figure 32 and Figure 33).

There were no *parent gender* differences in the items '*parenting is enjoyable*' or '*parenting is rewarding*'.

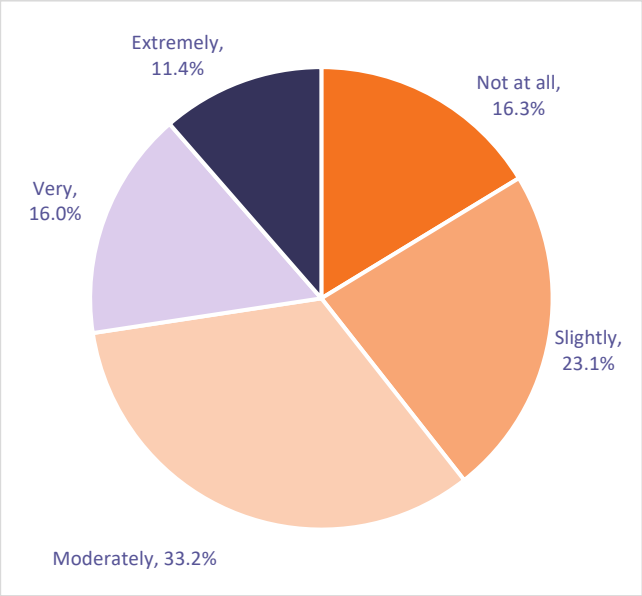

Figure 30. Mothers' ratings to the item 'parenting is frustrating' (population weighted data)

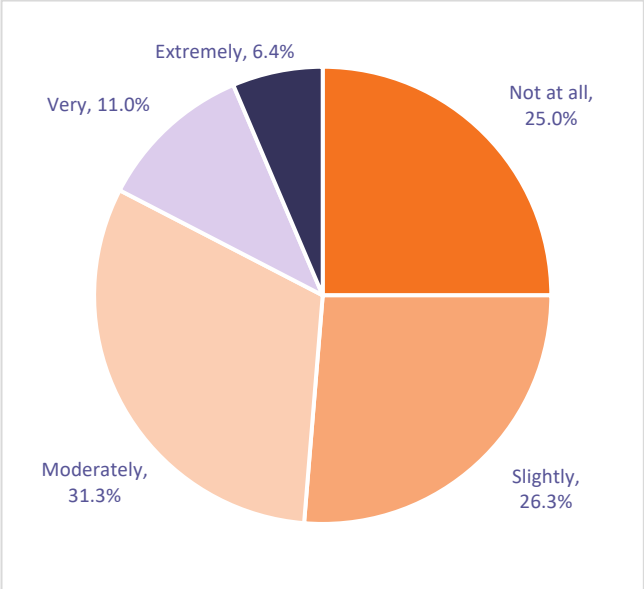

Figure 31. Fathers' ratings to the item 'parenting is frustrating' (population weighted data)

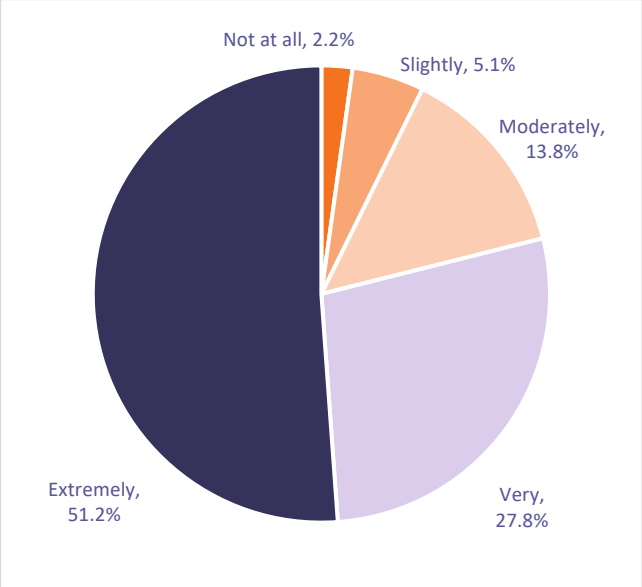

Figure 32. Mothers' ratings to the item 'parenting is demanding' (population weighted data)

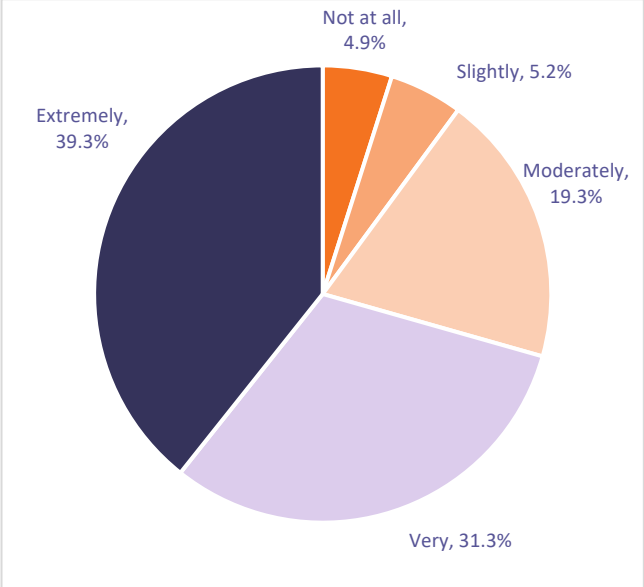

Figure 33. Fathers' ratings to the item 'parenting is demanding' (population weighted data)

For the item about whether parenting was viewed as enjoyable, there were significant differences according to ***child age group***, $F(3,2590)=15.134$, $p<.001$, with parents of older children (13-18 years) significantly less ($p<001$) likely to rate parenting as enjoyable compared to infants (0-2 years) and pre-school children (3-5 year olds) (see Figure 34).

Further, there were ***child age group*** differences in the extent to which respondents found parenting to be demanding in the past six weeks, $F(3,2590)=8.516$, $p<.001$, whereby significant differences ($p<.01$) were observed between each

separate pairing of the four child age groupings (see Figure 35). In general, a greater proportion of parents of younger children found parenting to be demanding compared to parents of older children, although close to half of parent of teens and primary school age children find parenting 'extremely' demanding.

For the item about whether parenting was viewed as rewarding, there was significant difference according to ***child age group***, $F(3,2590)=19.037$, $p<.001$ with parents of older children (6-12 and 13-18 years) significantly less ($p<001$) likely to rate parenting as rewarding compared to infants (0-2 years) and pre-school children (3-5 year olds) (see Figure 36). These findings align closely with findings for the item about parenting being enjoyable, whereby parents of older children reflect lower levels of endorsement of parenting as a positive experience.

There were no significant differences by *child age group* for the item 'Parenting is frustrating'.

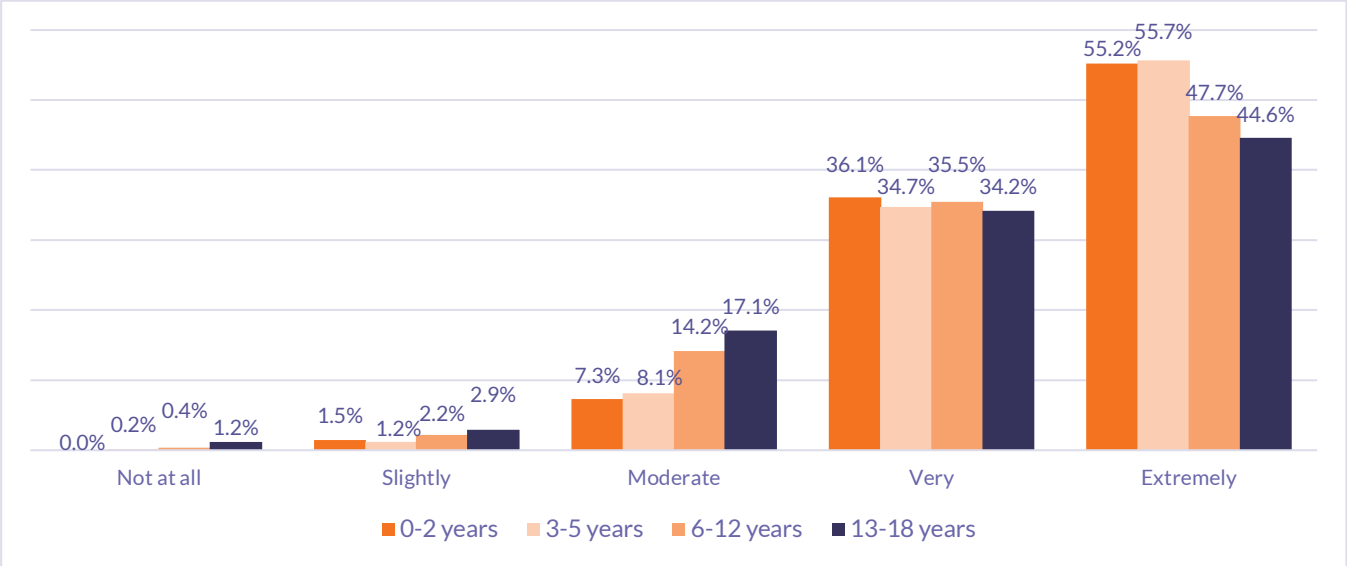

Figure 34. Responses to item 'parenting is enjoyable' by child age groups (population weighted data)

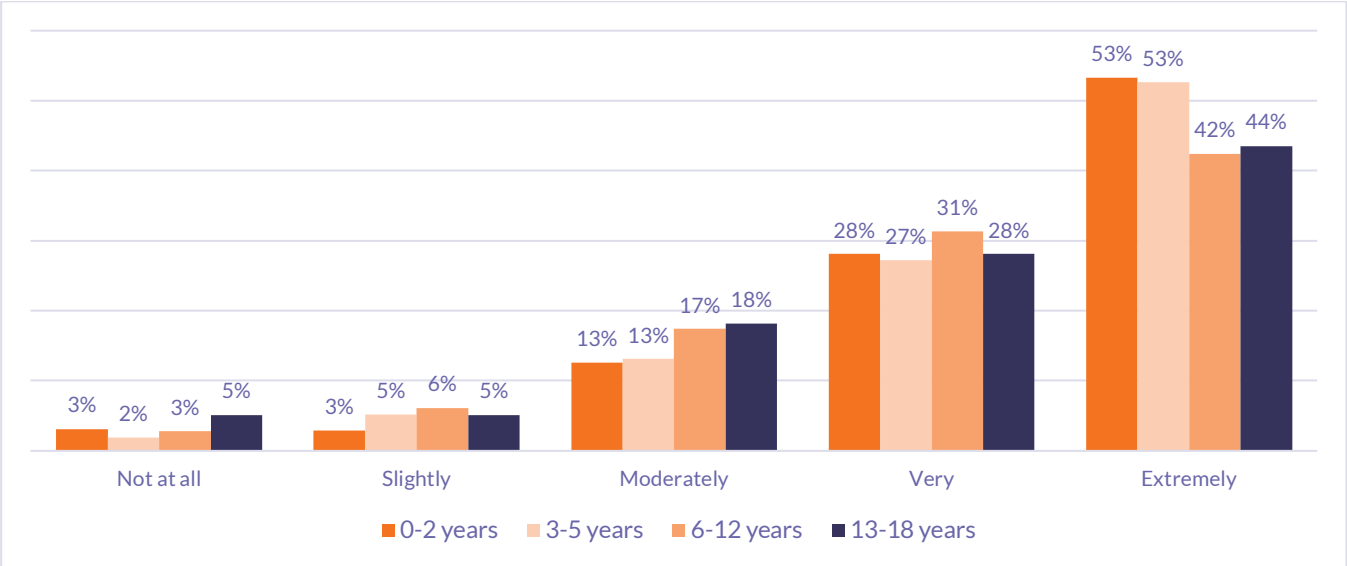

Figure 35. Responses to item 'parenting is demanding' by child age group (population weighted data)

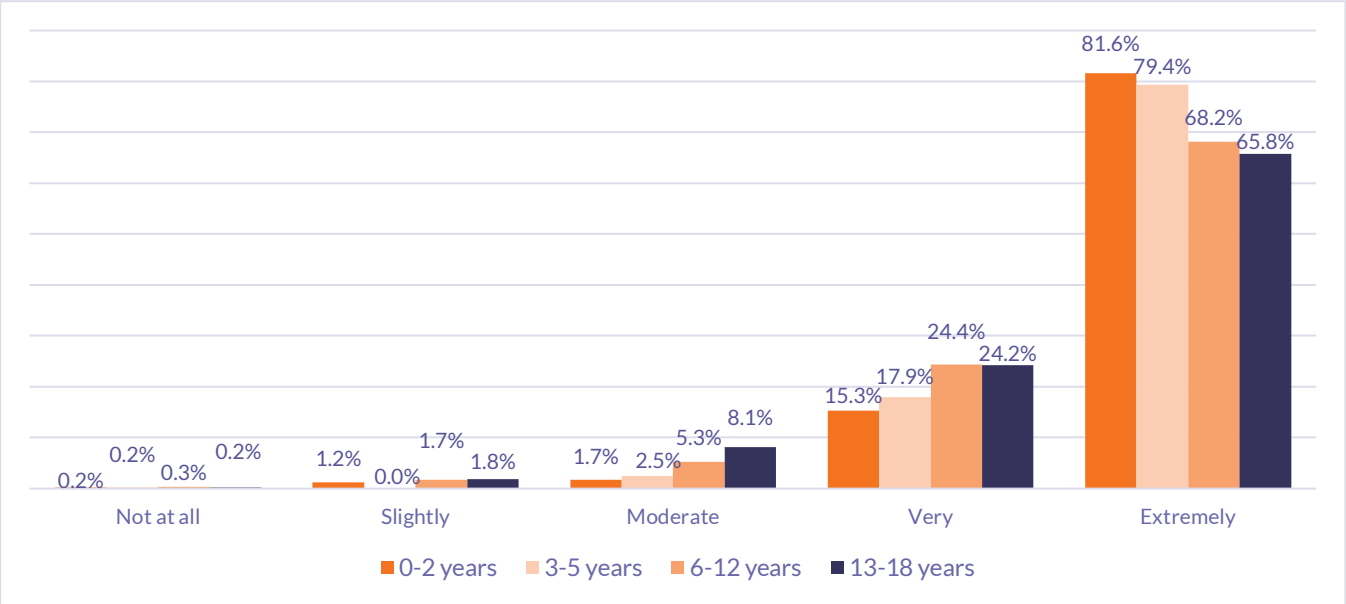

Figure 36. Responses to item 'parenting is rewarding' by child age group (population weighted data)

For two of these items, there were significant differences between parents with and without a ***child with complex needs***: *'parenting is frustrating'* (see Figure 37), $F(1,2592) = 37.476$, $p<.001$; and *'parenting is enjoyable'* (see Figure 38), $F(1(2592) = 12.451$, $p<.001$. Parents of children with complex needs tended to find parenting more frustrating and less enjoyable (see Figure 37 and Figure 38).

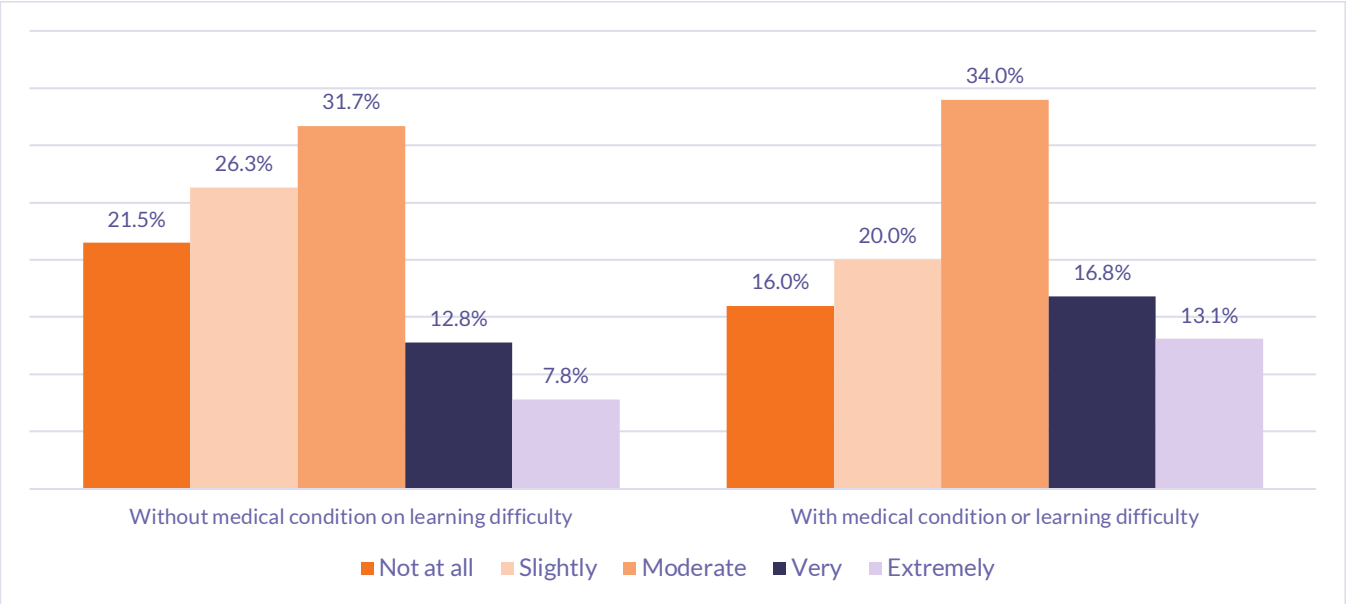

Figure 37. Responses to item 'parenting is frustrating' by children with and without complex needs (population weighted data)

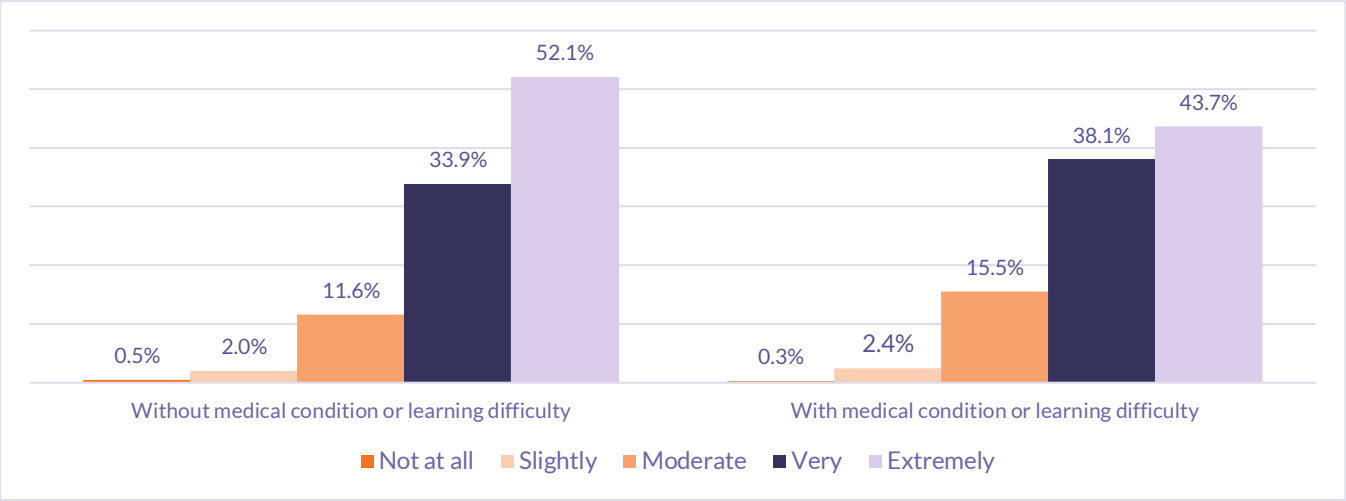

Figure 38. Responses to item 'parenting is enjoyable' by parents of children with and without complex needs (population weighted data)

PARENTS' VIEWS ABOUT HOW TO SUPPORT THEIR CHILD'S RESILIENCE

One question related to child resilience. This question was new; a different question was asked about child resilience in 2016 (*'When my child faces a challenge, I prefer him/her to ask for help rather than persist with it on his/her own'*). The 2016 item was not used for the 2019 because the responses appeared to be too polarising, with no clear patterns of response and limited evidence regarding the benefit of the question to understandings about parents' attitudes to child resilience.

In 2019 parents were asked to indicate their level of agreement with the statement *'I know how to help my child 'bounce back' from difficulties or adversity'*, which reflects the focus of this survey on parents' views about their own capacity to meet their child's needs. The item was developed by the authors of this report, as a result of research led by the Parenting Research Centre in 2017-18 examining definitions of and expert understandings about child resilience (see Avdagic et al., 2018).

Eighty-two percent of parents agreed or strongly agreed that they knew how to help their children 'bounce back'. Only three percent disagreed or strongly disagreed and 15% had mixed feelings.

Parents' views about knowing what to do to foster their children's resilience varied significantly by ***child age group***, with parents of older children reporting less agreement compared to parents of younger children, $F(3,2591) = 8.802$, $p<.001$ (see Table 24). Bonferroni adjusted post hoc analysis revealed the greatest differences were observed between parents of 3-5 years olds and parents of 13-18 year olds ($p<.001$).

There were no statistically significant differences on this resilience item by *socio-economic areas* or for *mothers* versus *fathers*, for *metropolitan vs. regional areas* or *children's* complex needs.

Table 24. Parents' agreement with the statement that they know how to help their child 'bounce back' from difficulties or adversity by child age group, *N* (%) (population weighted data)

	0-2 years (*N* = 412)	3-5 years (*N* = 481)	6-12 years (*N* = 1036)	13-18 years (*N* = 665)	Total (*N* = 2594)
Strongly agree	162 (39.3%)	194 (40.3%)	373 (36.0%)	223 (33.5%)	952 (36.7%)
Agree	189 (45.9%)	228 (47.4%)	486 (46.9%)	283 (42.6%)	1186 (45.7%)
Mixed feelings	54 (13.1%)	52 (10.8%)	150 (14.5%)	128 (19.2%)	384 (14.8%)
Disagree	7 (1.7%)	7 (1.5%)	24 (2.3%)	28 (4.2%)	66 (2.5%)
Strongly Disagree	0 (0%)	0 (0%)	3 (0.3%)	3 (0.5%)	6 (0.2%)
M (SD)	4.23 (0.74)	4.27 (0.71)	4.16 (0.77)	4.04 (0.86)	4.16 (0.78)

Technology and parenting

This section presents findings based on the population weighted data describing parents' experiences of their own and their children's use of electronic devices. There are twelve questions: six about their perceptions of their child's use of technology and their strategies to manage this, and six about their own use of technology. One of these questions is the same as a question in the initial survey in 2016, the other eleven are new questions.

Detailed results are presented for the population weighted sample initially, then by way of child age, mother/father status, area of socio-economic disadvantage, child complex needs, and regional/metropolitan location.

WHAT DO PARENTS REPORT ABOUT THEIR CHILDREN'S USE OF MEDIA AND TECHNOLOGY?

Time spent using electronic devices

Parents' opinions about the amount of time children spent using electronic devices were obtained on a 5 point scale with 1 = 'far too much time', 2 = 'too much time', 3 = 'about right', 4 = 'too little time' and 5 = 'far too little time'. There was also a 'don't know' option.

Forty eight percent of parents thought their child spent too much (or far too much) time using electronic devices, such as iPads, computers and mobile phones (see Figure 39). This was slightly higher than the percentage in the 2016 survey (42%).

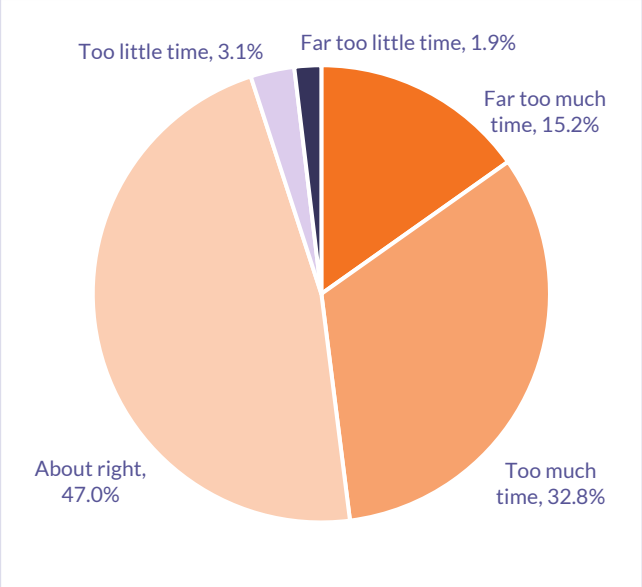

Figure 39. Amount of time child spends using electronic devices (population weighted data)

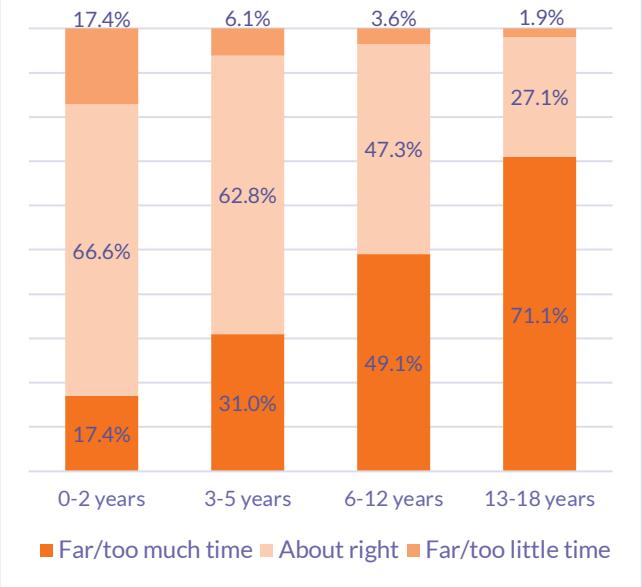

Figure 40. Parents' opinions about the amount of time their children spend using electronic devices by child age group (population weighted data)

Child age group comparisons showed parents of older children (13-18 years) were more likely to report their child spent too much time using electronic devices as illustrated in Figure 40, with 71% saying this was far too much or too much. This finding is statistically significant, $\chi^2(12) = 412.224$, $p<.001$, and is consistent with the 2016 survey (70%).

Comparisons between *mothers and fathers*, parents living in *metropolitan or regional* areas, and parents living in different *socio-economic* areas showed no statistically significant differences in their opinions of the amount of time their child spent using electronic devices. This is consistent with findings of the 2016 survey.

In the 2016 survey, a larger proportion of parents of children with *complex needs* reported their child spent 'far too much time' using electronic devices (19% vs. 12%), and this difference was statistically significant. In the current survey, 17.8% of parents of children with complex needs believed their child spent 'far too much time' using electronic devices compared to 14.1% of other parents. However, this difference failed to reach statistical significance.

Hours per weekday child spends using electronic devices.

Parents were asked how many hours each weekday (on average) their child spends using electronic devices. This question was not asked in 2016.

There were 2551 valid cases (i.e., within range responses where apparently large number of hours were validated with a follow-up phone call to respondents) who reported an overall mean of 2.07 hours per day spent on devices (*SD*=2.190; range 0-20 hours). In cases where excessively high hours (12+ per day) were reported (*n*=19) we either validated the hours with a follow-up phone call to respondents (*n*=6), or treated data as missing (*n*=13).

There was an increase with ***child age*** in the number of weekday hours spent on electronic devices, $F(3,2547) = 301.936$, $p<.001$ (see Table 25), which reflects a large effect size ($\eta_p^2 = .238$). Post hoc tests revealed significant ($p<.001$) differences between each combination of age groups. Of note, the average number of hours teenagers reportedly spent on electronic devices per weekday approached four hours.

Comparisons between *mothers and fathers*, parents living in *metropolitan or regional* areas, parents living in different *socio-economic* areas and parents with and without a child with complex needs showed no statistically significant differences in terms of the amount of time parents reported their child spent using electronic devices each weekday.

Table 25. Hours per weekday child spends using electronic devices by child age group (population weighted means)

Child age groups	n	Mean	SD
0-2 years	407	.56	1.137
3-5 years	474	1.37	1.929
6-12 years	1019	1.87	1.771
13-18 years	651	3.82	2.334
Total	2551	2.07	2.190

Hours per weekday parents are comfortable with child's use of electronic devices

Another question not asked in 2016 was how many hours per weekday parents would be comfortable with their child using electronic devices. In the 2019 survey, parents reported an overall mean of 1.43 hours per day es (*SD*=1.627; range 0-16 hours).

There was an increase with ***child age*** in the number of weekday hours a parent would be comfortable with their child spending on electronic devices, $F(3,2586) = 119.613$, $p<.001$, which reflects a large effect size ($\eta_p^2 = .122$) (see Table 26). Post hoc tests reveal significant ($p<.001$) differences between every combination of age groups except 0-2 and 3-5 year olds and between 3-5 and 6-12 year olds.

Table 26. Hours per weekday a parent would feel comfortable with their child spending on electronic devices by child age group (population weighted means)

Child age groups	n	Mean	SD
0-2 years	412	.74	1.133
3-5 years	480	1.09	1.335
6-12 years	1034	1.27	1.388
13-18 years	664	2.34	2.000
Total	2590	1.43	1.627

In regard to the amount of time parents reported they would be comfortable with their child on electronic devices on weekdays, comparisons between *mothers and fathers*, parents living in *metropolitan or regional* areas, parents living in different *socio-economic* areas and parents with and without a *child with* complex needs showed no statistically significant differences.

Parents' rules or strategies to control children's use of electronic devices

When asked whether they had rules or strategies to control their children's use of electronic devices, just over 80% of parents said yes. There was a slight difference between *mothers* (81.5%) and *fathers* (79.2%) but this was not statistically significant. There was no comparable question in the initial survey, but in the 2016 survey parents were given a list of nine strategies for controlling children's use of devices and were asked to identify the strategies they used. Seventy-five percent established ground rules and 67% limited the time children could use devices. Sixty three percent used four or more strategies.

Child age made a difference to whether parents had rules or strategies, with parents of pre-school and primary school aged children more likely to say yes (see Figure 41). Overall, child age group differences were statistically significant, $\chi^2(3) = 101.788, p<.001$.

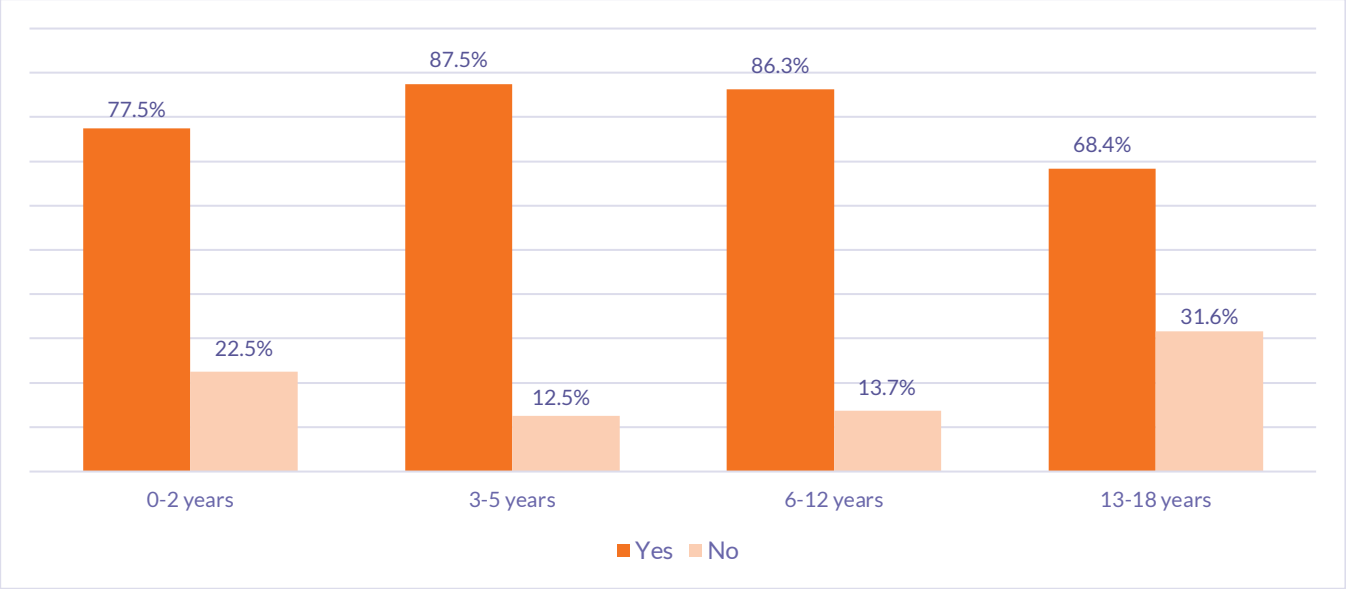

Figure 41. Parents use of rules or strategies to control child's use of devices by child age groups (population weighted data)

There were no statistically significant differences between *metropolitan and regional areas*, areas of *socio-economic disadvantage* and whether the child had complex needs.

Success of rules or strategies to control child's use of electronic devices

Parents who responded yes to the question about rules and strategies for controlling children's use of electronic devices were also asked to rate the extent to which those rules or strategies were successful, according to a 5-point scale from 'strongly agree' to 'strongly disagree'. Overall, 65.3% of parents agreed or strongly agreed they were successful in controlling their child's use of devices, with 23.8% reporting mixed feelings.

There were no differences between *mothers and fathers*, *metropolitan or regional* areas or areas of *socio-economic disadvantage*. There was also no difference in the ratings of parents with or without a child with complex needs.

However, ***child age*** comparisons showed statistically significant differences, $F(3,2089) = 53.504$, $p<.001$, with a moderate effect size evident ($\eta_p^2 = .071$) (see Figure 42). Parents of younger children were more likely to agree they were successful. Post hoc analyses showed no statistically significant differences between the 0-2 and 3-5 age groups, but all other comparisons were significant.

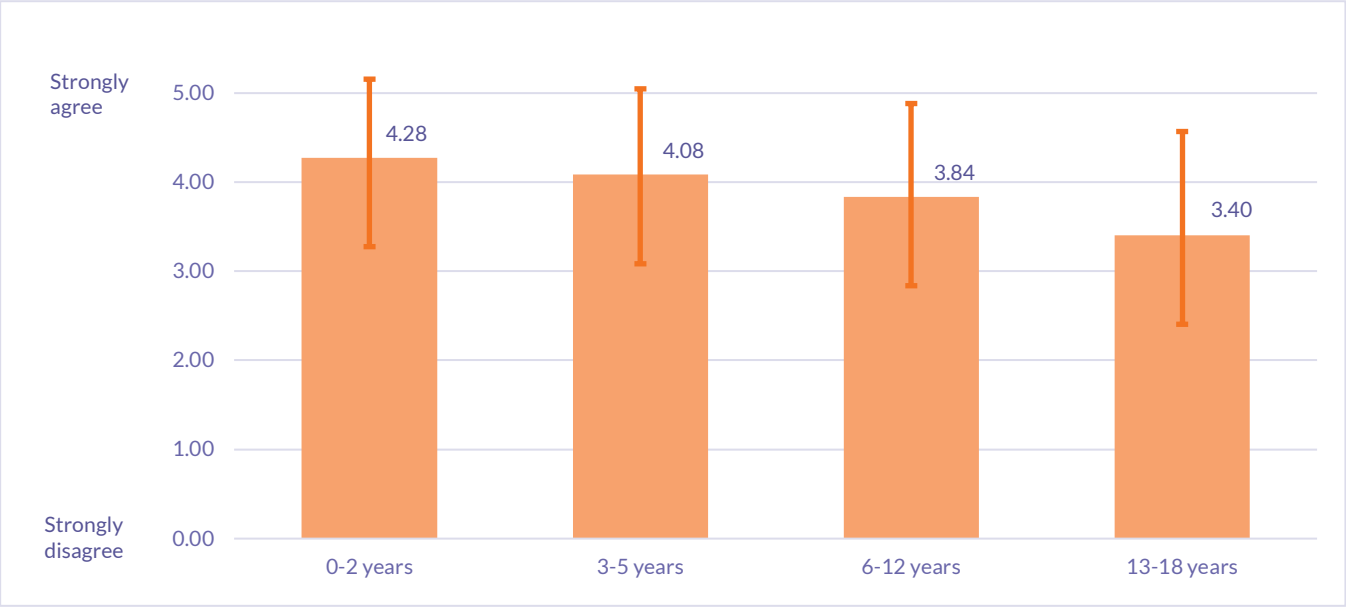

Figure 42. The degree to which parents agreed their rules and strategies were successful – means by child age groups (population weighted means)

Parents' confidence in managing child's use of electronic devices

All parents were asked about their confidence in effectively managing their child's use of devices, regardless of whether they had rules or strategies to do so. Responses were on a 5-point scale from 'strongly agree' to 'agree'.

Findings showed 60% agreed or strongly agreed they felt confident. Forty percent showed less confidence having mixed feelings (23%) or disagreement or strong disagreement (17%). Responses on this item were highly correlated (Pearson's $r=.774$) with responses to the previous item about how successful parents' strategies were.

There were no significant differences between *mothers and fathers*, parents from *metropolitan or rural* areas, or *different socio-economic areas of disadvantage*. Parents with and without children with complex needs reported similar levels of agreement.

Consistent with findings for how successful parents felt in controlling their child's device use, there was an effect of ***child age***, with parents of younger children reporting more confidence (see Figure 43). Only 38% of parents of 13-18 year olds

said they 'agreed' or 'strongly agreed' compared to 74% of parents of 3-5 year olds and 79% of children 0-2 years (see Figure 44). Mean ratings ranged from 4.24 for 0-2 year olds to 3.08 for 13 to 18 year olds. Child age group differences were statistically significant, $F(3,2595)=120.539$, $p<.001$, and showed a moderate to large effect size ($\eta_p^2 = .122$). Post hoc analysis showed the only age group difference that was not statistically significant ($p<.001$) was for the 0-2 years and 3-5 years comparison.

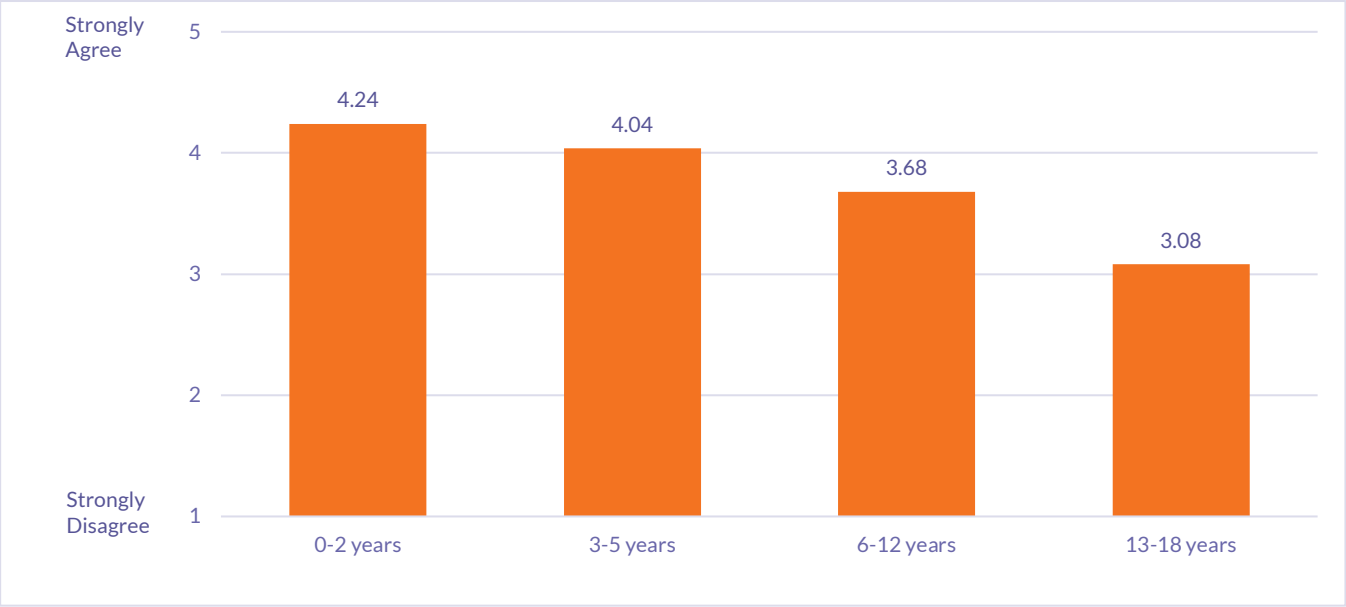

Figure 43. The degree to which parents felt confident to manage their child's device use – means by child age groups (population weighted means)

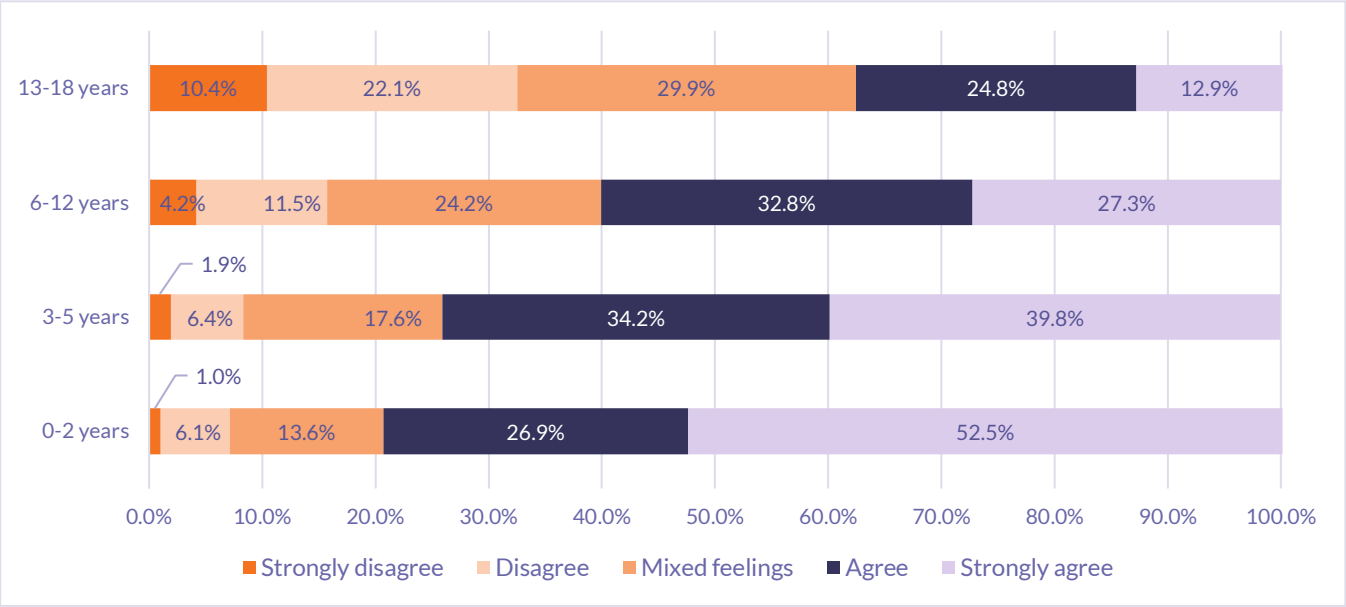

Figure 44. The degree to which parents felt confident to manage their child's device use by child age (population weighted data)

Parents' use of mobile phone or device

More than half of parents (55%) 'agreed' or 'strongly agreed' they used their mobile phone or device too much. There were no differences between *mothers and fathers*, *metropolitan or regional* parents, areas of *socio-economic disadvantage* or their child having complex needs or not.

Findings for ***child age*** showed parents of younger children were more likely to indicate they used their mobile phone or device too much (see Figure 45). Over sixty percent (67.6%) of parents of 0-2 year olds 'agreed' or 'strongly agreed' compared to 65% of parents of 3-5 year olds, 55.6% of parents of 6-12 year olds and 39.5% of parents of children aged 13-18. Post hoc analyses showed no significant difference between the means of child age groups 0-2 and 3-5, but all other child age group comparisons were significantly different, $F(3,2595) = 54.918$, $p<.001$, with a moderate effect size for child age ($\eta_p^2 = .06$).

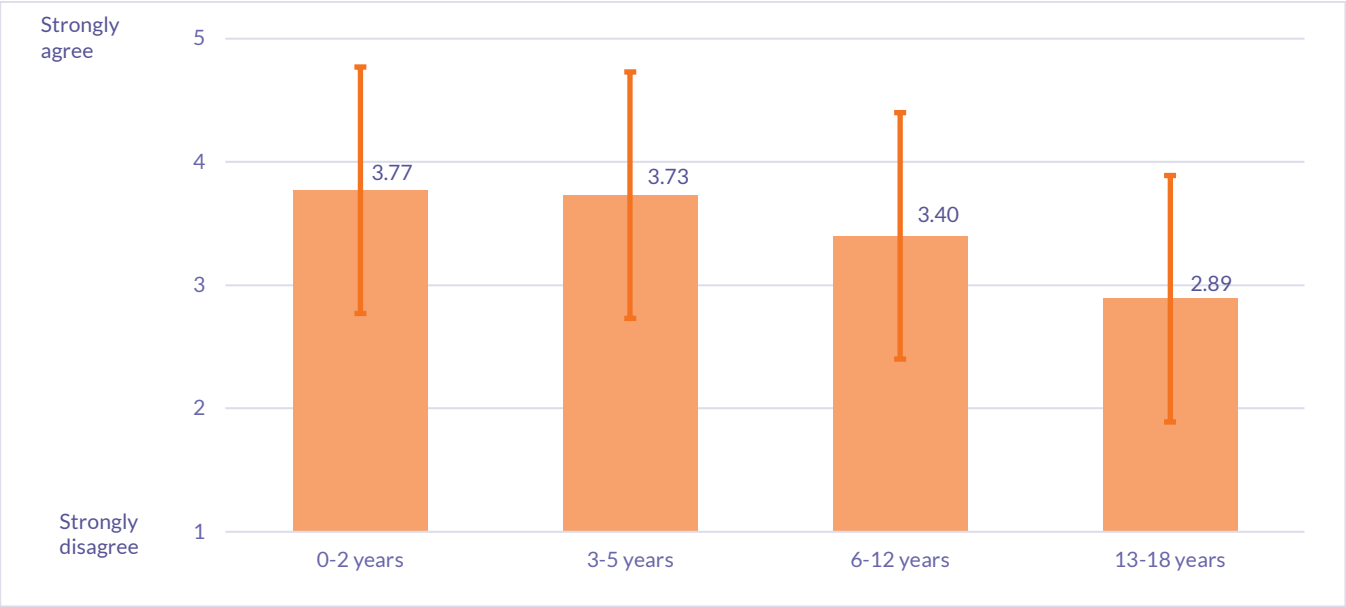

Figure 45. Degree parents' feel their own use of mobile phone or devices is too much, means (with SD bars) by child age group (population weighted means)

Parents' comfort with their use of technology

Using a 5-point agreement scale, parents indicated how comfortable they were with their use of technology when they were spending time with their children. Just over sixty percent of all parents (61%) agreed or strongly agreed they felt comfortable.

There were no differences for *mothers/fathers*, *metropolitan/regional* areas or areas of *socio-economic disadvantage*. Also, there was no statistically significant difference in the ratings of parents of children with and without complex needs.

Child age group comparisons showed parents of younger children felt less comfortable with their use of technology. Fifty-six percent of parents of children aged 0-2 years agreed or strongly agreed they felt comfortable compared to 68% of parents of 13-18 year olds (see Figure 46). The mean agreement rating for 0-2 year olds was 3.52 and for 13-18 year olds was 3.80, and this difference, revealed in post hoc analysis, was statistically significant, $F(3,2592)=7.193$, $p<.001$.

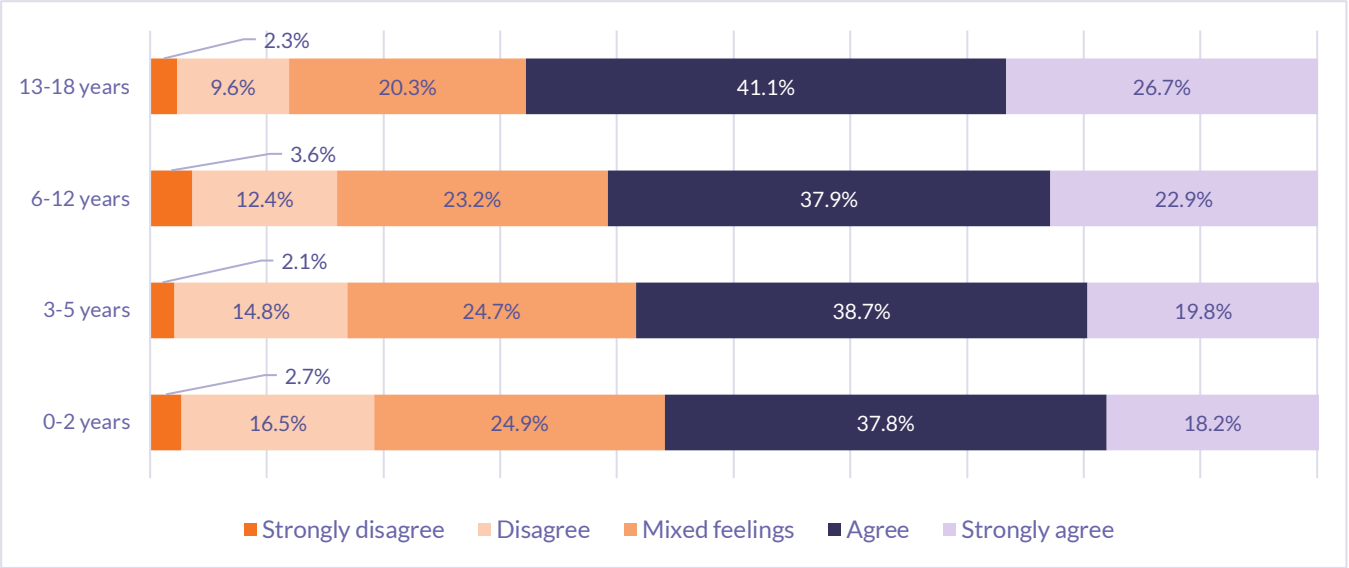

Figure 46. Parent comfort using technology when with their child, by child age groups (population weighted data).

Parents reaction to child interrupting their use of technology

Parents responded to the following statement on a 5 -point agreement scale: 'I feel annoyed when my child interrupts me while I am using my mobile phone or other device.' There was a low level of agreement with this statement (9%) with nearly 15% having mixed feelings.

There were no statistically significant differences for *mother/father* comparisons, *metropolitan/regional areas*, areas of *socio-economic disadvantage* and whether the parent had a child with complex needs or not.

Child age made a difference, however, with parents of children aged 3-5 and 6-12 reporting a higher level of agreement , $F(3,2595)=7.661$, $p<.001$ (see Figure 47). Post hoc analyses showed significant ($p<.001$) differences between age groups 3-5 years and 13-18 years, and between age groups 6-12 years and 13-18 years. See Figure 48 for the means for the different child age groups.

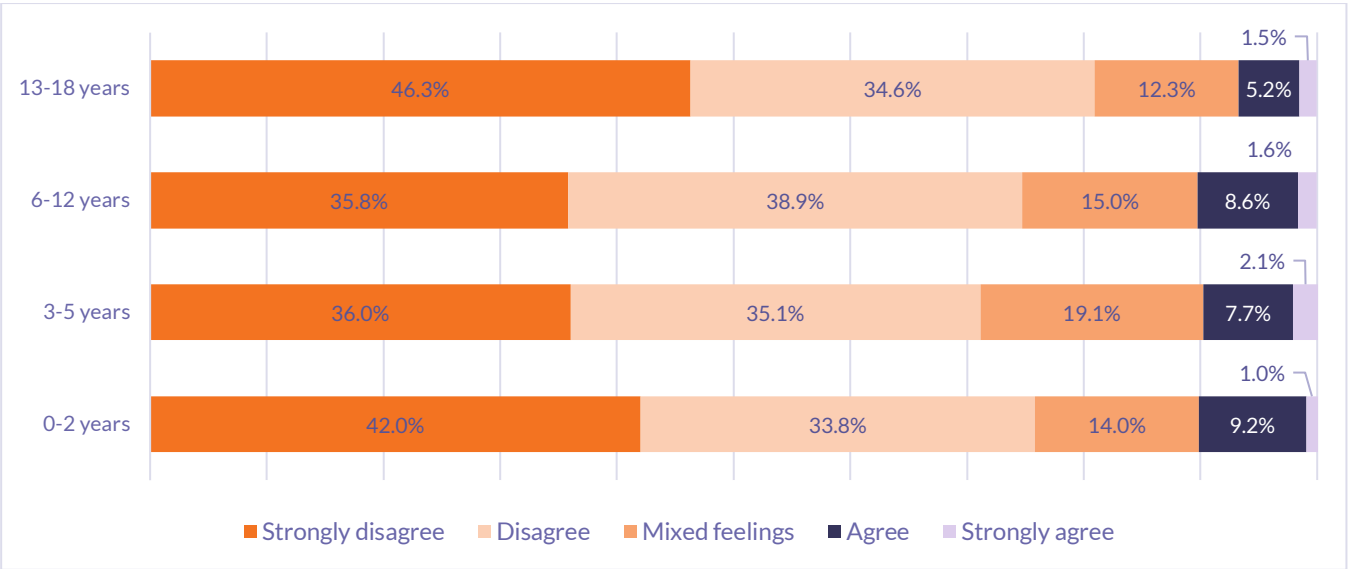

Figure 47. Degree parents are annoyed by child interrupting their device use, by child age group (population weighted data)

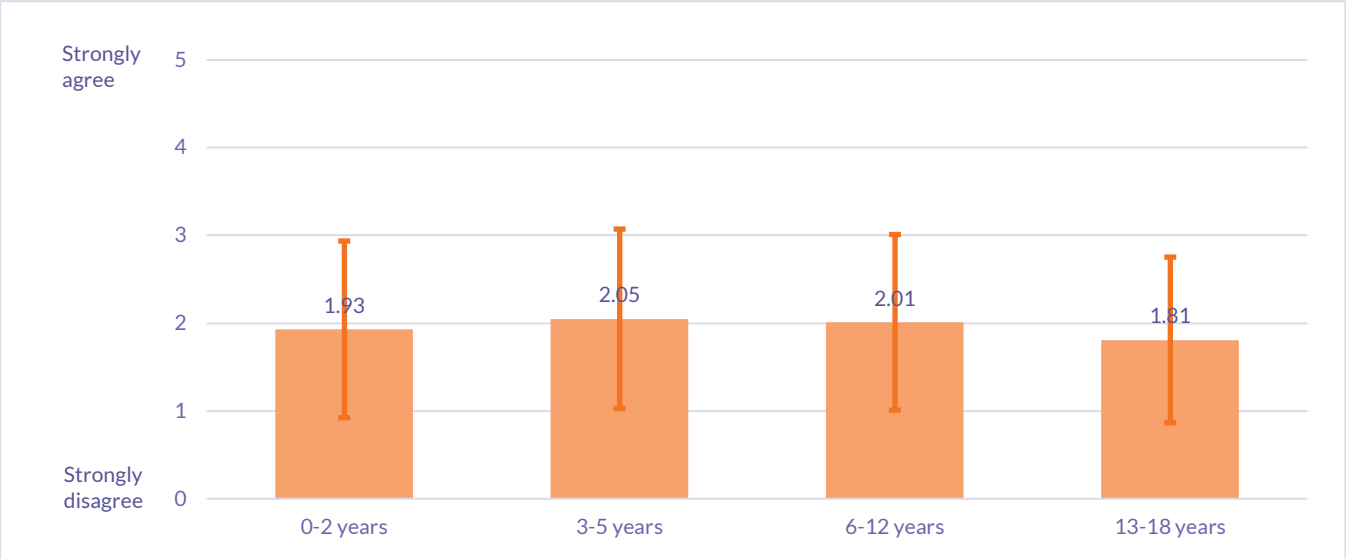

Figure 48. Degree parents are annoyed by child interrupting their device use - means (with *SD* bars) for child age groups (population weighted means).

Use of technology and perception of parenting

Parents responded on a 5-point agreement scale to the statement 'My use of technology helps me to be a better parent'. There was a low level of agreement with this statement with only a quarter of parents (25%) agreeing or strongly agreeing. Over thirty percent had mixed feelings and 44% disagreed or strongly disagreed.

There were no statistically significant differences between *mothers and fathers* or between *metropolitan or regional* areas, areas of *socio-economic disadvantage* and whether their child had complex needs.

There was a statistically significant difference for ***child age*** groups, $F(3,2595)=6.025$, $p<.001$. Post hoc analyses revealed a difference ($p<.001$) between two of the four child age groups: parents of children age 0-2 years had a mean agreement score of 2.89 and parents of 13-18 year olds had a mean score of 2.63. This shows parents of infants and toddlers were more likely to agree their use of technology helps them to be a better parent.

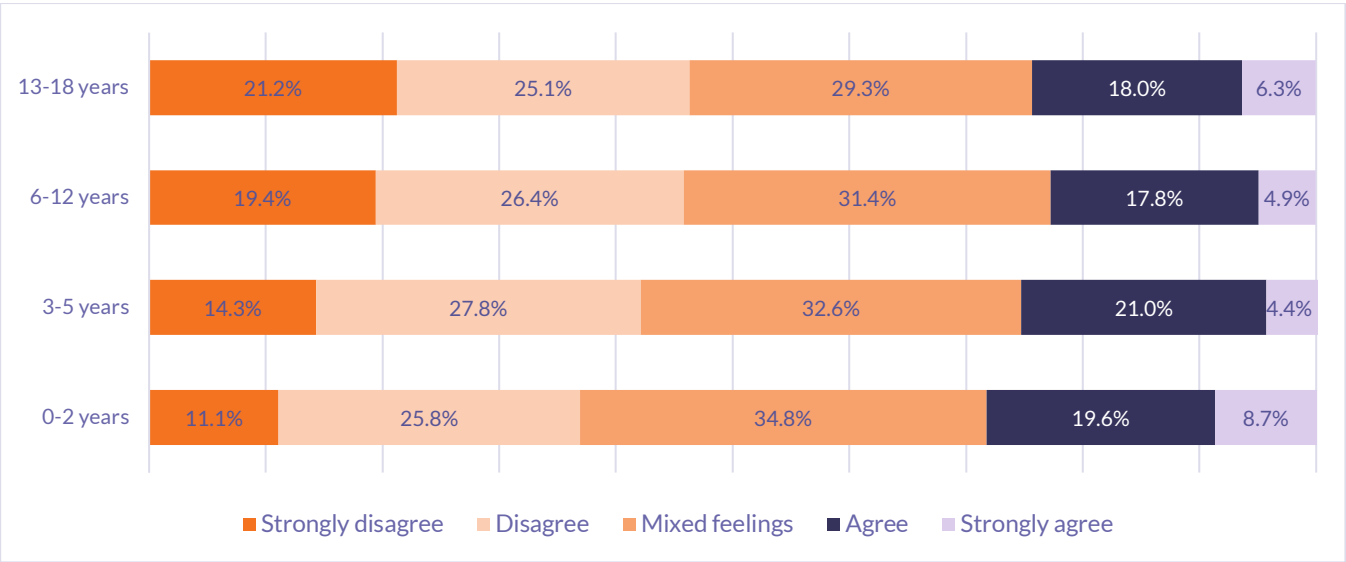

Figure 49. Parents' use of technology and benefit to parenting, by child age groups (population weighted data).

Parents' focus on child and use of technology

Parents were asked whether their use of technology interfered with parenting. Specifically, they indicated their level of agreement with the following statement 'It's easy for me to put my mobile phone or other device away and focus fully on my child/ren when I am spending time with them.' Eighty percent agreed or strongly agreed it was easy.

Comparisons between *mothers and fathers*, *metropolitan or regional* areas, areas of *socio-economic disadvantage* and whether their child had complex needs showed no statistically significant differences.

Parents of older children were more likely to say it was easy for them to put their phone or device away. Percentages of agreement/strong agreement were similar for the 0-2, 3-5 and 6-12 ***child age*** groups (76.9%, 76.3% and 79.4% respectively) and lower than the 13-18 age group (85%) as shown in Figure 50. A significant overall effect was detected, $F(3,2589)=8.665$, $p<.001$, and post hoc analysis revealed the mean differences between the three younger age groups and the 13-18 age group were statistically significant ($p<.001$). See Figure 51 for mean scores for each child age group.

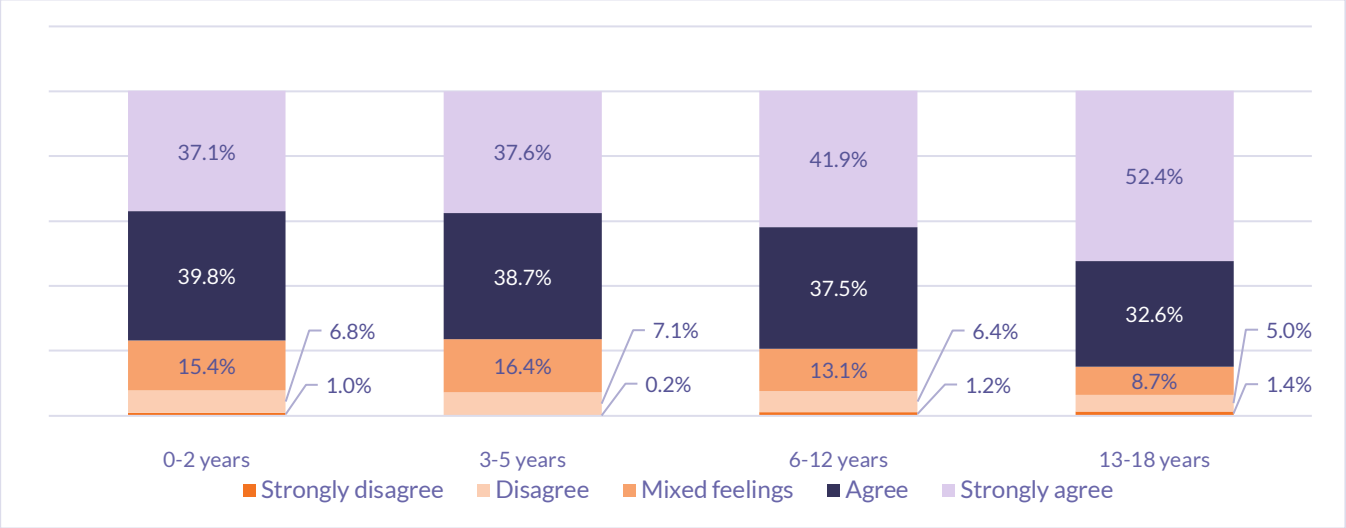

Figure 50. Parents' use of technology and focus on child, by child age (population weighted data).

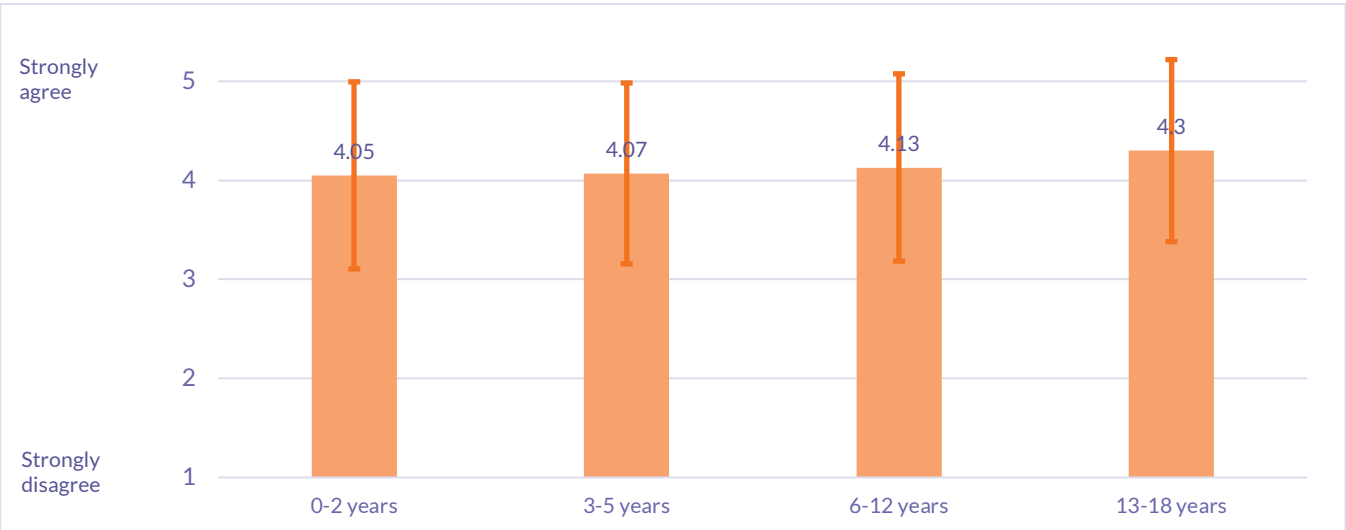

Figure 51. Parents' use of technology and focus on child, means (and *SD* as bars) for child age groups (population weighted means).

CHILDREN'S CONCERN ABOUT PARENTAL TECHNOLOGY USE

A final question in this topic area was about children's views of their parents' technology use. Using a 5-point rating scale from '1= not at all concerned ' to '5= very concerned', parents responded to the following statement '*To what extent do you think your child/ren are concerned about your use of electronic devices*'.

Over sixty percent (63%) said their children were not at all concerned, 15% said they were a little concerned, 15% had mixed feelings and 4% said their children were quite or very concerned.

There were no statistically significant differences between *mothers and fathers*, *metropolitan or regional* areas, areas of *socio-economic disadvantage*, and whether their child had complex needs.

Given an overall significant effect by ***child age*** group, $F(3,2596) = 10.100$, $p<.001$, the only significant ($p<.001$) difference was between parents of children aged 6-12 years (mean 1.71) and 13- 18 years (mean 1.48) showing parents of children in the younger age group thought their children were more concerned (see Figure 52 and Figure 53).

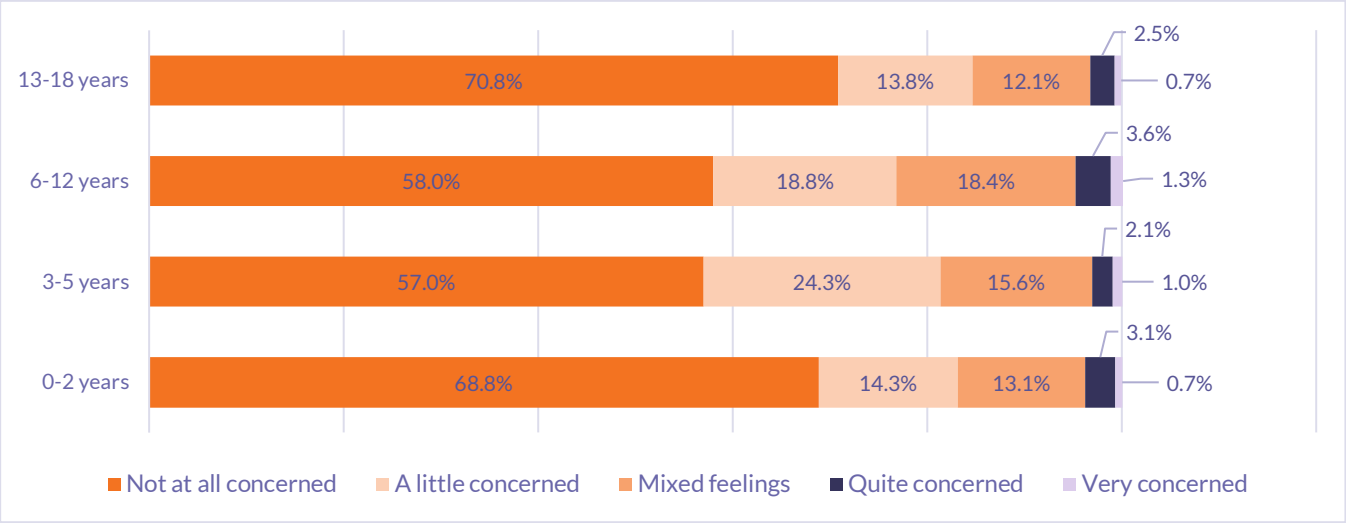

Figure 52. Extent to which children are concerned about parents' technology use by child age (population weighted data).

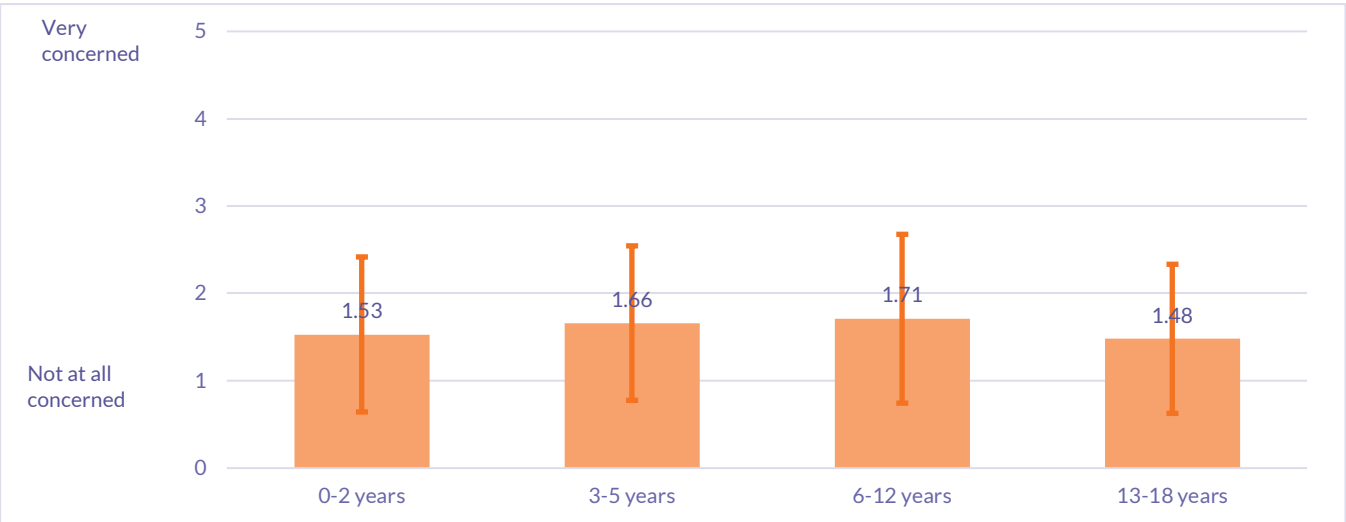

Figure 53. Extent to which children are concerned about parents' technology use – age group means (SD as bars) (population weighted means).

Beliefs about parenting

This section presents findings based on the population weighted data describing parents' beliefs about parenting, including their views about whether:

- parenting comes naturally
- parenting can be learned
- the current generation is doing a better job at parenting than the previous generation
- the way one raises their child is determined by how they were parented themselves
- parenting advice can be helpful given individual differences of each child, and
- governments should help families with their parenting.

All these items were new to the 2019 survey. These items were devised following a separate piece of research commissioned by the Parenting Research Centre and conducted by the Frameworks Institute (May 2016) which examined differences in views of parenting between experts and the general public (i.e., not specifically parents' views).

This research found differences in the way experts and the general public thought about parents and about parenting, which are thought to have implications for the way parenting challenges are perceived and responses to parents in need. In an effort to explore how parents themselves felt about some of the areas where expert-public views differed, we included the above statements in the 2019 *Parenting Today in Victoria* survey.

Parents were asked to respond on a scale of 1 (strongly disagree) to 5 (strongly agree) how much they agreed with the six statements summarised above. With the exception of one item (parenting can be learned, which demonstrated a skew in responding, favouring agreement that parenting can be learned), these items showed variability in responses, with evidence of a normal distribution of scores.

Figure 54 illustrates how many respondents had mixed feelings about many of the items, in particular, the statement 'parenting comes naturally' (29% mixed feelings), the item about generational differences in parenting (43% had mixed feelings, the role of government in parenting (30% had mixed feelings), and the usefulness of parenting advice given individual child differences (31% had mixed feelings).

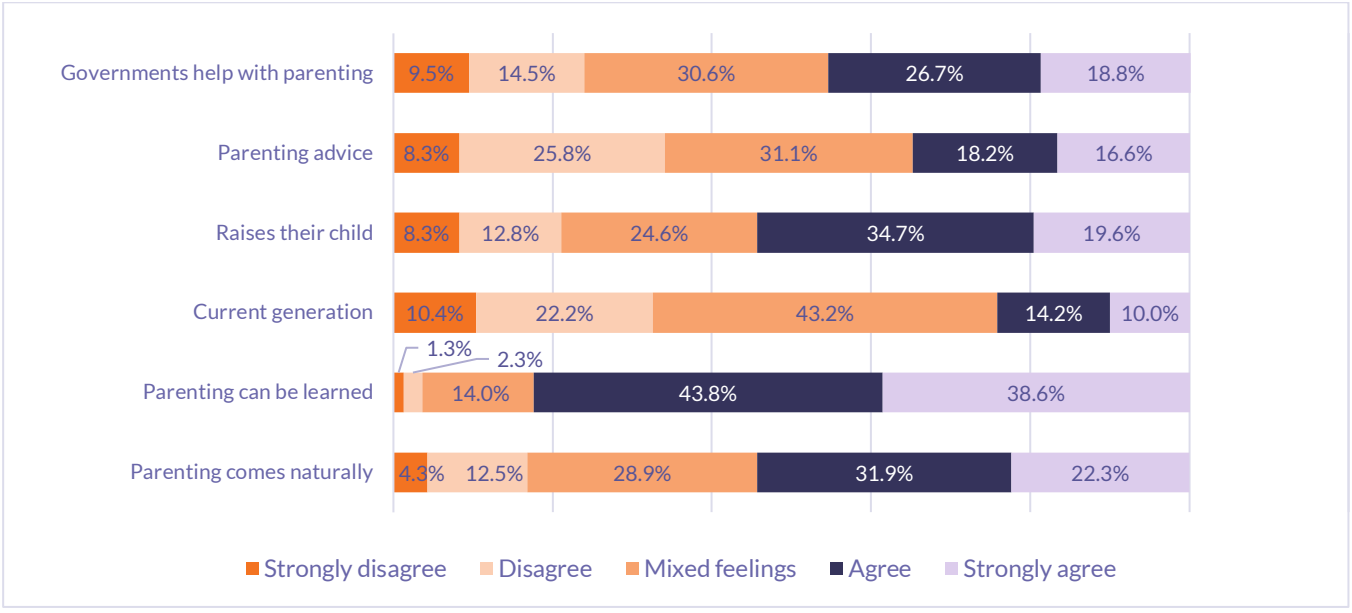

Figure 54. Responses to items regarding beliefs about parenting, whole sample (population weighted data).

The majority of respondents (54%) agreed or strongly agreed that parenting came naturally, while 17% disagreed or strongly disagreed with this statement.

There was a significant difference on this item between ***mothers and fathers***, $F(1,2593) = 15.704$, $p<.001$, with mothers, on average, expressing higher levels of agreement with the statement that 'parenting comes naturally'. Figure 55 shows the different distributions of responses for mothers and for fathers.

There was also a significant overall difference on the item *'Parenting comes naturally'* across ***socio-economic groups***, $F(4,2574) = 9.884$, $p<.001$, with Bonferroni adjusted post hoc comparisons indicating the largest (and statistically significant at the $p<.001$ level) differences were between the lowest socio-economic quintile and the top quintile, and also between the third (middle) quintile and the top quintile (see Figure 56). Broadly, parents residing in areas of lower socio-economic status were more likely to view parenting as coming naturally.

Further, a significant difference on this item was found between parents of ***children with and without complex needs***, $F(4,2594) = 16.944$, $p<.001$, with parents of a child with complex needs less likely to view parenting as coming naturally (see Figure 57).

There was no statistically significant difference at the $p<.001$ level on this item between *child age groups* or for *metropolitan versus regional* dwellers.

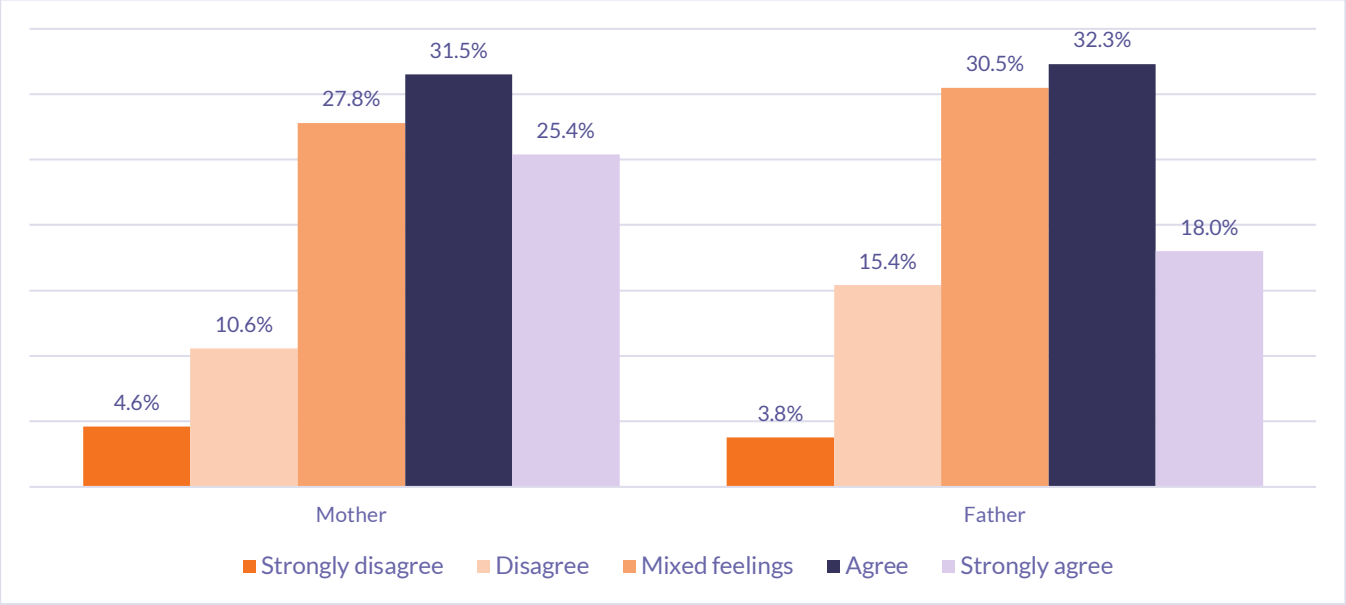

Figure 55. Responses to the item 'Parenting comes naturally', for mothers and fathers (population weighted data).

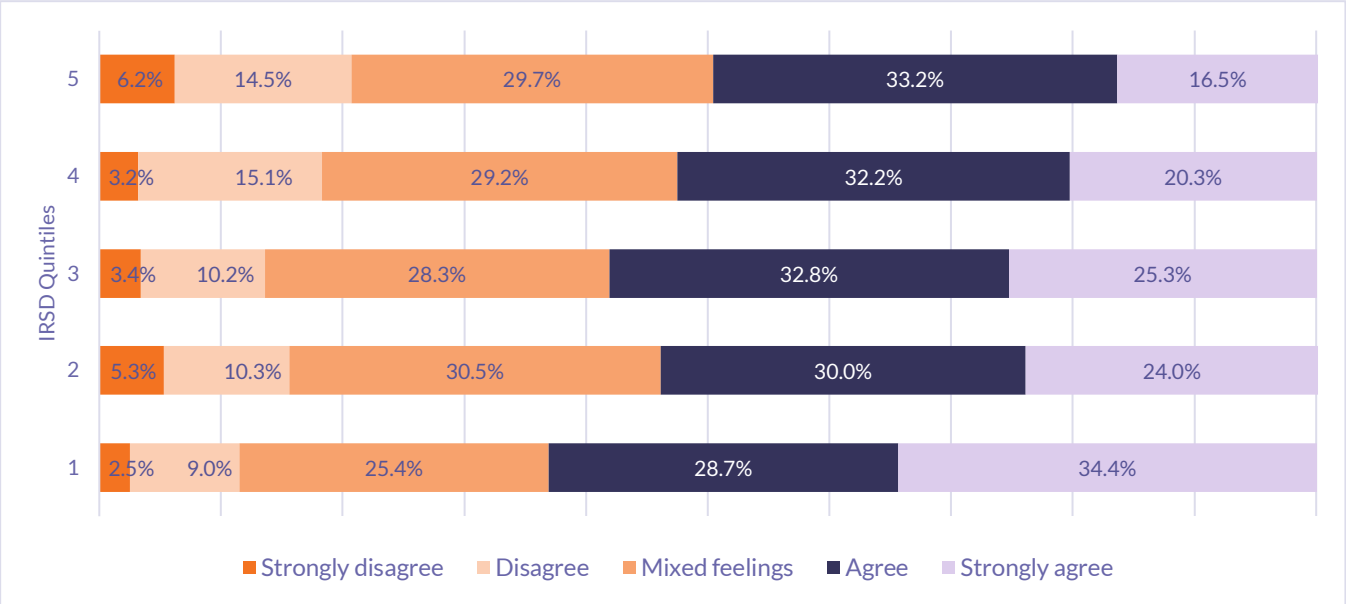

Figure 56. Responses to the item 'Parenting comes naturally', by socio-economic quintiles (population weighted data).

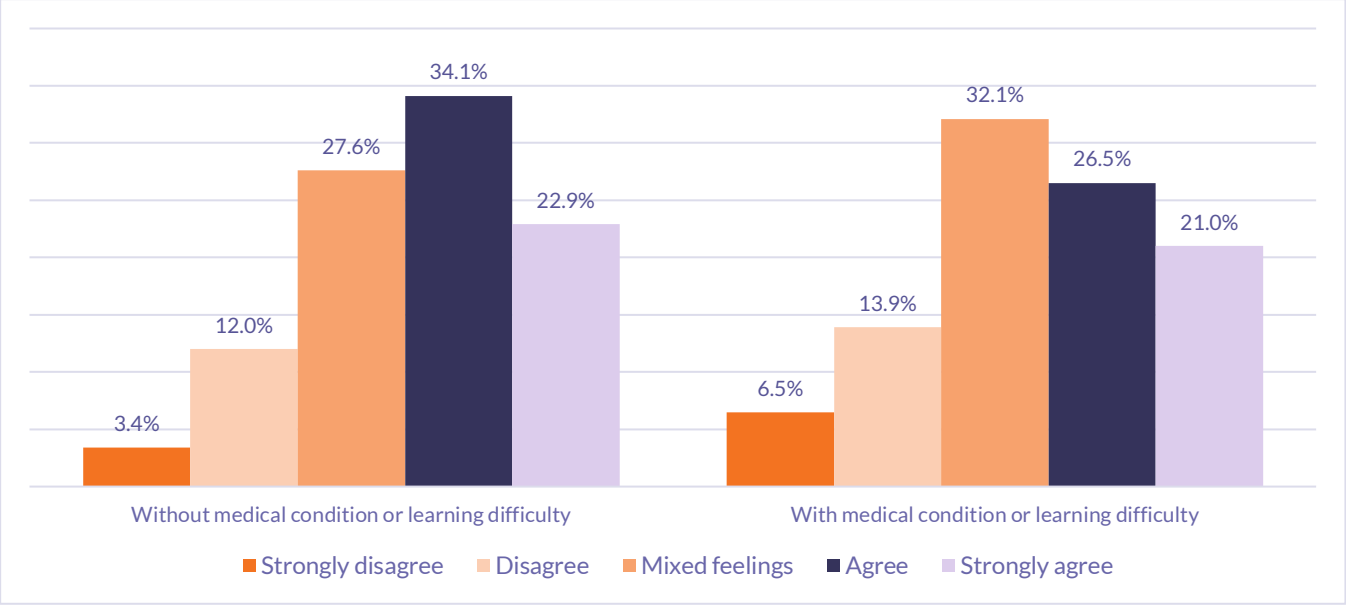

Figure 57. Responses to the item 'Parenting comes naturally', by child complex needs (population weighted data).

A large majority of respondents agreed (44%) or strongly agreed (39%) that parenting can be learned, while only a small proportion (4%) disagreed or strongly disagreed with this.

There was a significant overall difference on this item across ***child age groups***, $F(3,2591)=6.418$, $p<.001$, with Bonferroni adjusted post hoc comparisons indicating the largest (and statistically significant at the $p<.01$ level) differences were between parents of the oldest children (13-18 years) and parents of the two youngest groups of children (0-2 year and 3-5 years). Parents of younger children were more likely to believe parenting can be learned (see Figure 58).

There was no statistically significant difference at the $p<.001$ level on this item between *mothers and fathers*, *socio-economic groups*, *metropolitan versus regional* parents, or for parents of *children with or without* complex needs.

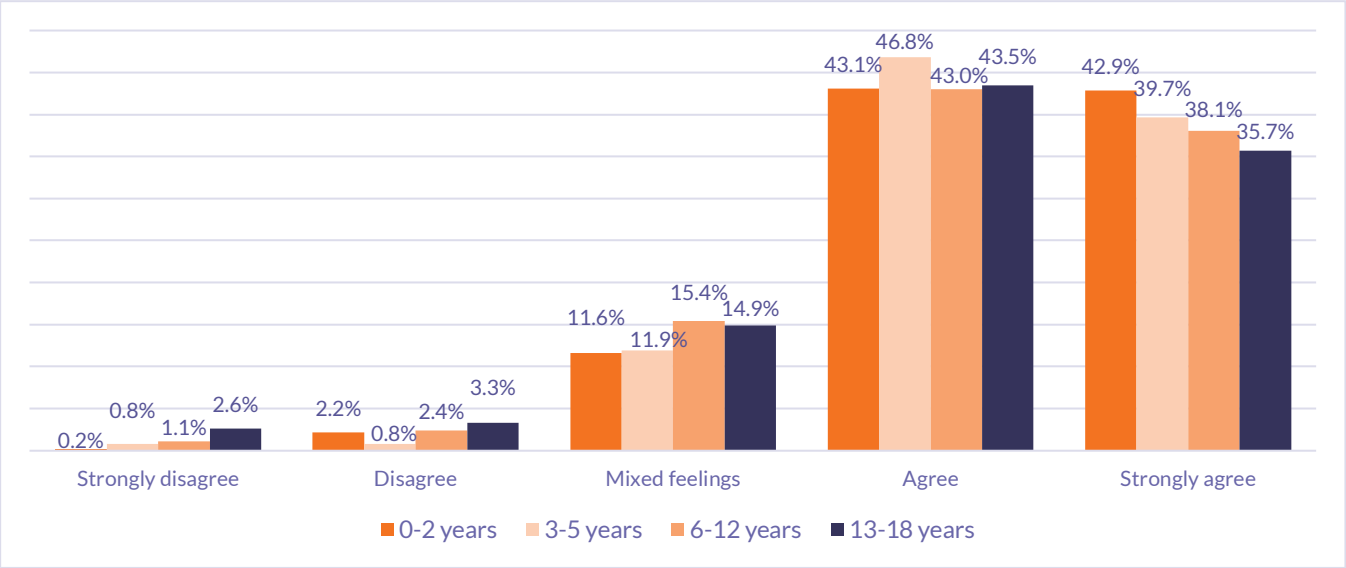

Figure 58. Responses to the item 'Parenting comes naturally', by child age groups (population weighted data).

The most frequent response to the item *'My generation of parents is doing a better job than my parents' generation did'* was 'mixed feelings' (43%), and only 24% agreed or strongly agreed this the statement. The remaining respondents either disagreed (22%) or strongly disagreed (10%).

There was no statistically significant difference at the $p<.001$ level on this item between *mothers and fathers*, *child age groups*, *socio-economic groups*, for parents of *children with versus without* complex needs, or for *metropolitan versus regional* dwellers.

Many respondents agreed (35%) or strongly agreed (20%) that the way a person raises their children is determined by how they were parented themselves. Only 21% disagreed or strongly disagreed with this deterministic view of parenting influences.

There was no statistically significant difference at the $p<.001$ level on this item between *mothers and fathers*, *child age groups*, *socio-economic groups*, for *metropolitan versus regional* dwellers, or for parents of *children with versus without* complex needs.

Thirty-five percent of respondents agreed or strongly agreed with the statement '*Parenting advice is not helpful because every child is so different*'. While 31% expressed 'mixed feelings' about this item, 34% disagreed or strongly disagreed.

There was a significant overall difference on this item across ***socio-economic groups***, $F(4,2574)=16.981$, $p<.001$, with Bonferroni adjusted post hoc comparisons indicating the largest (and statistically significant at the $p<.001$ level) differences were between the lowest socio-economic quintile and the top two quintiles, and also between the second bottom and third (middle) quintile with the top quintile. Parents residing in lower socio-economic areas were more likely to agree parenting advice was not helpful because of individual child differences, compared to parents in higher socio-economic areas (see Figure 59).

There was also a significant subgroup difference on this item between parents of ***children with versus without complex needs***, $F(1,2593)=16.565$, $p<.001$. Parents of children with such difficulties were more likely to see parenting advice as unhelpful due to individual child differences (see Figure 60).

There were no statistically significant differences at the $p<.001$ level on this item between *mothers and fathers* (just non-significant), *child age groups* (just non-significant), or for *metropolitan versus regional* dwellers.

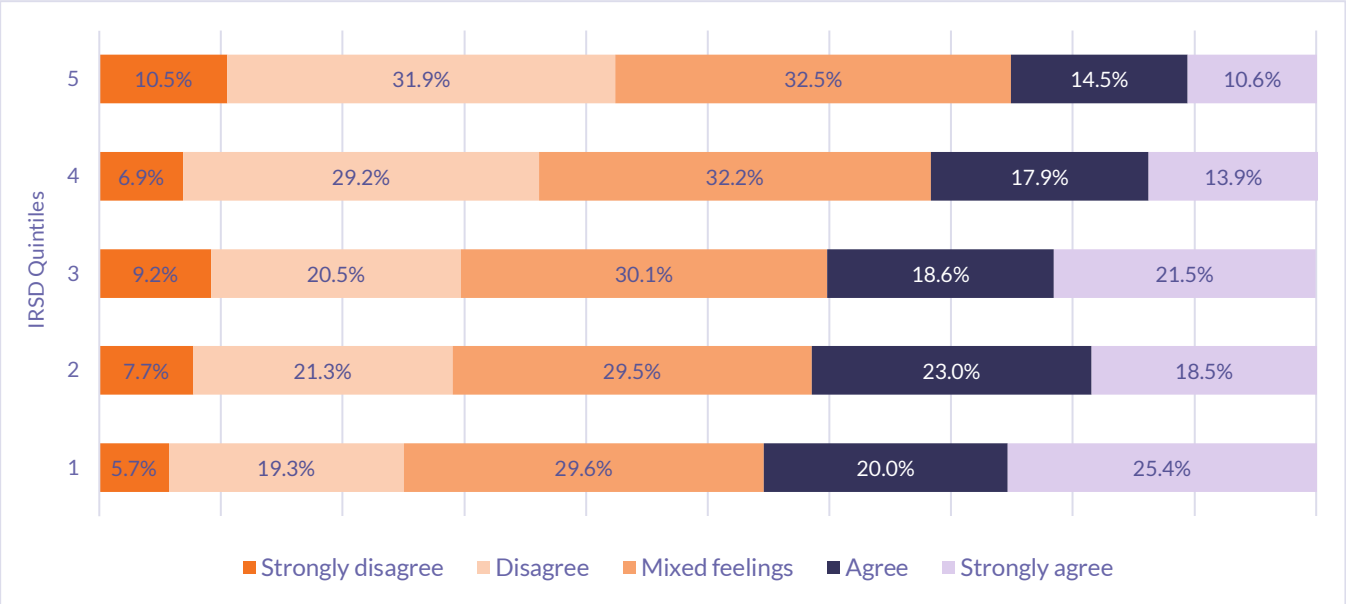

Figure 59. Responses to the item 'Parenting advice is not helpful because every child is so different', by socio-economic quintiles (population weighted data).

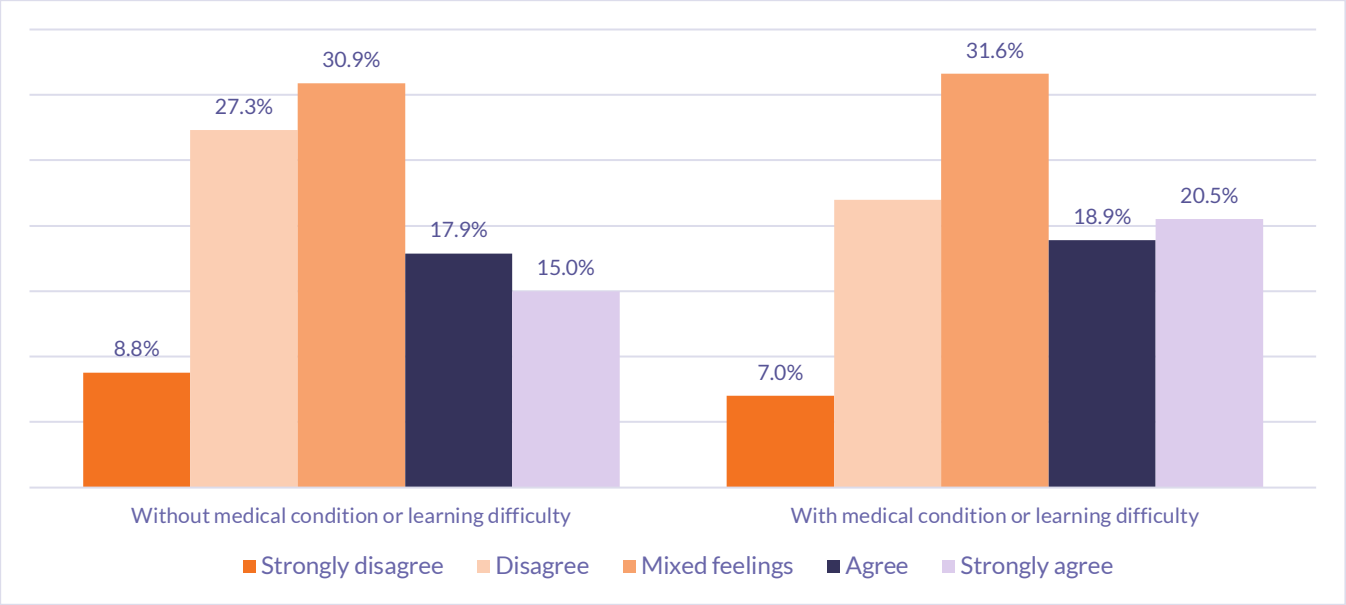

Figure 60. Responses to the item 'Parenting advice is not helpful because every child is so different', by child complex needs (population weighted data).

Many respondents (46%) agreed or strongly agreed that governments should play a role in supporting families with parenting, while 24% disagreed or strongly agreed with this statement. ***Mothers*** were significantly more likely to agree with this statement than ***fathers***, $F(3,2593)=12.809$, $p<.001$ (see Figure 61 and Figure 62).

There was a significant overall difference on this item across ***child age groups***, $F(3,2591)=16.930$, $p<.001$, with Bonferroni adjusted post hoc comparisons indicating the largest (and statistically significant at the $p<.001$ level) differences were between parents of the youngest (0-2 year olds) and both oldest (13-18 years) and pre-teen (6-12 years) children.

Parents of older children were less likely to agree there was a role for government in supporting parenting (see Figure 63).

There was no statistically significant difference at the $p<.001$ level on this item between, *socio-economic groups*, for *metropolitan versus regional* dwellers, or for parents of *children with versus without complex needs*.

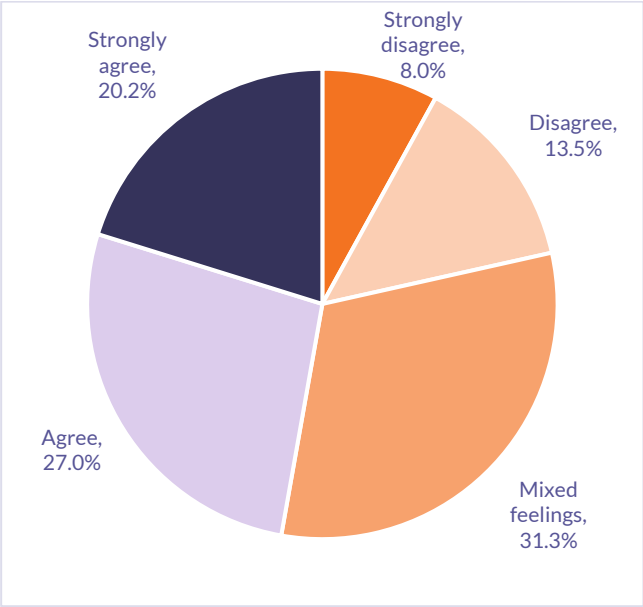

Figure 61. Mothers' ratings on the item 'Governments should help families with their parenting' (population weighted data).

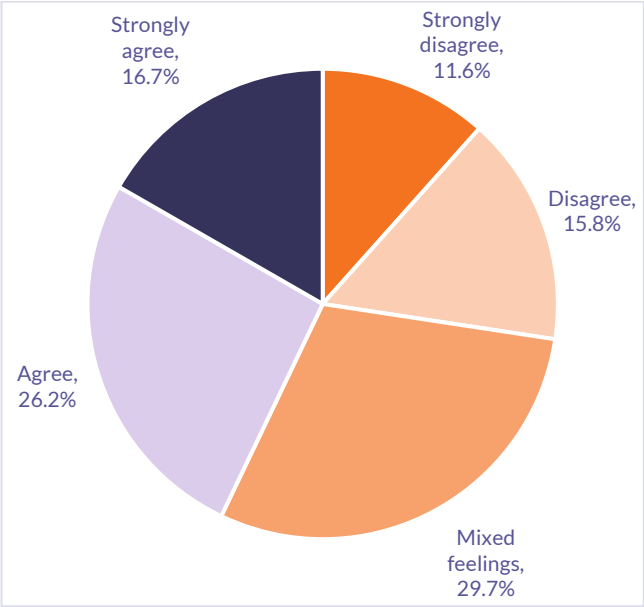

Figure 62. Fathers' ratings on the item 'Governments should help families with their parenting' (population weighted data).

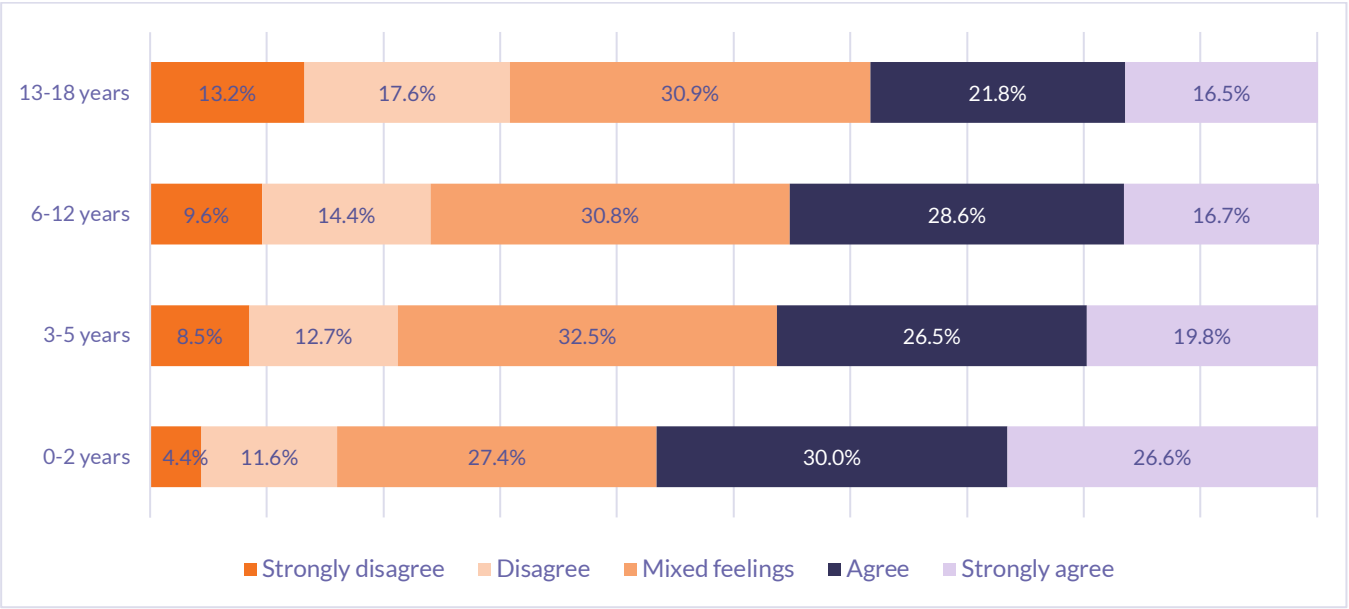

Figure 63. Responses to the item 'Governments should help families with their parenting', by child age group (population weighted data).

Approach to parenting

This section presents findings based on the population weighted data describing parents' views about their child's behaviour (new item) and about their own behaviours and practices in relation to parenting their children (repeated from 2016), including interactions with their child (e.g., patience, consistency, time spent) and responses to child behaviour (e.g., praise, smacking).

CHILD BEHAVIOUR

Parents were asked to rate the degree to which they agreed with the statement 'I find my child's behaviour difficult to manage'. Responses were given on a 5-point scale from 1 (strongly disagree) to 5 (strongly agree).

Over three quarters of parents disagreed with the statement that their child's behaviour was difficult to manage. While 14% had mixed feelings, only one in ten parents agreed their child's behaviour was difficult to manage. These results match closely to parents' responses about their child's temperament, with approximately 74% describing their child's temperament as easy or very easy.

There was an effect of ***child age group*** for the item about the difficulty of children's behaviour, $F(3,2591)=7.420$, $p<.001$, with post hoc tests indicating significant differences ($p<.001$) between parents of 0-2 year olds (less difficult to manage) and 6-12 year olds (the most difficult to manage).Parents of 6-12 year olds generally appeared to report the greatest difficulties managing their child's behaviour (see Figure 64).

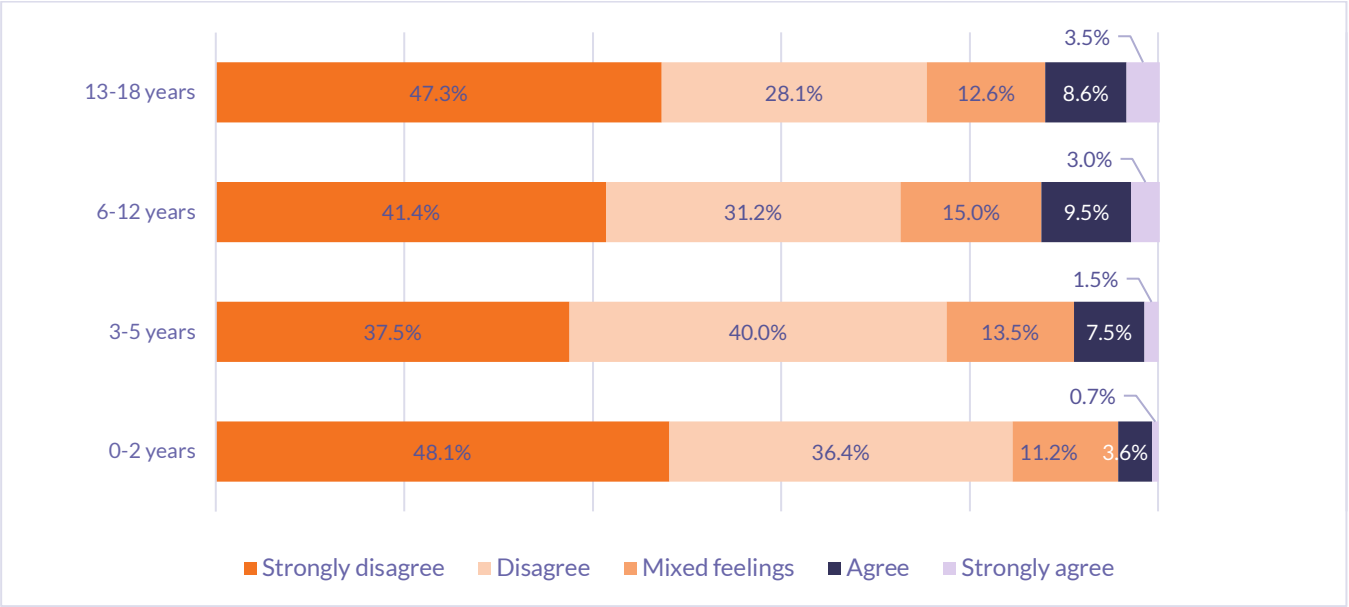

Figure 64. Child's behaviour is difficult for parent to manage, by child age groups (population weighted data).

Responses on this item also differ for parents of ***children with versus children without complex needs***, $F(1,2593)=75.489$, $p<.001$, with parents of children with additional needs reporting more challenges with their children's behaviour (see Figure 65). This difference also showed a small to moderate effect size ($\eta_p^2=.028$).

There were no differences in parents' ratings about the difficulty of their child's behaviour according to *mothers versus fathers*, *socio-economic areas*, or *metropolitan versus regional* residents.

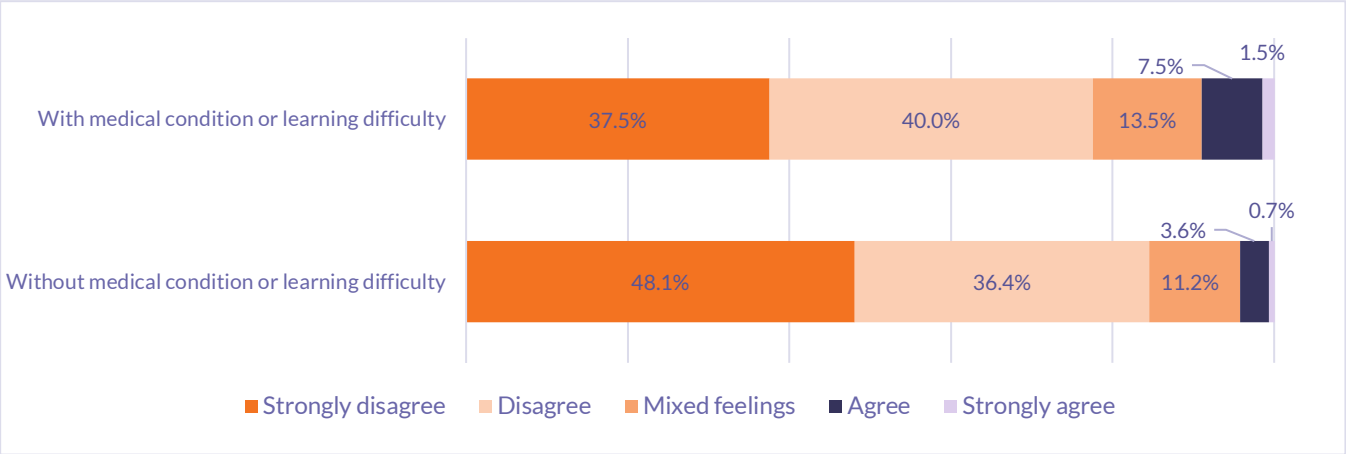

Figure 65. Child's behaviour is difficult for parent to manage, for parents of children with and without complex needs (population weighted data).

WHAT DO PARENTS SAY ABOUT THEIR PARENTING PRACTICES?

Parents were asked to respond on a scale of 1 (strongly disagree) to 5 (strongly agree) how much they agreed with four statements about their parenting behaviour. Items were: becoming impatient quickly; consistency in parenting behaviours; being too critical; and, satisfaction with the amount of time they could spend with their child. These items were selected from the Parent Performance subscale of the Cleminshaw-Guidubaldi Parent Satisfaction Scale (Guidubaldi & Cleminshaw, 1985), and all four items also appeared in the 2016 *Parenting Today in Victoria* survey.

Despite the high levels of parenting confidence reported by parents (see Section 0), close to 44% agreed or strongly agreed that they wished they did not become impatient with their children so quickly (see Figure 66). This is just slightly higher than 2016 (41%). Just over 34% wished they were more consistent in their parenting behaviour (see Figure 67), which is above the 2016 value of 29%. Just over 31% of parents agreed that they were sometimes too critical of their children (see Figure 68), which is slightly above the 2016 figure of 29%. Forty-nine percent were dissatisfied or had mixed feelings about the amount of time they could give their children (see Figure 69), which is higher than in 2016 (37%).

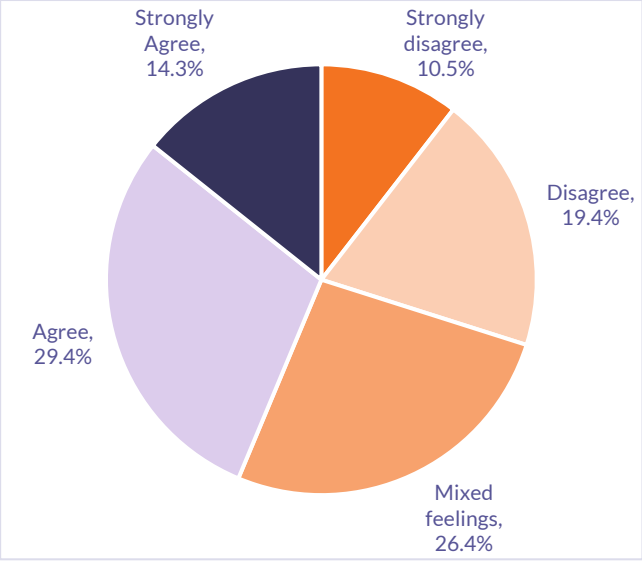

Figure 66. I wish I did not become impatient so quickly with my child (population weighted data)

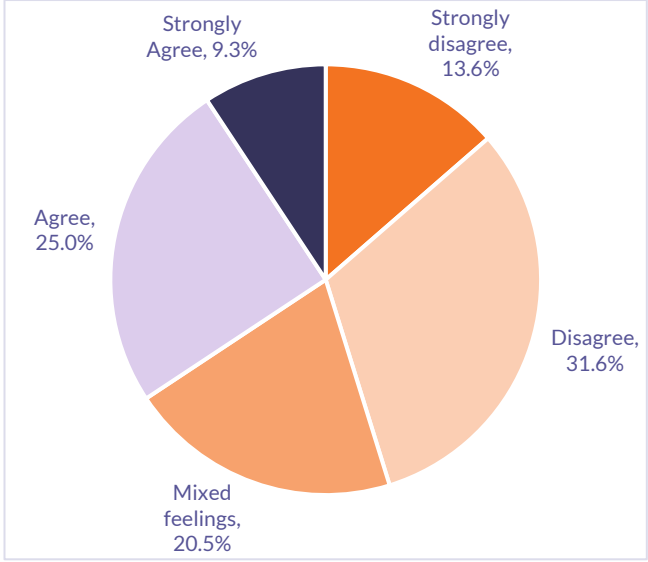

Figure 67. I wish I were more consistent in my parenting behaviours (population weighted data).

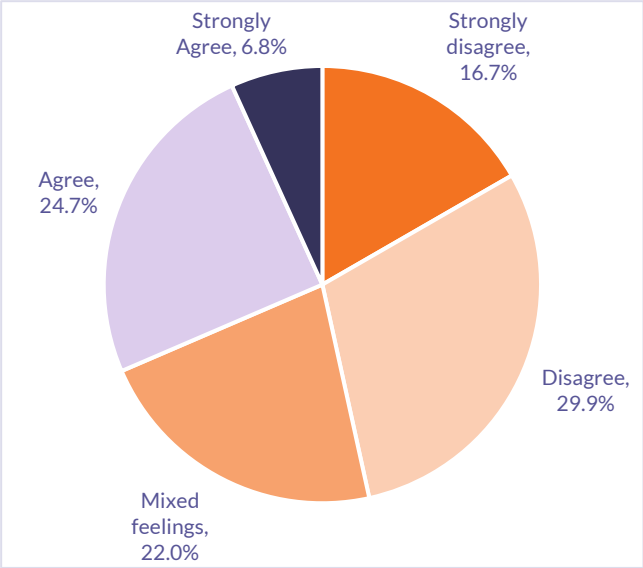

Figure 68. Sometimes I feel I am too critical of my child (population weighted data).

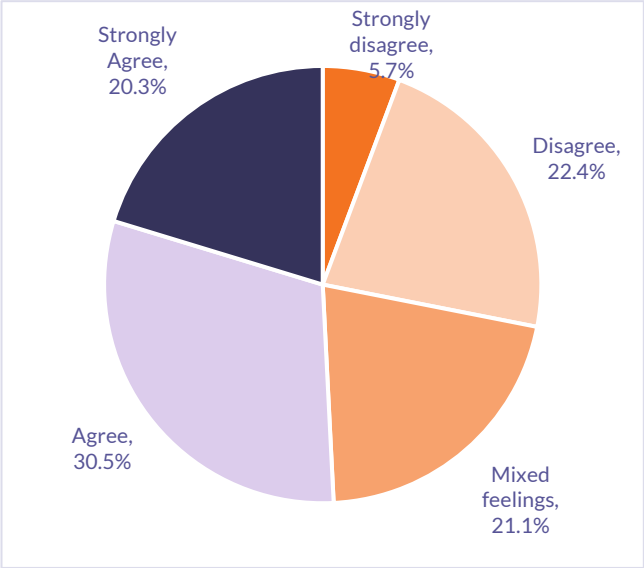

Figure 69. I am satisfied with the amount of time I can give to my child (population weighted data).

There was a significant difference between ***child age groups*** in three of the Parent Performance items: "I wish I did not become impatient so quickly", "I wish I were more consistent with my parenting behaviours", and "Sometimes I feel too critical" (see Table 27 for mean ratings for each child age group).

Parents of 6-12 year olds had the greatest level of endorsement for the item "I wish I did not become impatient so quickly" compared to other age groups. An overall (omnibus) significant different was observed, $F(3,2591) = 9.168$, $p<.001$, with Bonferroni adjusted post hoc tests revealing significant ($p<.001$) differences between parents of 6-12 year olds and parents of both 0-2 year olds and 13-18 year olds for this item about parental impatience. These results reflect similar findings to the 2016 data.

Parents of 6-12 year olds also had the highest level of agreement with the item "I wish I were more consistent with my parenting behaviours". While the overall ANOVA revealed differences, $F(3,2591)=6.592$, $p<.001$, the only significant ($p<.001$) different identified in Bonferroni adjusted post hoc tests was between the youngest (0-2 year old) group and 6-12 year old group. In 2016 there were no child age group differences for this item.

Parents of 6-12 year olds also had the highest level of agreement with the item 'Sometimes I feel too critical of my child'. In 2016 parents of 13-18 year olds had the highest endorsement of this item. Looking at the 2019 data, there was an overall significant difference by child age group, $F(3,2590)=37.472$, $p<.001$, with a small to moderate effect size ($\eta_p^2 = .042$). There were significant ($p<.001$) post hoc differences between all pairings of child age groups except the eldest (13-18 years) with both 3-5 year olds and 6-12 year olds, which suggests that parents of younger children may be less concerned about their level of criticism of their child, but as the child moves through primary school, parents become more concerned about their level of criticism.

There was no child age group difference for the item 'I am satisfied with the amount of time I can give my child', which is different to 2016 when parents of very young (0-2 years) and teenage children were more likely to express satisfaction with the amount of time they gave their child.

Table 27. Average scores on the Parent Performance items by child age group, M (SD) (population weighted data).

	0–2 years	3–5 years	6–12 years	13–18 years	Total
I wish I did not become impatient so quickly with my child*	3.00 (1.243)	3.20 (1.176)	3.31 (1.180)	3.06 (1.213)	3.17 (1.204)
I wish I were more consistent in my parenting behaviours*	2.67 (1.199)	2.85 (1.187)	2.96 (1.213)	2.79 (1.207)	2.85 (1.209)
Sometimes I feel I am too critical of my child*	2.26 (1.131)	2.64 (1.100)	2.96 (1.225)	2.81 (1.146)	2.75 (1.192)
I am satisfied with the amount of time I can give to my child	3.43 (1.257)	3.42 (1.198)	3.28 (1.170)	3.44 (1.187)	3.37 (1.195)

*Statistically significant difference across child age groups, $p<.001$.

Similar to 2016, there was a significant difference between ***fathers and mothers*** on '*I feel satisfied with the amount of time I can give to my child*', with higher scores for mothers $F(1, 2593) = 35.469$, $p<.001$. There were no significant differences in Parent Performance responses between *fathers and mothers* on '*Sometimes I feel I am too critical of my child*', '*I wish I did not become so impatient with my child*' and '*I wish I were more consistent in my parenting behaviours*' (see Table 28), which was consistent with 2016.

Table 28. Average scores on the parent performance items by mothers and fathers, *M* (*SD*) (population weighted data).

	Fathers	Mothers
I wish I did not become impatient so quickly with my child	3.13 (1.197)	3.20 (1.208)
I wish I were more consistent in my parenting behaviours	2.80 (1.182)	2.89 (1.226)
Sometimes I feel I am too critical of my child	2.80 (1.196)	2.71 (1.189)
I am satisfied with the amount of time I can give to my child*	3.21 (1.153)	3.49 (1.211)

*Statistically significant difference between fathers and mothers, p<.001.

In 2016 there were no differences for any of the *Parent Performance* items according to the different *socio-economic areas* parents resided in. In 2019, one ***socio-economic area*** difference was observed for the item *'I am satisfied with the amount of time I can give to my child'*, $F(4,2575) = 5.794$, $p<.001$. Bonferroni adjusted post hoc tests found no between-groups differences at the $p<.001$ level, but there were differences at the $p<.01$ level between the fourth quintile and the lowest two quintiles (see Table 29). This suggests a trend whereby parents in higher socio-economic areas are less satisfied with the amount of time they can give their child.

Table 29. Average scores on the Parent Performance items by socio-economic areas, *M* (*SD*) (population weighted data).

	Quintile 1 (lowest socio-economic group)	Quintile 2	Quintile 3	Quintile 4	Quintile 5 (highest socio-economic group)	Total sample
I wish I did not become impatient so quickly with my child	3.06 (1.309)	3.23 (1.187)	3.23 (1.183)	3.17 (1.186)	3.15 (1.201)	3.17 (1.204)
I wish I were more consistent in my parenting behaviours	2.85 (1.254)	2.88 (1.215)	2.94 (1.203)	2.86 (1.207)	2.75 (1.187)	2.85 (1.208)
Sometimes I feel I am too critical of my child	2.52 (1.171)	2.78 (1.168)	2.72 (1.181)	2.75 (1.165)	2.84 (1.239)	2.75 (1.192)
I am satisfied with the amount of time I can give to my child*	3.54 (1.215)	3.50 (1.152)	3.43 (1.190)	3.22 (1.190)	3.34 (1.203)	3.37 (1.195)

*Statistically significant difference across socio-economic groups, $p<.001$.

A comparison of responses of parents from *metropolitan/regional* locations and parents of children with *complex needs* showed no statistically significant differences in Parenting Performance items. This was consistent with 2016 results.

HOW PARENTS RESPOND TO THEIR CHILD'S BEHAVIOUR

Four items, repeated from 2016, asked parents how often they used particular strategies for dealing with their children's behavioural challenges. There were three items from the Parent and Family Adjustment Scale (PAFAS; Sanders, Morawska, Haslam, Filus & Fletcher, 2013) on praise, smacking and arguing or yelling, and an additional item about talking to their children about problems/issues they might be confronting (for example, problems with friends, schoolwork or drug use).

As seen in the graphs below, the majority of parents (81%) reported that they rewarded or praised their child when they behaved well 'quite or lot' or 'very much' (Figure 70) which matches closely to 2016 (82%). Most parents in 2019 said they never smacked their child (73%; 72% in 2016, see Figure 71). Fifty-five percent of parents reported that they argued with or yelled at their child 'a little' (62% in 2016) while 22% said they did this quite a lot or very much (Figure 72) which is greater than the one in ten parents who said they argued quite a lot or very much with their child in 2016. Seventy-seven percent 'always' or 'often' talked about problems or issues with their child (see Figure 73), which is consistent with 2016 findings (76%).

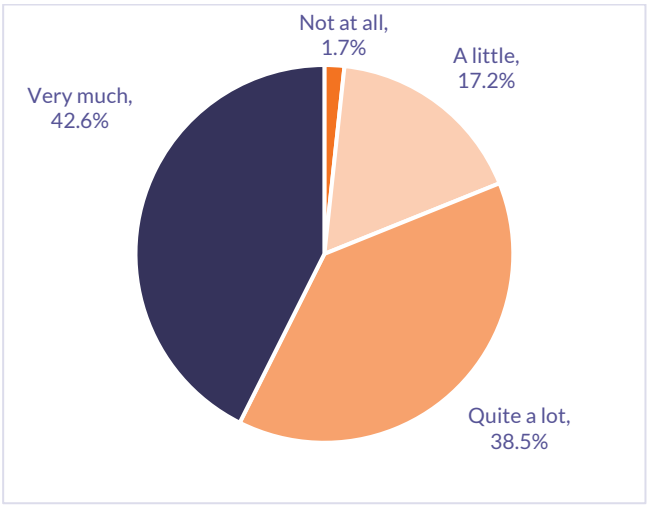

Figure 70. When my child behaves well, I reward them with praise/a treat/attention (population weighted data).

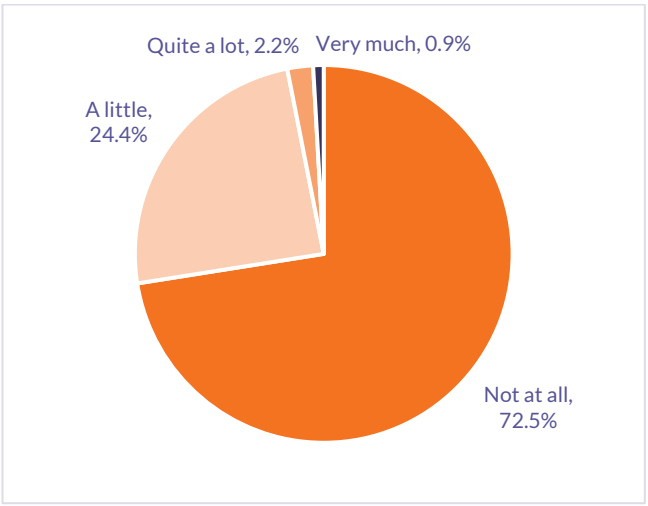

Figure 71. I smack my child when they misbehave (population weighted data).

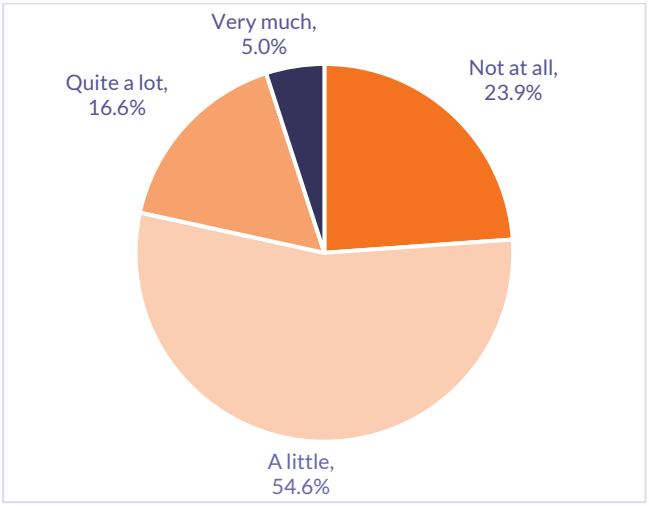

Figure 72. I argue with or yell at my child about their behaviour or attitude (population weighted data).

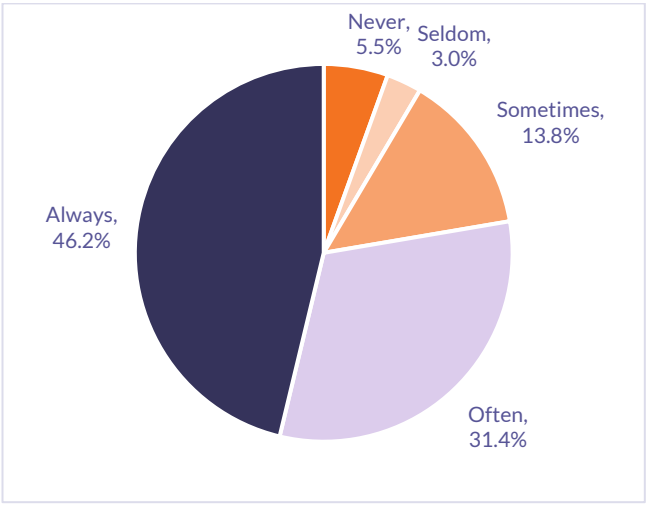

Figure 73. Talk to child about problems/issues (population weighted data).

There were significant differences across ***child age groups*** in parents' reports of each parenting practice:

- An overall child age group difference on the item about praising or rewarding their child, $F(3,2529)=23.149$, $p<.001$, saw Bonferroni adjusted post hoc differences ($p<.001$) between both youngest groups of children (0-2 years and 3-5 year olds) with parents of teenagers, as well as between the two oldest groups and 3-5 year olds. Thus, parents of older children praise and reward their children less than parents of pre-school age. This is consistent with 2016 findings.
- Although the majority of parents reported that they did not smack their child when they misbehave, there was a significant overall child age group difference, $F(3,2591) = 17.612$, $p<.001$. Bonferroni adjusted post hoc test revealed significant ($p<.001$) differences between parents of teenage children and two other age groups – 3-5 year olds and 6-12 year olds. Parents of 3-5 and 6-12 year olds smacked their children more often than parents of teens. Results for 2016 are similar to these findings.
- A significant overall child age group effect was found for the rates of parents yelling at or arguing with their child about their behaviour or attitude, $F(3,2591) = 51.363$, $p<.001$, and this also was a moderate effect size ($\eta_p^2=.056$).

  Bonferroni adjusted post hoc tests found that parents of 0-2-year-old children reported arguing or yelling at their child less often than each other age group ($p<.001$ for each pairing). While these results do reflect where child age group differences also lay in 2016, the 2019 mean ratings for arguing and yelling are somewhat higher for each age group compared to mean ratings in 2016.
- There was also a significant difference across child age groups in the degree to which parents report talking to their child about problems or issues, $F(3,2579) = 139.971$, $p<.001$. This difference was one of the rare analyses to also show a large effect size, $\eta_p^2=.14$, which was also the case in 2016. Bonferroni adjusted post hoc tests revealed that parents of the youngest age group of children (0-2 years) significantly ($p<.001$) differed from each other age group. Similar to 2016, this pattern of responding suggests parents of 6-12 year olds are the most likely to talk to their children about problems or issues.

Table 30 shows the mean ratings for the four child age groups. PAFAS items were rated on a 4-point scale from 1 = 'not at all' to 4 = 'very much'. High scores for praise are reflective of positive parenting strategies; high scores for smacking and arguing or yelling reflect a negative parenting approach. The item about talking to their child was rated on a 5-point scale from 1 (never) to 5 (always) with high scores representing positive parenting.

Table 30. Average parenting strategies scores (selected PAFAS items) by child age, *M* (*SD*) (population weighted data).

	0–2 years	3–5 years	6–12 years	13–18 years	Total
When my child behaves well, I reward them with praise/a treat/attention*	3.34 (.756)	3.39 (.734)	3.19 (.767)	3.07 (.839)	3.22 (.787)
I smack my child when they misbehave*	1.32 (.555)	1.42 (.571)	1.34 (.574)	1.19 (.505)	1.31 (.559)
I argue with or yell at my child about their behaviour or attitude*	1.61 (.696)	2.02 (.741)	2.13 (.752)	2.12 (.802)	2.03 (.776)
Talk to child about problems/issues*	3.14 (1.624)	4.23 (.989)	4.32 (.809)	4.24 (.855)	4.10 (1.101)

*Statistically significant difference across child age groups, $p<.001$.

Comparisons between ***mothers*** and ***fathers*** showed statistically significant differences for one item (see Table 31). Mothers reported talking to their child about problems and issues more frequently than fathers, $F(1,2581) = 85.083$, $p<.001$. In 2016 the same result was found, with mothers talking to their child about problems and issues more frequently than fathers. However, one difference between 2016 and 2019, was that in 2016 mothers were also found to argue with or yell at their child significantly more frequently than fathers. Furthermore, consistent with the overall sample data noted earlier, mean scores for yelling/arguing with the child were higher in 2019 than in 2016, for both mothers and fathers.

Table 31. Average parenting strategies scores (selected PAFAS items) by mothers & fathers, *M* (*SD*) (population weighted data).

	Father	Mother
When my child behaves well, I reward them with praise/a treat/attention	3.19 (.773)	3.24 (.796)
I smack my child when they misbehave	1.32 (.552)	1.31 (.564)
I argue with or yell at my child about their behaviour or attitude	1.97 (.749)	2.06 (.793)
Talk to child about problems/issues*	3.86 (1.154)	4.26 (1.031)

*Statistically significant difference between fathers and mothers, $p<.001$

There was one significant PAFAS item difference by ***socio-economic area*** (see Figure 74) – an overall difference was found for smacking, $F(4,2575)=9.818$, $p<.001$, with significant Bonferroni adjusted post hoc quintile differences ($p<.001$) between the top two highest quintiles with the middle quintile. Generally, this supports the view that parents in higher socio-economic areas are less likely to smack their children. This is consistent with findings from 2016.

The absence of significant differences by socio-economic area for the items about praise/rewards, arguing/yelling and talking to the child about problems, concords with 2016 findings.

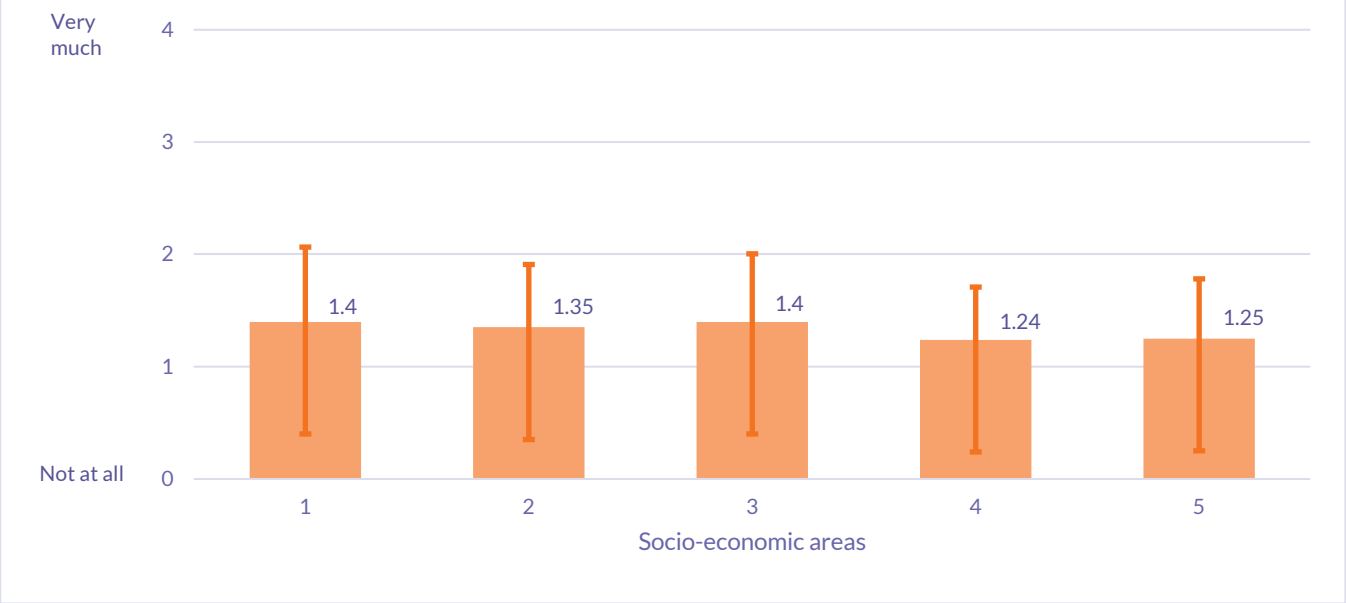

Figure 74. Mean scores (SDs as error bars) on the PAFAS item 'I smack my child when they misbehave' by socio-economic areas (population weighted data).

Consistent with 2016 findings, there were no significant differences for *metropolitan versus regional* dwellers on any of the PAFAS items.

There were no significant differences between parents of *children with versus without* complex needs for any PAFAS item in 2019. Generally, this concords with 2016 data, although in 2016 a significantly ($p<.001$) greater proportion of parents of children with complex needs reported talking to their child about problems or issues, compared to parents who did not have a child with such needs. In 2019 this item was non-significant at the $p<.001$ level yet was significant at the $p<.01$ level.

Parent coping, wellbeing and support

This section presents findings based on the population weighted data covering a range of topics related to how parents cope and who supports them.

First, we present results related to parental wellbeing, including their physical and mental health, their personal wellbeing ratings, self-care and self-compassion, and concerns the parent has for their child - including children's sleep.

Second, we present findings about parents use of informal supports, including support from family members, partner agreement and support.

Finally, we present information about where parents go for information and advice about their parenting, with a particular focus on how parents access sources of parenting information outside the family. Topics include:

- where parents go for support, advice and information
- whether parents know where to seek professional help for their parenting and how likely they would be to seek professional help
- participation in parenting programs
- reasons for not seeking help
- parents' satisfaction with the help they have received
- awareness of a quality-assured online parenting resource (the Raising Children Network).

Detailed results are presented for the whole population weighted sample initially, then by way of child age, mother/father status, socio-economic area, regional/metropolitan location, and whether the focus child has a complex need.

WHAT DO PARENTS SAY ABOUT THEIR WELLBEING?

This section of the survey included questions about parents' physical health, psychological distress and personal wellbeing, as well as questions about some of the concerns they may have regarding their children.

Current physical health

Parents were asked to rate their physical health on a 5-point scale from 'poor' to 'excellent'. This item was also asked in 2016.

Just over 79% of parents reported they were in 'good', 'very good' or 'excellent' physical health. This is lower than in 2016, when 87% of parents rated their health as at least 'good'.

There were no statistically significant differences between *mothers and fathers*, *child age group* or *metropolitan and regional* areas. These results are general reflective of earlier findings, although in 2016, analyses for child age group showed statistically significant differences with parents of older children more likely to report 'fair' or 'poor' physical health.

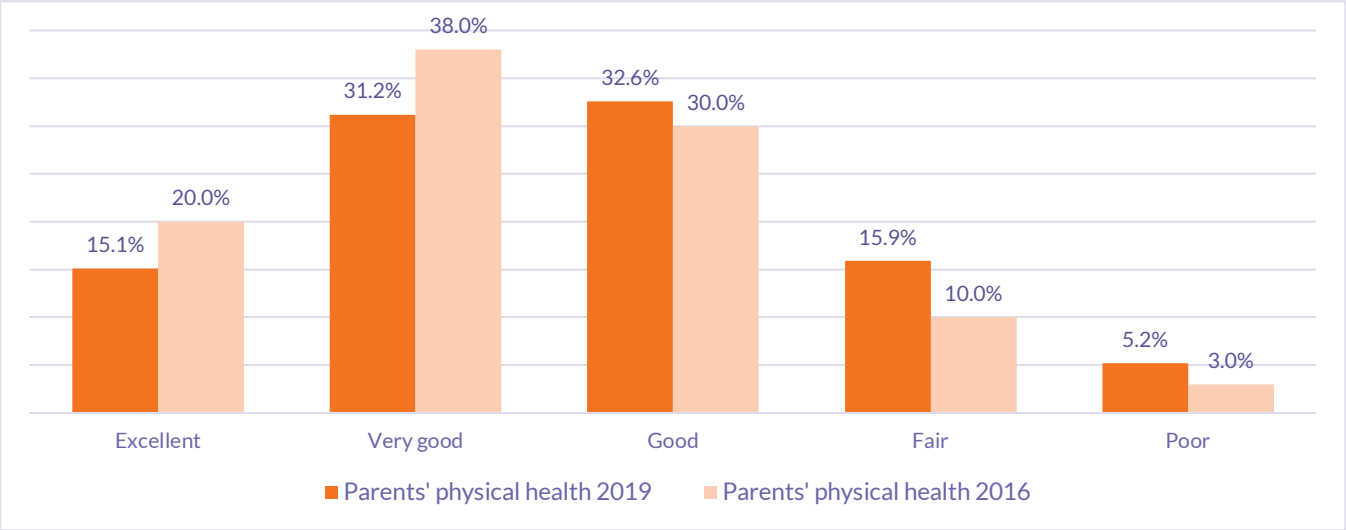

Figure 75. Parents' physical health, total sample (population weighted data).

An overall significant difference for ***socio-economic areas*** was detected for parent physical health, $F(4,2752) = 8.936$, $p<.001$. Bonferroni adjusted post hoc tests identified the strongest ($p<.001$) differences were between the lowest two socio-economic quintiles (i.e., the most disadvantaged areas) and the highest quintile. As can be seen in Figure 76, a greater proportion of parents living in higher socio-economic areas reported better physical health, and a greater proportion of those living in more disadvantaged areas reported poor or fair health. This is consistent with findings form 2016.

Also, as for the 2016 survey findings, a greater proportion of ***parents of children with complex needs*** reported their physical health as 'fair' or 'poor' (30.2%) compared to other parents (17.4%), and this difference was statistically significant, $F(1,2593) = 56.457$, $p<.001$. Of note, and supporting the earlier claim that parents' physical health is generally poorer in 2019, these percentages are around 10% higher than in 2016. For example, only around 20% and 10% of parents of children with and without (respectively) a child with complex needs reported poor or fair physical health in 2016.

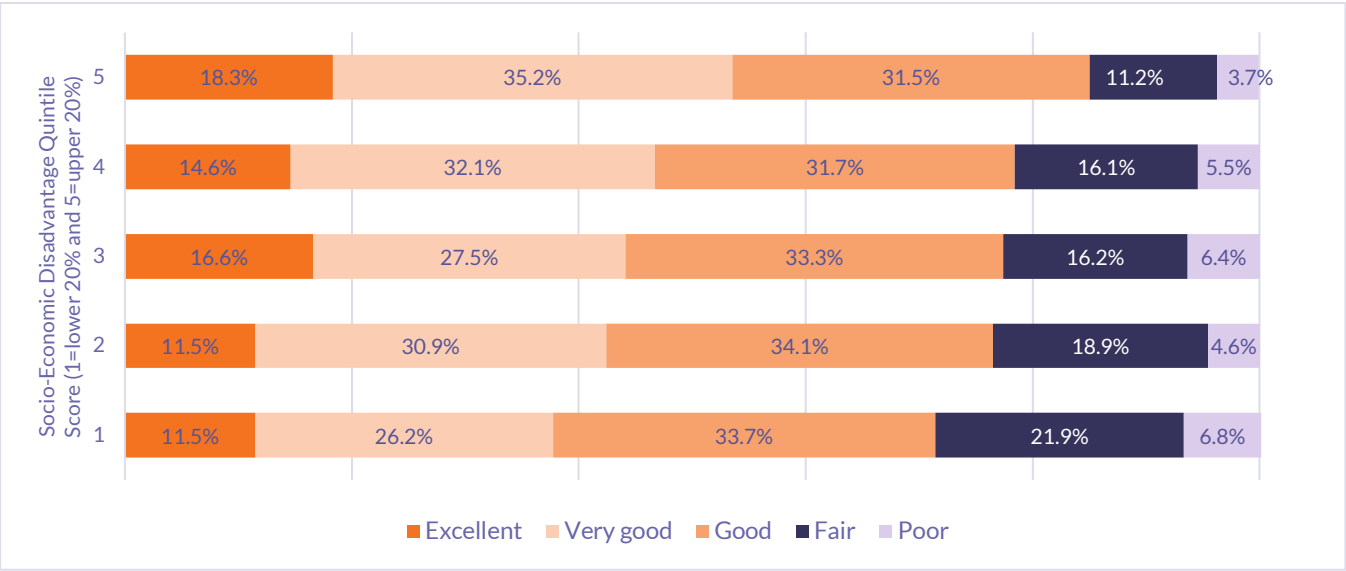

Figure 76. Parents' physical health by socio-economic area (population weighted data).

Figure 77. Parents' physical health for parents of children with and without complex needs (population weighted data).

Past mental health

Parents were asked if they had any symptoms of depression, anxiety or stress since becoming a parent. Two of these items were included in the 2016 survey (depression and anxiety) and in 2019 stress was added as an option. Parents were also able to indicate whether they had experienced 'none of these' since becoming a parent.

Analyses showed 24% of parents had not experienced any of these conditions since becoming a parent. Almost 26% of all parents had experienced symptoms of one of these conditions, 17% symptoms of two conditions, and 33% symptoms of three conditions.

Rates of self-reported depression and anxiety were almost 50% higher than in 2016 (depression in fathers was 18% and in mothers was 34%; anxiety in fathers was 19% and in mothers was 34%).

Of the 41% who reported depression since becoming a parent, 18% said this had included post-natal depression. Although most of those reporting post-natal depression were mothers, 9% (n=40) were fathers.

Mother/father comparisons are shown in Figure 78 with a larger proportion of mothers reporting depression since becoming a parent, $\chi^2(1) = 100.941$, $p<.001$; as well as symptoms of anxiety since becoming a parent, $\chi^2(1) = 96.816$, $p<.001$. These parent gender differences were also found in 2016. A larger proportion of mothers also reported experiencing stress since becoming a parent, $\chi^2(1) = 63.902$, $p<.001$.

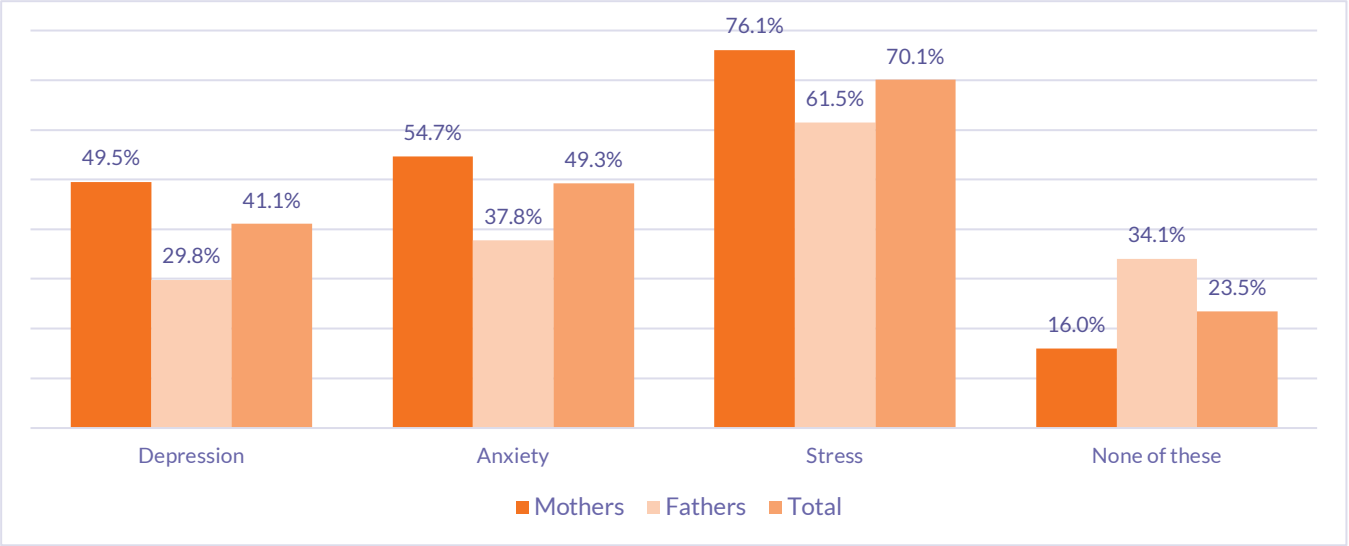

Figure 78. Proportion of mothers and fathers reporting symptoms of a mental-health condition (population weighted data).

Child age group comparisons (see Table 32) show a significantly greater proportion of parents of older children reporting symptoms of depression since becoming a parent, $\chi^2(3) = 20.008$, $p<.001$. Although this finding for depression supports the results from three years ago, in 2016 we also found a small but significant child age effect for anxiety, that was not detected in 2019.

Across all child age groups the experience of mental health concerns is higher than would be expected given population prevalence ratings of such conditions. Even though these are self-reported experiences of depression and anxiety (rather than professional report or diagnoses), they are greater than was self-reported by parents in 2016; in some cases, double the proportion reporting difficulties at that time (e.g., anxiety in parents of 0-2 year olds was 20% in 2016 and is 46.4% in 2019).

Table 32. Parents' symptoms of depression, anxiety or substance addiction by child age group (population weighted data).

	0–2years	3–5years	6–12years	13–18years
Depression*	33.4%	38.7%	42.6%	46.5%
Anxiety	46.4%	47.6%	51.4%	49.2%
Stress	65.9%	70.9%	71.3%	70.4%
None of these	27.8%	23.7%	21.9%	23.2%

*$p<.001$

As for 2016, parents of ***children with complex needs*** in general reported greater mental health challenges since becoming a parent than parents whose child did not have complex needs.

A larger proportion of parents of children with complex needs reported that they had experienced symptoms of depression since becoming a parent, $\chi^2(1) = 65.452$, $p<.001$.

In 2019 we also saw significant effect of children's complex needs for parental anxiety, $\chi^2(1) = 56.82$, $p<.001$. In 2016 this effect was present, but not significant.

In 2019 there also was a significant effect of *children's complex needs* for parental stress, $\chi^2(1) = 24.065$, $p<.001$. Furthermore, parents of children with such needs were also less likely to have experienced none of these challenges since becoming a parent, $\chi^2(1) = 36.612$, $p<.001$. See Figure 79 for a summary of the proportion of parents with and without a child with complex needs who have experienced depression, anxiety and stress.

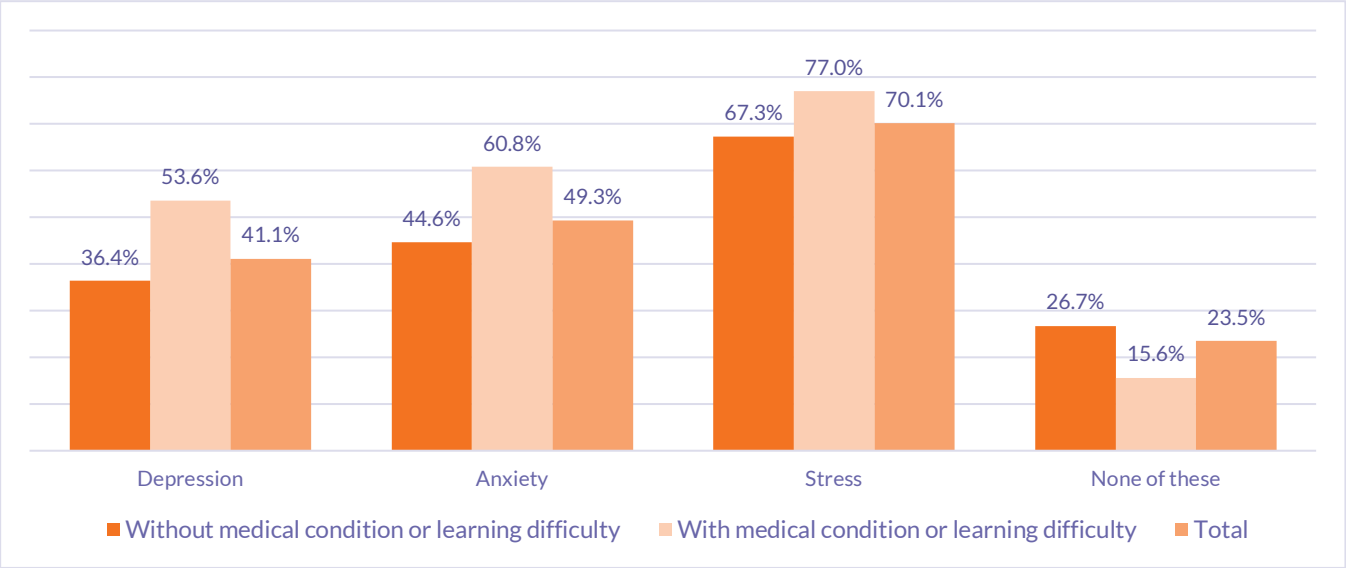

Figure 79. Proportion of parents reporting a mental-health condition since becoming a parent, for parents with and without a child with complex needs (population weighted data).

Area level socio-economic comparisons and *metropolitan versus regional* location showed no statistically significant differences in parents' reports of symptoms of depression, anxiety or stress. While these conclusions generally reflect 2016 findings for socio-economic areas, in 2016 we did find that a significantly larger proportion of people in regional areas compared to metropolitan areas reported depression since becoming a parent.

Current parent distress

The six items of an established scale (Kessler 6; K6) were included in both the 2016 and 2019 survey. The K6 is a measure of non-specific psychological distress, enquiring how parents felt during the past 30 days. K6 items ask about the frequency of negative emotional states/distress such as 'nervous', 'hopeless', 'restless or fidgety', 'so depressed that nothing could cheer you up', 'everything was an effort', and 'worthless'.

Each K6 item was rated by parents on a 5-point scale from 1 (all of the time) to 5 (none of the time), and then reverse scored so that higher values equated to greater distress (ABS, 2012)[2]. A total score (sum of reverse coded responses to each item) was obtained which classified the level of risk of psychological distress as 'low', 'moderate', 'high' or 'very high'.

Presented here are the findings adjusted to match population estimates for Victorian parents and partners. The minimum possible score is 6 and the maximum possible score is 30, with higher scores indicating higher levels of distress.

While the K6 is not a diagnostic measure, respondents whose total score is above a clinical cut-off score of 19 are said to be reporting serious psychological distress (ABS, 2012). There is no internationally agreed cut-off for moderate distress, however research suggests that individuals who score above 10 would benefit from mental health support, which was suggested to them during the administration of the survey if it was indicated.

The majority of parents (63%) scored in the low range (K6 = 6-10) of psychological distress, 31% in the moderate range (11-18) and 6% met the clinical cut-off score. These proportions are somewhat different from the parents who took part in the 2016 parenting survey of whom 4% were in the clinical range, 24% were in the moderate range and 72% were in the low distress range.

2 Australian scoring of the K6 differs from US scoring. Rather than each item scored on a scale for 0-4, Australian scoring uses 1-5. Therefore, the total score range is 6-30 rather than 0-24. High levels of psychological distress are viewed to be scores of 19 or more. Moderate distress is considered with scores of 11-18 and low distress with scores of 6-10.

Table 33 displays the proportion of responses for every K6 item. Across all items, the proportion of parents reporting a challenge (across each response category, from 'a little' through to 'all of the time') had increased from 2016. Therefore, consistent with self-reports of depression and anxiety since becoming a parent and with reports of poor physical health, today's parents seem to be reporting greater levels of distress and ill-health compared to three years ago.

Table 33. Proportion of participants across response categories of the K6 scale, *N* (%) (population weighted data).

	None of the time	A little of the time	Some of the time	Most of the time	All of the time
Nervous	43.3%	30.2%	19.8%	4.7%	1.8%
Hopeless	65.0%	19.3%	11.5%	2.8%	1.3%
Restless or fidgety	43.5%	23.4%	22.9%	6.4%	3.8%
So depressed that nothing could cheer you up	78.7%	11.4%	7.3%	1.7%	.9%
Everything was an effort	40.8%	25.0%	23.5%	6.4%	4.3%
Worthless	75.9%	12.8%	7.1%	2.8%	1.4%

Table 34 shows the mean scores for each item of the K6 and the total score. ***Mother-father*** comparisons showed statistically significant differences with mothers scoring slightly higher for 'nervousness', $F(1,2593) = 27.652$, $p<.001$, and 'hopelessness', $F(1,2591) = 20.105$, $p<.001$, and 'worthlessness', $F(1,2593) = 24.130$, $p<.001$, and for the total score, $F(1,2591) = 20.139$, $p<.001$.

Table 34. K6 Subscale and Total Scores for mothers and fathers, *M* (*SD*) (population weighted data).

	Father	Mother
Nervous*	1.79 (.927)	2.0 (1.022)
Hopeless*	1.47 (.818)	1.62 (.940)
Restless or fidgety	2.0 (1.080)	2.06 (1.149)
So depressed that nothing could cheer you up	1.30 (.722)	1.38 (.789)
Everything was an effort	2.02 (1.106)	2.13 (1.144)
Worthless*	1.31 (.747)	1.48 (.910)
Total*	9.89 (3.973)	10.66 (4.491)

Note: Item score range (reversed): 1 (none of the time) to 5 (all of the time). Total score range 6–30. For total score, Low (6-10); Moderate (11-18); Serious (19+). * $p<.001$

There were no significant differences in K6 scores between *metropolitan or regional location*, across *socio-economic areas*, or between *child age groups*, which was also the case in 2016.

Parents of children with ***complex needs*** reported higher levels of psychological distress overall, $F(1,2591) = 83.321$, $p<.001$, which represented a small to moderate effect size, $\eta_p^2 = .031$. There were also significant differences between parents with and without a child with complex needs on each item of the K6 (see Table 35).

In each case the mean scores for 2019 shown in Table 35 are higher than in 2016, however, the pattern of significant subgroup differences (and no differences) is identical to 2016.

Table 35. K6 Subscale and Total Scores - parents of children with complex needs, *M* (*SD*) (population weighted data).

	Child has complex needs	Child does not have complex needs	F (df)
Nervous	2.10 (1.059)	1.83 (.948)	40.925 (1,2593)*
Hopeless	1.76 (1.045)	1.48 (.811)	57.110 (1,2591)*
Restless or fidgety	2.29 (1.223)	1.93 (1.060)	55.356 (1,2593)*
So depressed that nothing could cheer you up	1.49 (.906)	1.29 (.687)	36.455 (1,2593)*
Everything was an effort	2.30 (1.210)	1.20 (1.083)	38.083 (1,2593)*
Worthless	1.59 (1.007)	1.34 (.765)	47.524 (1,2593)*
Total	11.53 (4.888)	9.86 (3.934)	83.321 (1,2591)*

Note: Item score range (reversed): 1 (none of the time) to 5 (all of the time). Total score range 6–30. For total score, Low (6-10); Moderate (11-18); Serious (19+). * *p*<.001

Personal Wellbeing

In 2019 we introduced another established scale – the Personal Wellbeing Index (PWI; International Wellbeing Group, 2013). Each of the seven items of the PWI has an 11-point response scale from 0 ('no satisfaction at all') to 10 ('completely satisfied'), and means have been standardised to a scale of 0 to 100 by multiplying item means by 10. Thus, a mean item score of 7.42 becomes a standardised mean item score of 74.2. A total score can also be calculated which is the mean of all seven item scores.

The normative range for items and total scores for Australia is 73.4 – 76.4 points. According to Mead and Cummins (2010), scores that fall below these ranges are suggestive of poorer wellbeing and an increased risk of depression. Increasingly lower scores translate to progressively higher risk of depression.

Across most items, parents in Victoria report satisfaction with their quality of life that is close to or commensurate with Australian norms. In the domain of personal safety Victorian parents exceed norms, with a mean item score of 81.07 (*SD* = 18.580). However, as a group, Victoria's parents report poorer quality of life in the areas of community belonging and future security (see Table 36).

Table 36. Personal Wellbeing Index standardised item scores for the total sample, *M* (*SD*) (population weighted data).

	M (SD)
Satisfaction with own standard of living	74.23 (19.745)
Satisfaction with own health	71.00 (20.778)
Satisfaction with own life achievements	70.85 (20.104)
Satisfaction with personal relationships	75.38 (21.620)
Satisfaction with own safety	81.07 (18.580)
Satisfaction with feeling part of the community	68.12 (22.816)
Satisfaction with own future security	68.25 (22.077)
Mean total score	72.72 (15.985)

There was a significant overall difference across ***socio-economic areas*** for one item as well as on the total sore for the Personal Wellbeing Index, see Table 37. The single item was 'Satisfaction with own standard of living', $F(4.2571) = 8.282$, $p<.001$. Bonferroni adjusted post hoc tests identified that significant ($p<.001$) differences existed between the top quintile (least disadvantaged areas) and each of the lowest two quintiles (most disadvantaged areas), whereby higher levels of satisfaction with living standards was evident for parents living in the most advantaged areas.

Similarly, parents living in the most advantaged areas had the highest mean total quality of life rating, $F(4,2570) = 5.815$, $p<.001$. Bonferroni adjusted post hoc tests revealed significant ($p<.01$) differences between the top quintile (most advantaged) and the bottom three quintiles.

Table 37. Personal Wellbeing Index standardised item scores by socio-economic areas, *M* (*SD*) (population weighted data).

	Index of Relative Socio-economic Disadvantage (IRSD) Quintiles				
	1 (most disadvantaged)	2	3	4	5 (least disadvantaged)
Satisfaction with own standard of living*	71.11 (20.656)	72.79 (19.974)	73.45 (20.780)	73.54 (19.772)	77.72 (17.761)
Satisfaction with own health	67.92 (21.353)	70.65 (21.034)	69.77 (21.222)	70.97 (20.815)	73.35 (19.775)
Satisfaction with own life achievements	69.74 (20.456)	69.07 (21.413)	69.85 (20.758)	71.09 (20.677)	73.02 (17.569)
Satisfaction with personal relationships	74.23 (25.012)	74.19 (24.028)	75.19 (22.018)	75.49 (20.831)	76.76 (18.702)
Satisfaction with own safety	79.47 (20.452)	81.11 (19.999)	80.35 (19.227)	80.96 (17.517)	82.62 (17.050)
Satisfaction with feeling part of the community	67.01 (23.100)	67.81 (23.939)	66.53(23.765)	66.35 (22.867)	71.79 (20.119)
Satisfaction with own future security	67.63 (22.573)	66.93 (23.157)	67.60 (22.669)	67.74 (21.755)	70.38 (20.735)
Mean total score*	71.01 (16.591)	71.79 (17.381)	71.82 (16.817)	72.30 (15.428)	75.16 (14.218)

*Statistically significant difference between socio-economic areas, p<.001.

Parents of children with ***complex needs*** as a group reported poorer quality of life than other parents. There were significant differences on each item of the Personal Wellbeing Index, and on the total mean score for parents with and parents without a child with *complex needs* (see Table 38). In many cases the magnitude of this difference was large. The greatest mean difference was for the item about parents' satisfaction with their own health. This result is consistent with findings from 2016, using a different measure of parent health – as reported in Section 0, parents of children with complex needs rated their physical health as poorer than other parents. Across each item and the total score of the Personal Wellbeing Index, parents of children with complex needs report quality of life below the normative range for Australian adults (lower bound = 73.4).

Table 38. Personal Wellbeing Index standardised item scores by child complex needs, *M* (*SD*) (population weighted data).

	Child has complex needs	Child does not have complex needs	*F* (*df*)	η^2_p
Satisfaction with own standard of living*	70.46 (21.725)	75.79 (18.656)	39.675 (1,2590)	.015
Satisfaction with own health*	65.43 (22.275)	73.29 (19.682)	79.067 (1,2591)	.030 (small to moderate effect size)
Satisfaction with own life achievements*	66.65 (21.581)	72.57 (19.206)	47.259 (1,2591)	.018
Satisfaction with personal relationships*	71.76 (23.708)	76.87 (20.520)	30.333 (1,2591)	.012
Satisfaction with own safety*	78.06 (20.417)	82.31 (17.625)	28.319 (1,2591)	.011
Satisfaction with feeling part of the community*	64.84 (25.100)	69.46 (21.673)	22.138 (1,2590)	.008
Satisfaction with own future security*	63.61 (23.741)	70.15 (21.069)	47.783 (1,2589)	.018
Mean total score*	68.73 (17.225)	74.35 (15.153)	67.733 (1,2588)	.026 (small to moderate effect size)

*Statistically significant difference between parents of children with and without complex needs, *p*<.001.

There were no significant differences on average Personal Wellbeing Index items or the total score for *mothers versus fathers*, for *child age groups*, or for *metropolitan versus regional areas*.

Self-care

Five new items introduced in 2019 measure parents' perceptions about their wellbeing related to self-care: 'I regularly do things for myself that help me relax and re-energise', 'Most other parents would be happier than I am', 'I have enough time to get what I need done', 'Tiredness gets in the way of being the parent I would like to be', and 'My employment situation provides flexibility to enable me to fulfil parenting responsibilities'. Each item was scored on a scale from 1 (strongly disagree) to 5 (strongly agree), and results are presented in Table 39.

Most parents (55%) said they regularly did things to relax and re-energise and almost two thirds (64%) agreed or strongly agreed that they had sufficient flexibility in their employment to enable them to fulfil parenting responsibilities (including those who were not employed). However, many (46%) disagreed they had enough time to get everything done that was needed, and a large proportion (44%) of respondents said that tiredness got in the way of them being the kind of parent they would like to be.

A large proportion of parents disagreed or strongly disagreed (60% combined) that other parents would be happier than themselves. This could suggest that most parents are happy, but it is also evident that many parents (15%) see themselves as less happy than other parents and many appear to be ambivalent (28% have mixed feelings).

Many parents (close to one in five) had mixed feelings on each of these items, which - paired with the ratings indicating dissatisfaction in these areas - suggests many parents are experiencing lower than desirable levels of self-care and work conditions which are not conducive to a positive parenting experience.

Table 39. Proportion of participants across response categories of the self-care items, *N* (%) (population weighted data).

	Strongly disagree	Disagree	Mixed feelings	Agree	Strongly agree
I regularly do things for myself that help me relax and re-energise	238 (9.2%)	390 (15.0%)	548 (21.1%)	704 (27.1%)	715 (27.6%)
Most other parents would be happier than I am	579 (22.3%)	969 (37.3%)	716 (27.6%)	243 (9.3%)	87 (3.4%)
I have enough time to get what I need done	450 (17.3%)	733 (28.3%)	612 (23.6%)	534 (20.6%)	265 (10.2%)
Tiredness gets in the way of being the parent I would like to be	277 (10.7%)	542 (20.9%)	625 (24.1%)	752 (29.0%)	397 (15.3%)
My employment situation provides flexibility to enable me to fulfil parenting responsibilities	233 (9.0%)	252 (9.7%)	449 (17.3%)	757 (29.2%)	904 (34.8%)

Fathers are more likely to do something for themselves regularly to relax/re-energise than ***mothers***, $F(1,2592) = 47.514$, $p<.001$ (see Figure 80 and Figure 81).

There were no other subgroup differences for this item.

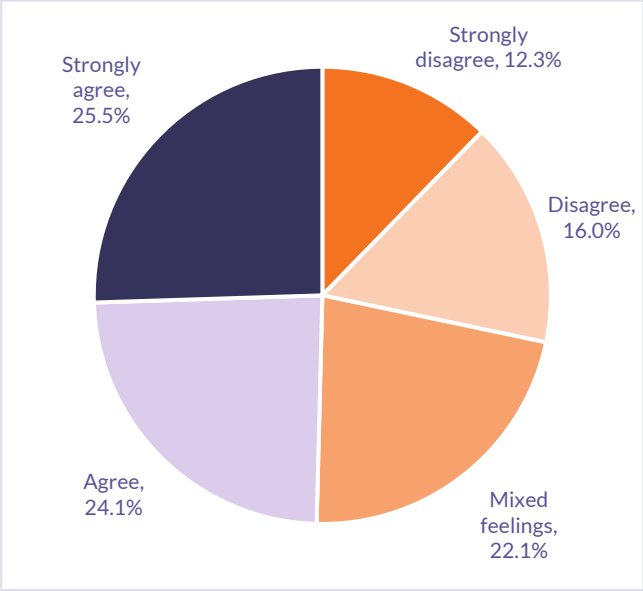

Figure 80. Proportion of mothers who regularly relax/re-energise (population weighted data).

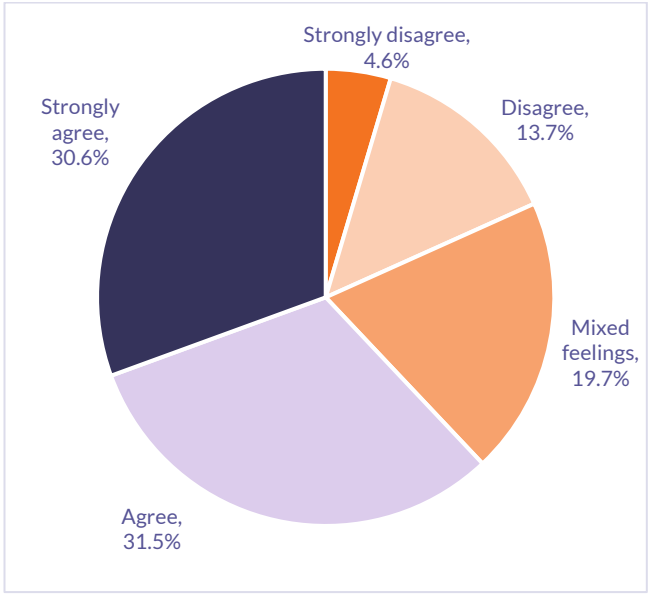

Figure 81. Proportion of fathers who regularly relax/re-energise (population weighted data).

There was a significant difference by ***socio-economic areas*** for the item *'Most other parents would be happier than I am'*, $F(4,2574) = 7.157$, $p<.001$. Bonferroni adjusted post hoc tests identified the significant difference ($p<.001$) lay between the top and bottom quintiles (i.e., the most and least disadvantaged areas (see Figure 82).

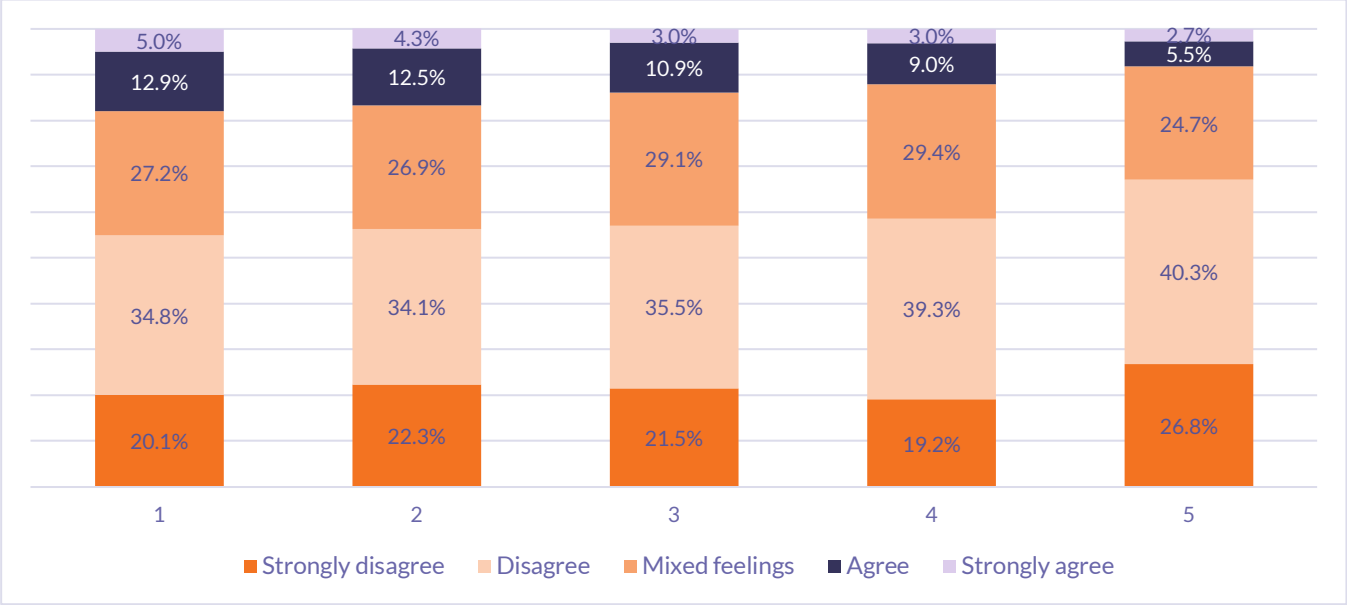

Figure 82. Proportion of responses to statement 'Most other parents would be happier than I am', by socio-economic areas (population weighted data).

Parents of ***children with complex needs*** were more likely to agree with the statement 'Most other parents would be happier than I am', $F(1,2592) = 26.068$, $p<.001$, as is illustrated in Figure 83.

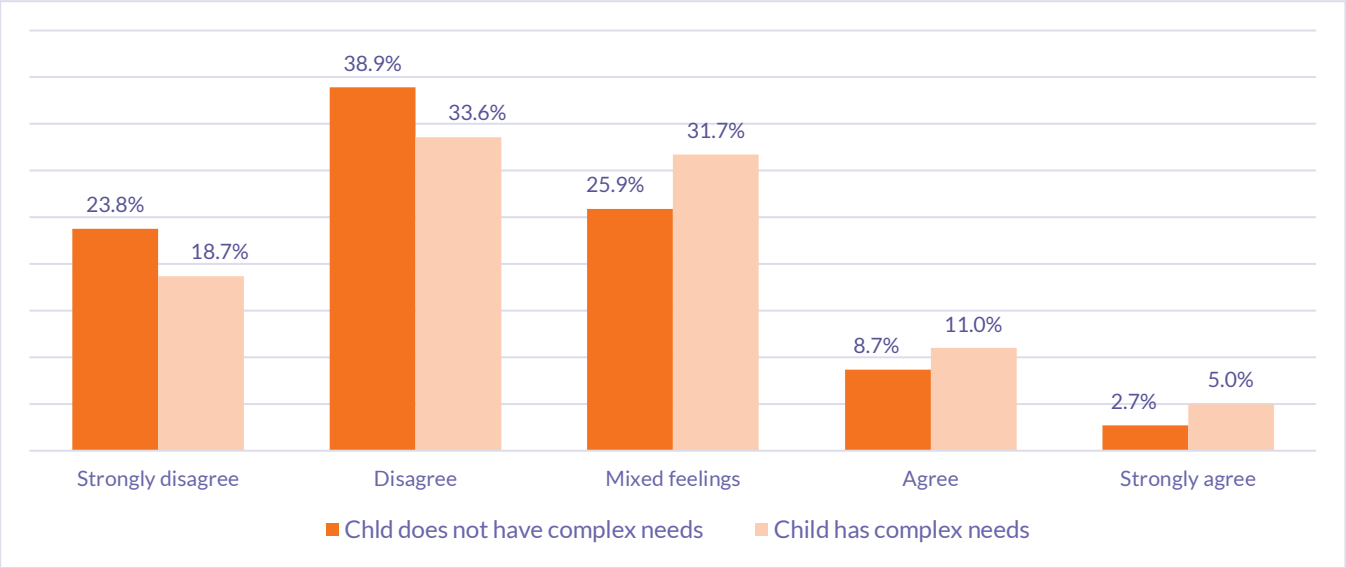

Figure 83. Proportion of responses to statement 'Most other parents would be happier than I am', for parents with and without a child with complex needs (population weighted data).

There were no differences on the item about relative happiness according to whether respondents were *mothers or fathers*, *child age groups*, or *metropolitan versus regional areas*.

There were no differences on the item about whether parents had enough time to get what they needed done according to whether respondents were *mothers or fathers*, were from *metropolitan or regional areas* or different *areas of socio-economic disadvantage*. There was also no difference between parents with and without a child with *complex needs*.

Regarding ***child age*** group differences, 26% of parents of 0-2 year olds agreed or strongly agreed that they had enough time compared to 37% of parents of 13-18 year olds. Analysis of means showed a significant difference overall, $F(3,2598) = 6.417$ $p<.001$. Post hoc analysis with Bonferroni corrections showed a significant difference between the 6-12 and 13-18 year age groups and the comparisons between the other age groups approached significance (see Figure 84).

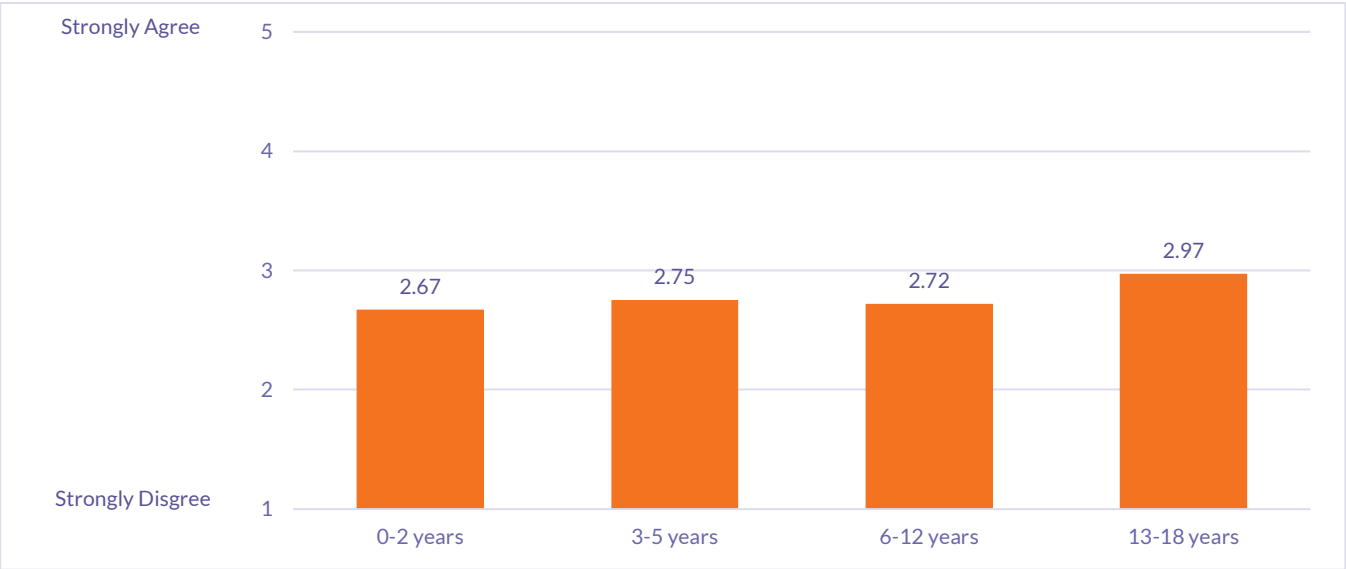

Figure 84. Mean ratings for whether parents had enough time to get things done, by child age (population weighted data).

When asked the extent to which tiredness gets in the way of being the parent they would like to be, 44.3% agreed or strongly agreed. There was a difference between mothers and fathers with 47.6% of mothers agreeing or strongly agreeing compared to 39.6% of fathers. The mean agreement score for mothers was 3.28 and fathers was 3.02 and this difference was statistically significant, $F(1,2593) = 26.910$ $p<.001$ (see Figure 85 and Figure 86)

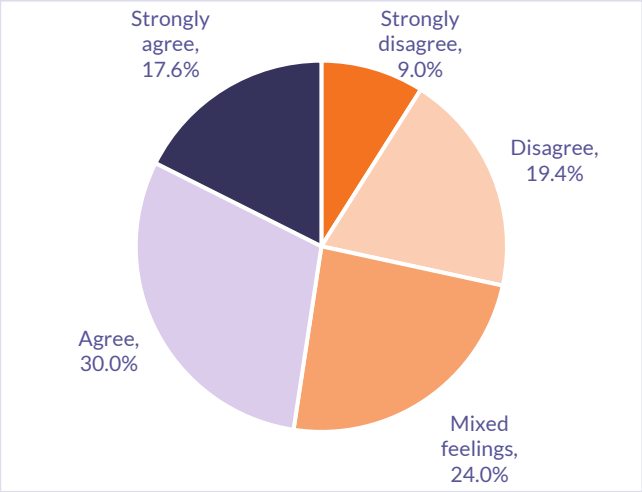

Figure 85. Mother's rating of tiredness getting in the way of parenting (population weighted data).

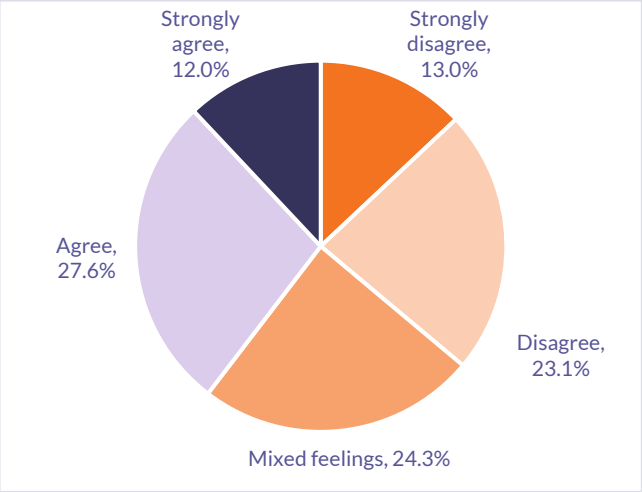

Figure 86. Father's rating of tiredness getting in the way of parenting (population weighted data).

There were no differences on this item according to *child age* group, *metropolitan or regional areas*, areas of *socio-economic disadvantage* or whether the parent had a child with *complex needs*.

For the item about whether their employment situation provides flexibility to enable them to fulfil parenting responsibilities there were no differences for *child age* group, areas of *socio-economic disadvantage*, *metropolitan or regional* area or *complex needs* of the child.

Examination of *mothers' and fathers'* responses showed differences; with 66% of fathers agreeing they had flexibility compared to 63% of mothers. Just over 19% of mothers had mixed feelings compared to 15% of fathers. Despite these apparent gender variances, the differences in mothers' and fathers' responding was not significant.

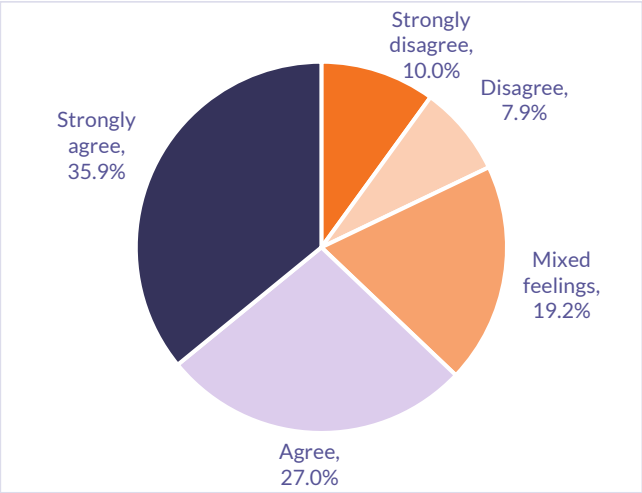

Figure 87. Mother's ratings about whether employment provides flexibility to fulfil parenting responsibilities (population weighted data).

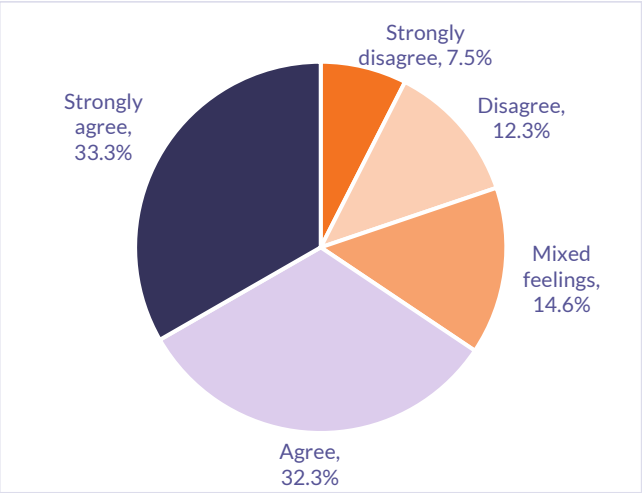

Figure 88. Father's ratings about whether employment provides flexibility to fulfil parenting responsibilities (population weighted data).

CONCERNS FOR CHILD

In 2019 we also introduced two new items about parents' concerns for their child: *'My community is a safe place for my child/ren'* and *'I worry for my child's/ren's future'*. Each item was scored on a scale from 1 (strongly disagree) to 5 (strongly agree).

Most parents (69%) agreed or strongly agreed that their community was a safe place for children, although 22% expressed mixed feelings about this and 9% disagreed or strongly disagreed.

Many parents were worried for their children, with two thirds (65%) agreeing or strongly agreeing with the statement *'I worry about my child/ren's future'*. Again, a large proportion (19%) had mixed feelings about this. Around 15% either disagreed or strongly disagreed that they worried about their children's future.

There was a significant difference among ***socio-economic areas*** for parents views about community safety, $F(4,2575)=19.680$, $p<.001$ - which showed a small to moderate effect size ($\eta^2_p=.030$) - but not for the item about worrying about their child's future. The significant (p<.001) differences identified in Bonferroni adjusted post hoc analyses were between the highest socio-economic quintile and each of the other four quintiles (see Figure 89). There was a fairly clear pattern of greater sense of community safety with increasing socio-economic advantage.

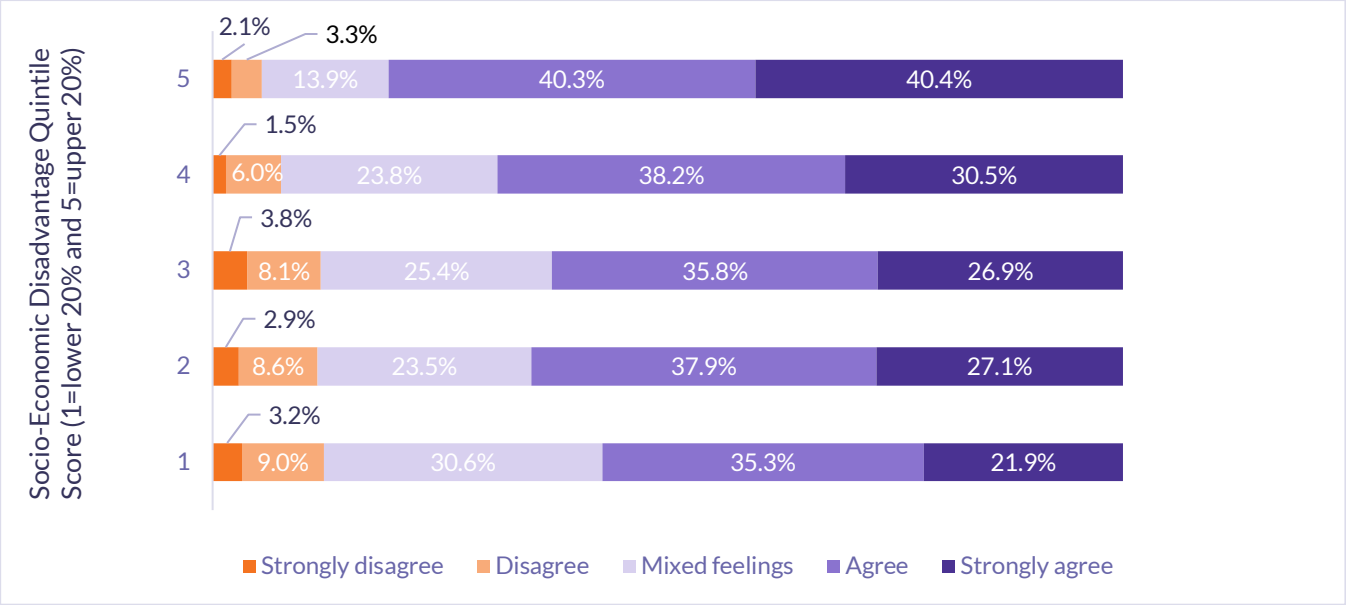

Figure 89. Parents' responses to the item 'My community is a safe place for my children', by socio-economic areas (population weighted data).

Parents of children with ***complex needs*** were significantly more worried about their children's future than other parents, $F(1,2593) = 18.187$, $p<.001$(see Figure 90). Nevertheless, while 71% of parents of children with complex needs agreed or strongly agreed they were worried about their children's future, almost two thirds of other parents (63%) were similarly worried. There was no difference for parents of children with or without complex needs on the item regarding community safety.

There were no differences for either item for *mothers versus fathers*, across *child age groups*, or for *metropolitan versus regional* dwellers.

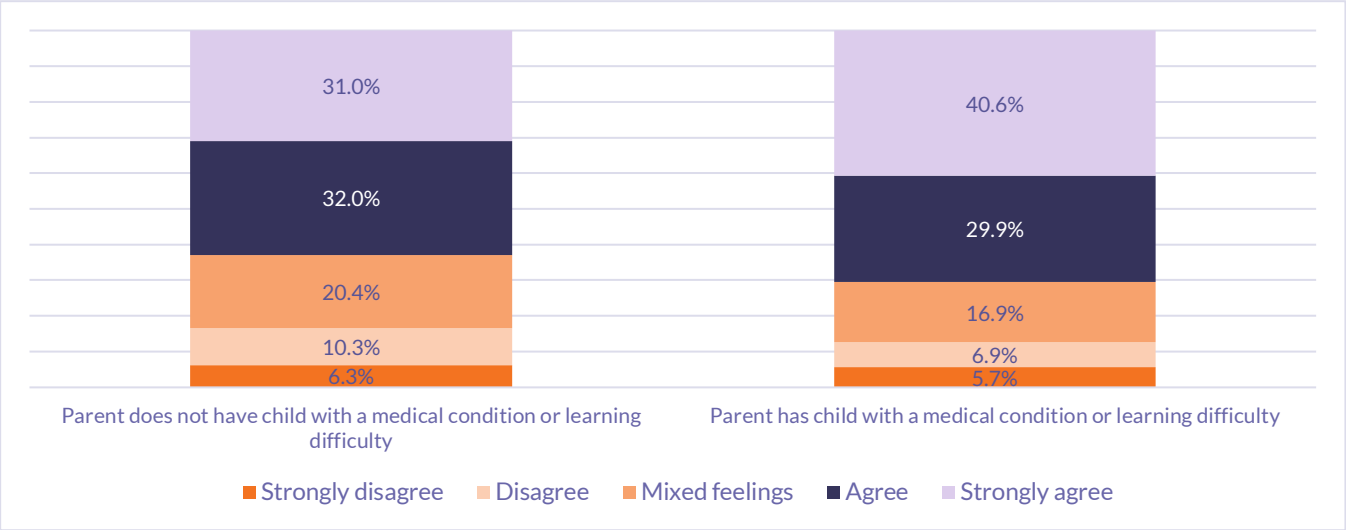

Figure 90. Parents' rating of worry about their children's future (population weighted data).

Child sleep

Another common concern for parents is their child's sleep and there were three questions addressing this. The first, which was in the 2016 survey, asked them how much of a problem their child's sleeping pattern or habits are for them. There were five alternatives: '1= large problem', '2= moderate problem', '3=small problem', '4=no problem at all', and 'not sure/don't know.' Thus, higher scores reflected less of a problem.

Nearly half of parents (44%) reported their children's sleeping patterns or habits were a problem compared to 36% in 2016. Nearly a quarter rated their child's sleep problem as small compared to 20% in 2016. Twenty percent reported it was a large or moderate problem compared to 17% in 2016 (see Figure 91 for 2019 data).

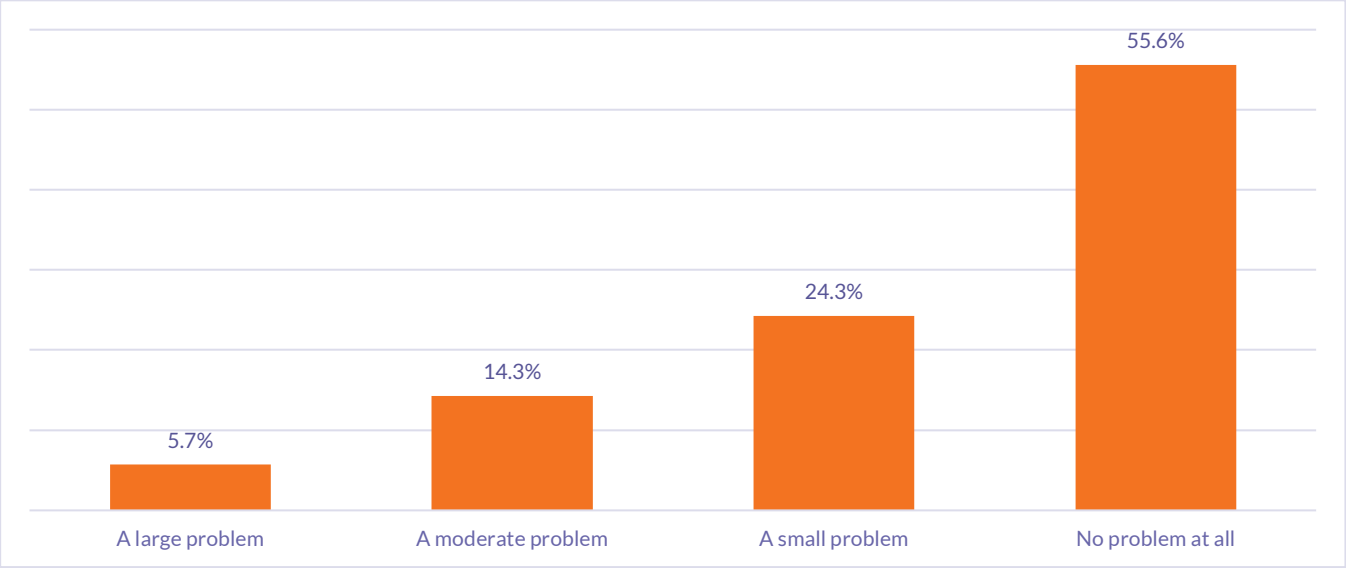

Figure 91. Percentage of parents reporting the degree to which their child's sleep is a problem (population weighted data).

There were no differences when comparing *metropolitan/ regional* areas and different *socio-economic areas* of disadvantage, consistent with the initial survey results in 2016. However, there were differences between ***mothers and fathers***, parents of children with and without ***complex needs*** and parents of ***children of different ages***.

Figure 92 shows the mean ratings for ***child age*** groups and these differences were statistically significant. Post hoc analysis using Bonferroni correction showed significant differences between age groups 0-2, 6-12 and 13-18 $F(3,2592)=7.951$ $p<.001$. This finding is consistent with the 2016 survey in which parents of younger children were more likely to find their child's sleep a problem.

Figure 92 also shows the mean ratings for parent gender. There was a small difference between ***mothers and fathers'*** ratings that reached statistical significance $F(1,2586)=11.774$, $p<.001$. Fathers were less likely to see their child's sleep as a problem, with 17% saying it was a large or moderate problem compared to 22% of mothers. In the 2016 survey there were no significant mother/father differences.

Figure 92. Sleep problems in children by child age group and parent gender (population weighted data).

Figure 93 shows that parents whose children have *complex needs* were more likely to say their child's sleeping patterns or habits were a problem and this difference was statistically significant, $F(1,2585) = 85.622$, $p<.001$. This finding showed a small to moderate effect size ($\eta_p^2 = .032$) and is also consistent with the 2016 survey.

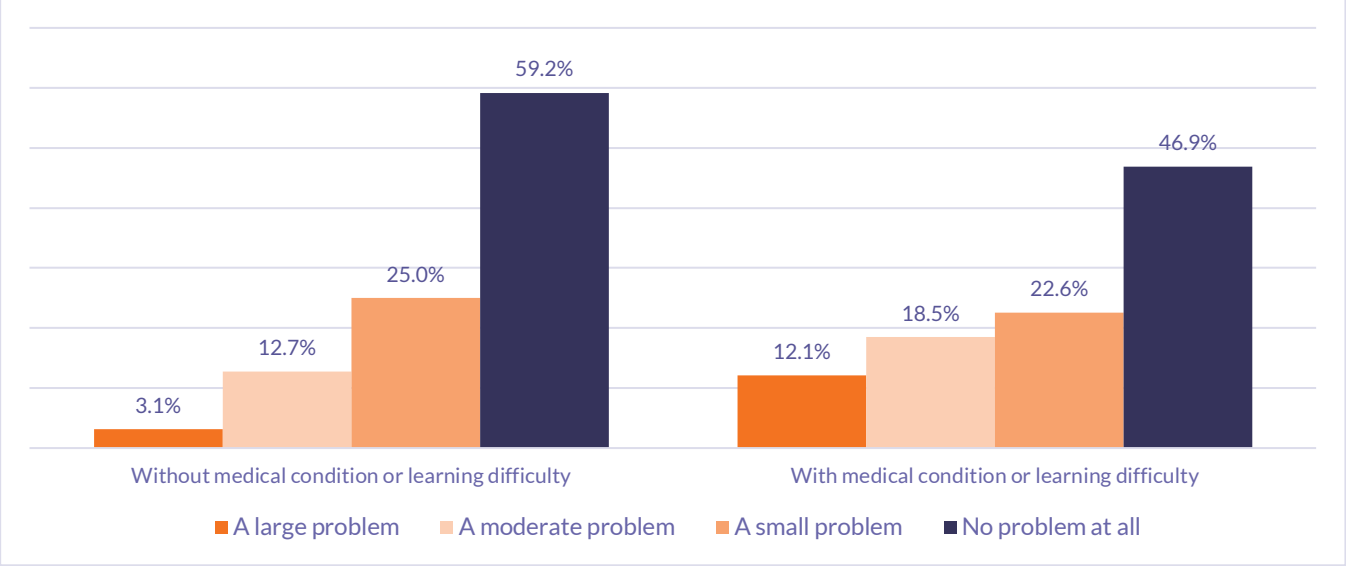

Figure 93. Sleep problems in children by child complex needs (population weighted data).

Extending on the item regarding how much of a problem child sleep was, we asked two follow-up questions in 2019 to better understand the reasons why child sleep may be a problem for parents. The first item asked parents to estimate either how many hours of sleep their child has on a typical weeknight (for parents whose target child was 5 years of age or more) or how many hours of sleep their child had in a typical 24 hour period (for children under 5 years). As seen in Figure 94, the average number of hours sleep decreases with child age and the differences are statistically significant $F(3,2590) = 599.783$, $p<.001$ with a large effect size ($\eta_p^2 = .420$).

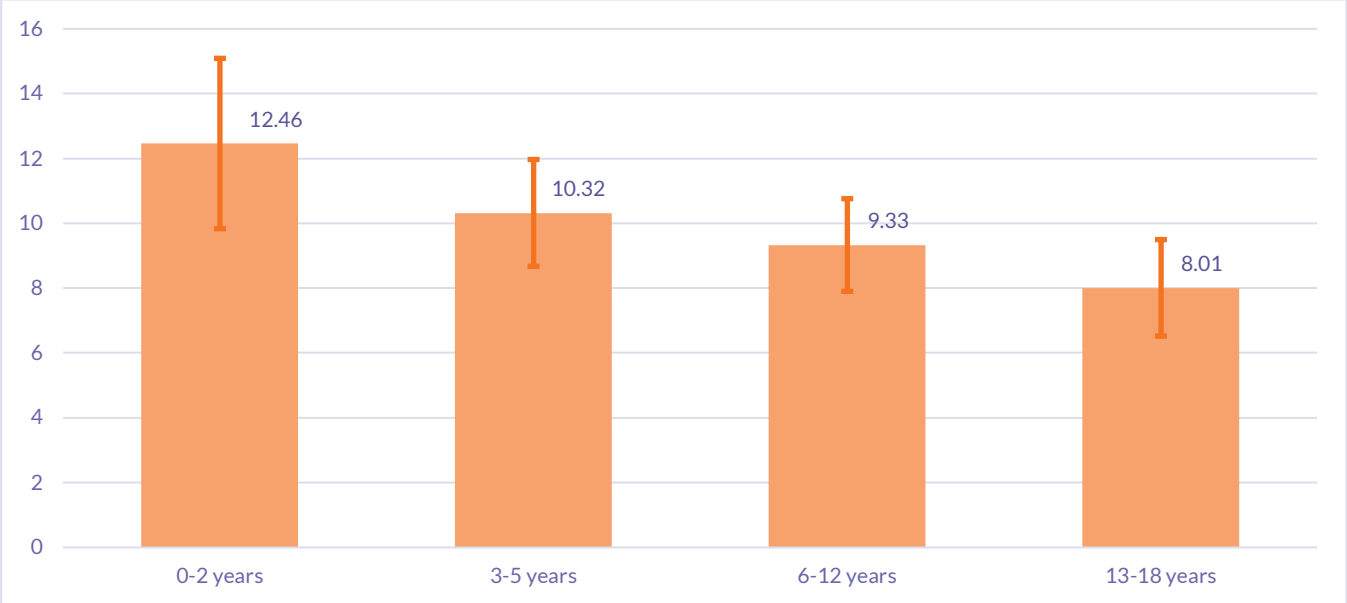

Figure 94. Mean hours of child's sleep per 24 hours by child age group (population weighted data).

According to parents' reports, whether the child had ***complex needs*** or not was associated with the number of hours slept. Children with complex needs had fewer hours sleep on average (mean = 9.0 compared with 9.95) $F(1,2599) = 100.874$, $p<.001$.

Parent gender, *metropolitan or regional* residence and areas of *socio-economic disadvantage* were not associated with hours of sleep.

There was an association between how serious the parents rated the child's sleep problem and how many hours sleep the child had. Figure 95 shows on average, there were fewer hours of sleep when the child's sleeping problem was problematic $F(3,2589) = 40.835$, $p<.001$, $\eta_p^2 = .045$, which represents a small to moderate effect size. Even when controlling for child age, there was a significant association between how much sleep a child had and different levels of seriousness of child sleep problems, $F(3,2584) = 96.983$, $p<.001$.

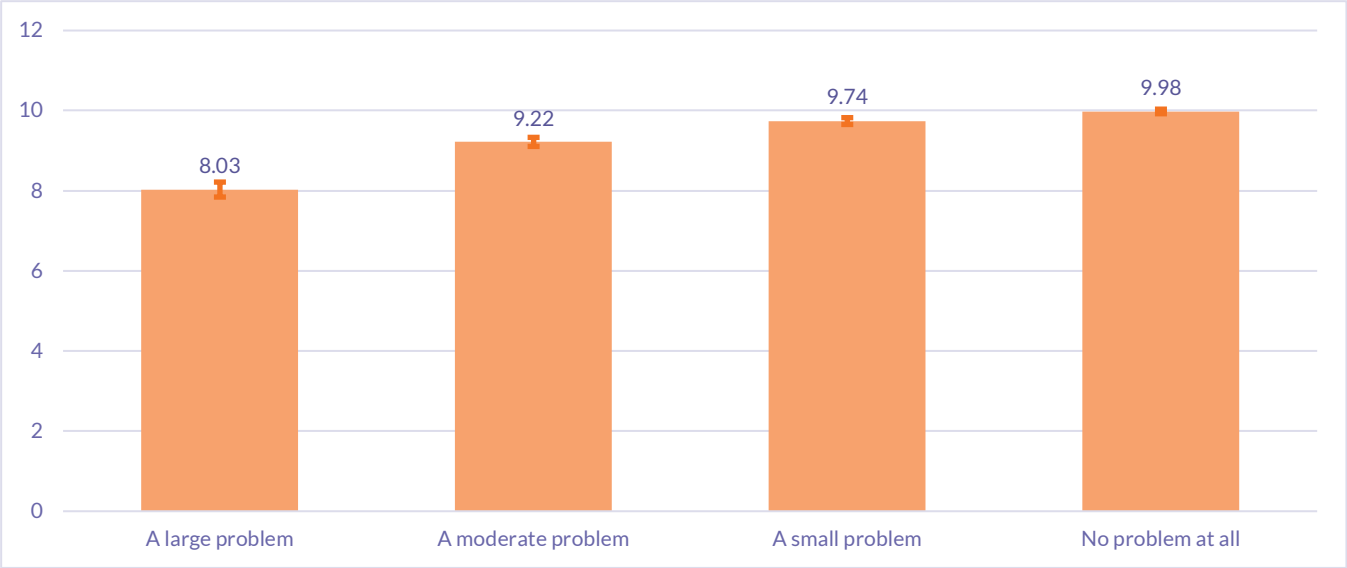

Figure 95. Mean hours of child's sleep according to ratings of the seriousness of child sleep problems (population weighted data).

The second follow-up question introduced in 2019 was asked only of parents who indicated their child's sleep was either a moderate or large problem and did not include those who said it was a small problem. The question was 'Why is your child's sleep a problem for you?' and parents' responses were coded into one or more of the categories listed in Figure 96.

For the 20% of parents who said their child's sleep was either a moderate or large problem the most reported types of problems were 'Takes a long time to fall asleep' 'Wakes repeatedly through the night' and 'Hard to get child to bed at bedtime' (each mentioned by 43% or more of those parents who rated child's sleep as a moderate or large problem).

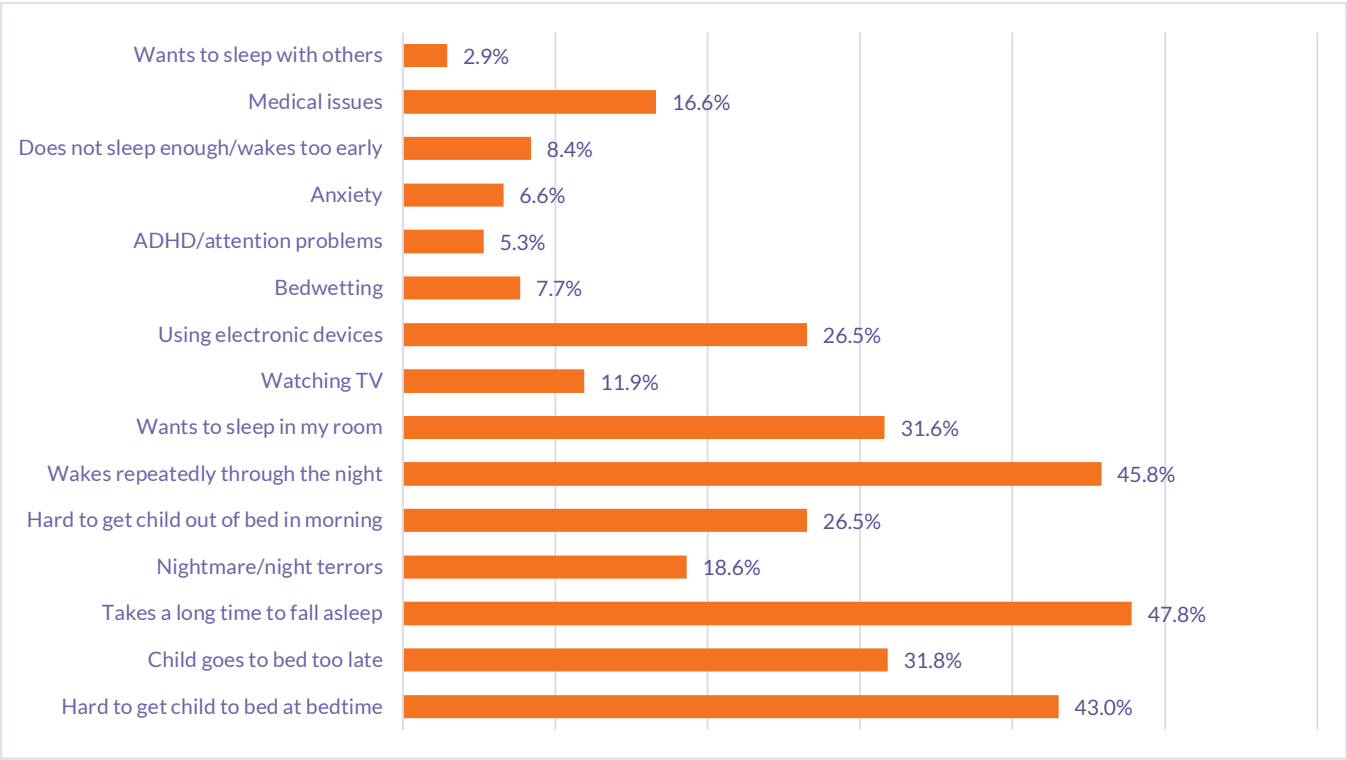

Figure 96. Percentage of parents indicating the type of their child's sleep problems (population weighted data).

Table 40 shows the percentage of parents who reported the type of child sleep problem or problems by way of ***child age groups.*** These data are from parents who indicated their child's sleep was a moderate or large problem and does not represent the percentage of children in the total sample who had these problems. It also includes parents who identified more than one type of problem.

Comparisons between the age groups revealed differences for five of the problems. Parents of older children were more likely to say their child goes to bed too late, is hard to get out of bed in the morning and uses electronic devices. Parents of younger children reported they were more likely to wake repeatedly through the night and want to sleep in the parents' room.

Table 40. Percentage of parents reporting different types of child sleep problems, by child age group (among parents who rated child sleep as a moderate or large problem) (population weighted data).

	0–2years	3–5years	6–12years	13–18years
Hard to get child to bed at bedtime	41 (39.4%)	41 (44.6%)	91 (48.7%)	50 (37%)
Child goes to bed too late[a]	19 (18.3%)	26 (28%)	58 (31%)	63 (46.3%)
Takes a long time to fall asleep	36 (34.6%)	41 (44.1%)	108 (57.8%)	64 (47.1%)
Nightmare/night terrors	12 (11.5%)	18 (19.4%)	47 (25.1%)	20 (14.7%)
Hard to get child out of bed in morning[b]	6 (5.8%)	20 (21.5%)	53 (28.3%)	58 (43%)
Wakes repeatedly through the night[c]	77 (74%)	50 (53.8%)	77 (41.2%)	34 (25.2%)
Wants to sleep in my room[d]	40 (38.5%)	43 (46.7%)	68 (36.4%)	13 (9.6%)
Watching TV	7 (6.7%)	14 (15.1%)	14 (7.5%)	27 (20%)
Using electronic devices[e]	7 (6.7%)	15 (16.1%)	42 (22.5%)	73 (54.1%)
Bedwetting	4 (3.8%)	6 (6.5%)	25 (13.4%)	4 (3%)
ADHD/attention problems	0 (0%)	1 (5.3%)	4 (9.1%)	1 (2.6%)
Anxiety	0 (0%)	0 (0%)	5 (11.4%)	4 (10.3%)
Does not sleep enough/wakes too early	1 (4.3%)	4 (21.1%)	4 (8.9%)	3 (7.7%)
Medical issues	3 (13%)	4 (21.1%)	10 (22.7%)	4 (10.3%)
Wants to sleep with others	1 (4.3%)	1 (5.3%)	1 (2.3%)	0 (0%)

a $\chi 2$ (3) = 22.64, p<.001; b $\chi 2$ (3) = 43.36, p<.001; c $\chi 2$ (3) = 60.49, p<.001; d $\chi 2$ (3) = 44.09, p<.001; e $\chi 2$ (3) = 80.47, p<.001.

WHAT INFORMAL SUPPORTS HAVE PARENTS USED

Trusted support person

On a 5-point scale from 'strongly disagree' to 'strongly agree', parents were asked to indicate their level of agreement with the statement 'If I was having problems in my life, there is someone I trust that I could turn to for advice'. Overall, the data indicated that 86% of parents agreed or strongly agreed that they had a trusted support person they could turn to for advice, as seen in Figure 97. This value represents a small decrease from the 2016 survey, when 91% of parents agreed or strongly agreed they had a trusted support person.

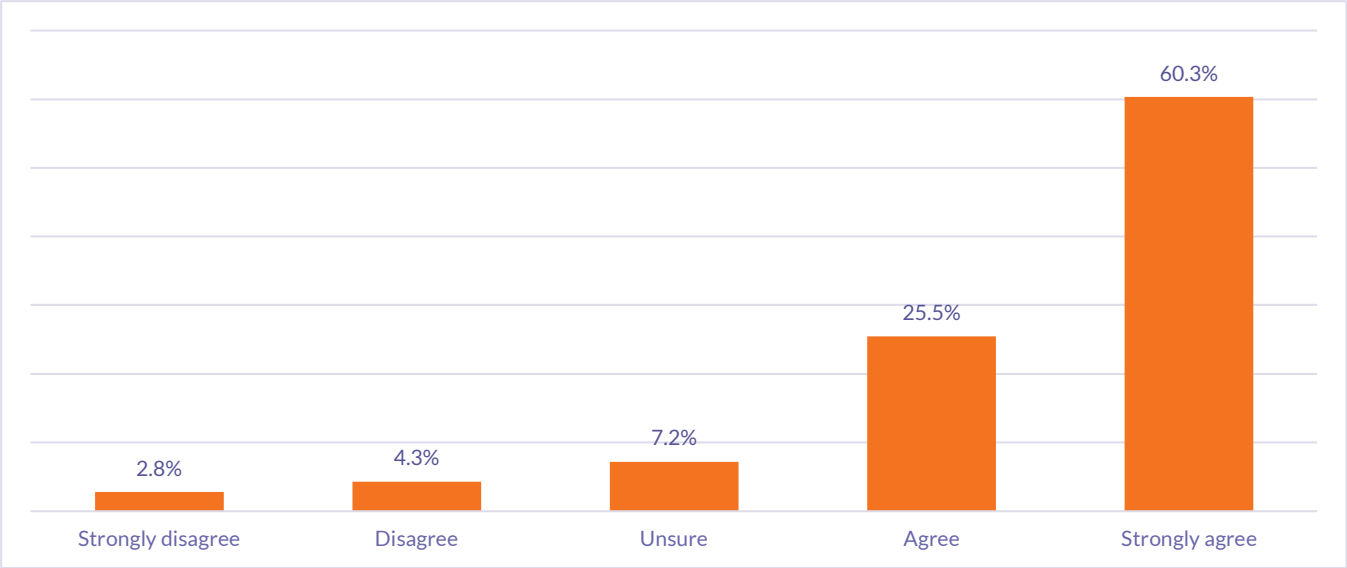

Figure 97. Percentage of parents who have a trusted support person (population weighted data).

Although the majority of parents strongly agreed that they had a trusted support person, there was a significant difference between the degree to which mothers and fathers felt they had a trusted person in their life who could offer advice, $F(1,2593) = 15.869$, $p<.001$, with mothers reporting a higher level of agreement (see Figure 98 and Figure 99). This is consistent with 2016 findings about the differences between mothers and fathers.

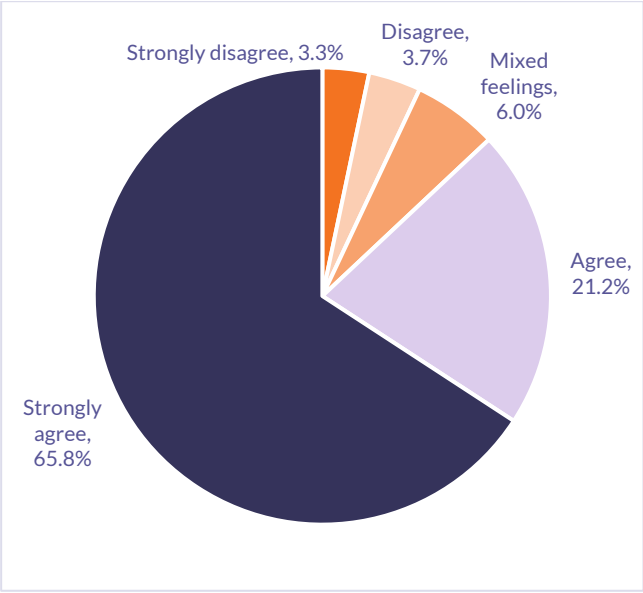

Figure 98. Mother's ratings about if having problems in life, there is someone I trust that I could turn to for advice (population weighted data).

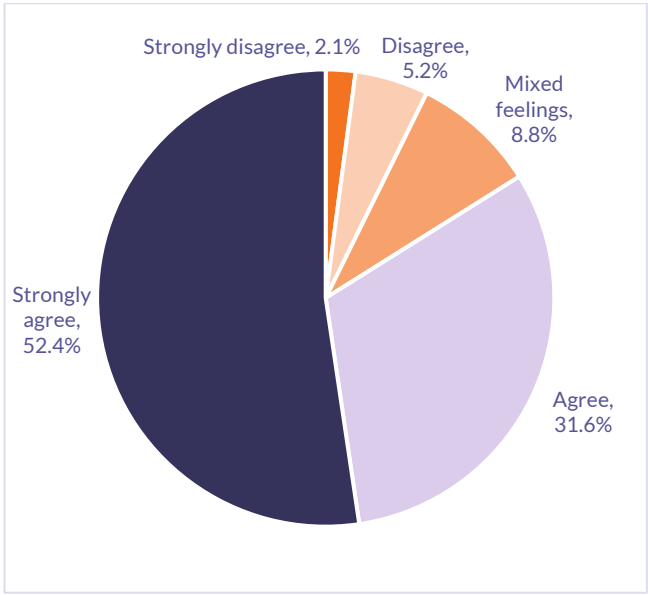

Figure 99. Father's ratings about if having problems in life, there is someone I trust that I could turn to for advice (population weighted data).

In 2016 there was a significant difference (at $p<.001$) between *child age groups* in the degree to which parents felt they had a trusted person in their life; parents of younger children reported more agreement. However, this was not significant at the $p<.001$ level in 2019. It was significant at the $p<.05$ level and the trend was in the same direction (i.e., parents of older children report lower levels of support).

As in 2016, there were no statistically significant differences between *metropolitan and regional areas*, *different socio-economic areas*, or *parents of children with and without complex needs* in how much parents agreed they had a trusted person in their life who could offer advice.

Support from family

On a 5-point scale from 1 (strongly disagree) to 5 (strongly agree), parents were asked to indicate their level of agreement with the statement 'My family are the people I turn to first when I am looking for help and support in raising [child name]'. Results showed 74% agreed or strongly agreed that their family were the first people they turned to when looking for help to raise and support their children, while 17% disagreed or strongly disagreed with this statement and 9% were unsure (Figure 100). These findings are different from what was observed in 2016, when 83% of parents said they turned to family first, 13% disagreed and 4% were unsure. Therefore, again there seems to be a more negative view in recent times about the availability, accessibility or usefulness of trusted support people for family members.

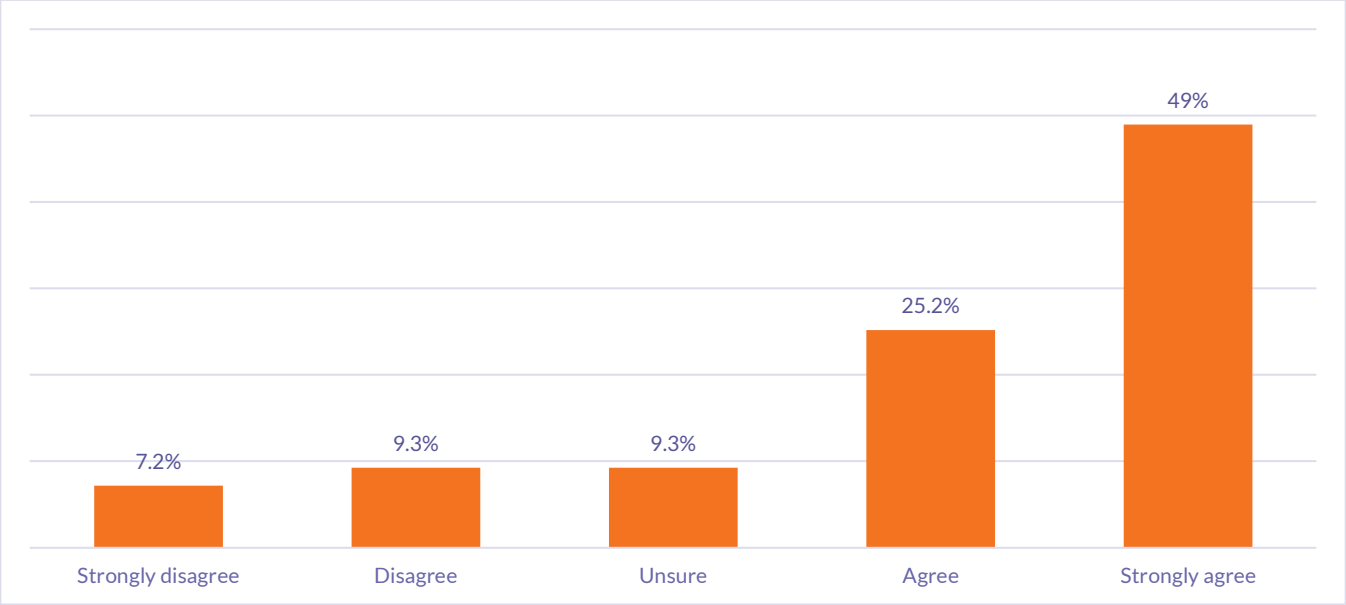

Figure 100. Family as first source of support (population weighted data).

There was a significant difference in the degree to which parents reported first turning towards family for help in childrearing according to ***child's age group***, $F(3,2593) = 8.226$, $p<.001$, with parents of younger children reporting more agreement that they would first approach family for advice. Figure 101 shows the mean agreement ratings across child age groups. These findings reflect trends observed in the 2016 data.

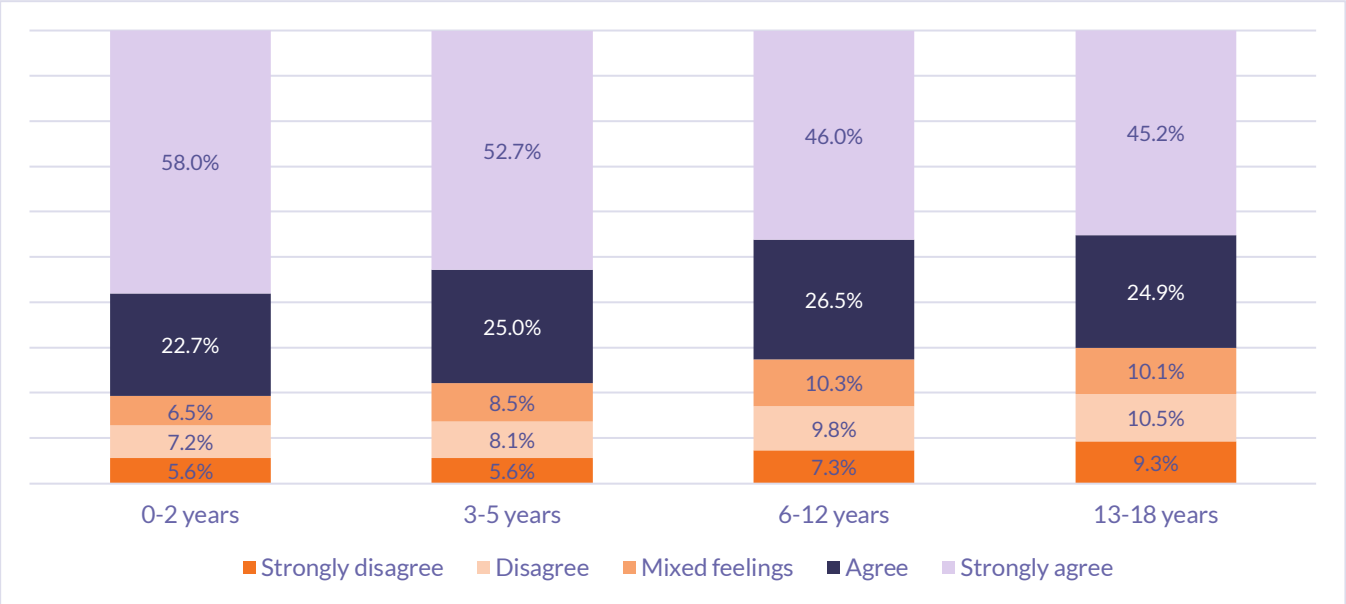

Figure 101. Family as first source of support by child age group (population weighted data).

Similar to 2016, there were no significant subgroup differences on this item for *fathers versus mothers*, *different socio-economic areas*, *metropolitan versus regional areas* or for *parents of children with and without complex needs*.

Partner agreement and support

Parents were asked to report on their living arrangements, and in particular, they were asked a series of questions about parenting support in relation to the person they think of as the most significant other parent in the life of the target child. We deliberately chose to frame questions about 'partner support' in this way, rather than asking parents to comment on their 'partner', as we did in the 2016 survey. This decision was motivated by a desire to capture information about the person (if relevant – not all respondents would have a parenting partner) who the respondent views as the key other person in their life or their child's life who has the most significant parenting role to the child. We expected that this would accommodate a range of different family types and structures – such as two parent families all residing in the same home, separated couples, adoptive families, couples with shared care arrangements, and blended families.

As the 2016 and 2019 questions about the respondent's 'partner' differed, responses given to items about partner support cannot be compared.

Nine in ten (*n*=2341) respondents indicated their child had another parent. Of these, 83% said their child's other parent lived with the respondent all the time. A small number said their child's other parent lived with them some or most of the time (2%), and 15% said they did not live with their child's other parent. Only a small number (*n*=68) of respondents said they were living with a partner who they did not consider to be their child's other parent.

In most cases (81%) this 'other parent' was the child's biological parent, however, it should be noted that 350 (15%) parents did not respond to the question about whether the child's other parent was the child's biological parent despite previously indicating the child did have another parent. Thus, only 4% of respondents indicated the target child's 'other parent' was not their biological parent.

Of those who indicated their child had another parent, when asked how often they agree with this other parent on how to parent their child, the majority (92%) indicated they agreed all or most of the time, and 5% agreed occasionally, while only 3% agreed rarely or never (see Figure 102).

When asked how often the other parent 'understands and is supporting you as a parent', again most parents (89%) indicated this occurred all or most of the time, 6% said this was occasionally true, and only 5% said this was never or rarely true (see Figure 103).

When asked how fair the current share of child care and other parenting tasks felt to them, most respondents (74%) indicated the division was very fair (or close to very fair), although 5% rated it as not fair at all (see Figure 104).

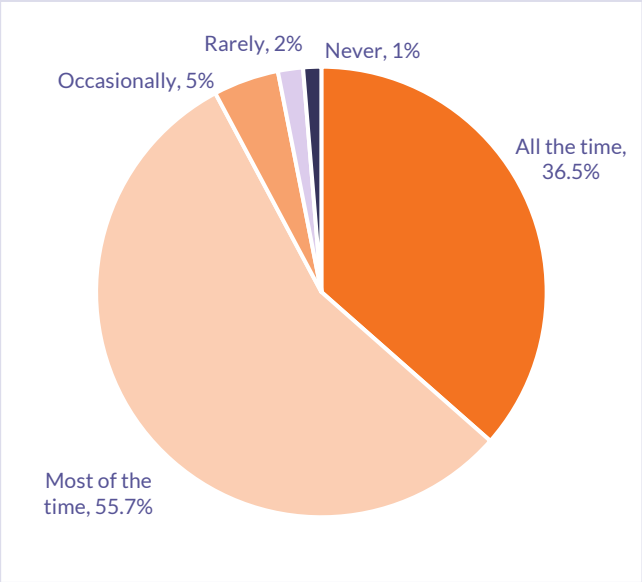

Figure 102. How often do you agree with your child's other parent on how to parent your child? (population weighted data).

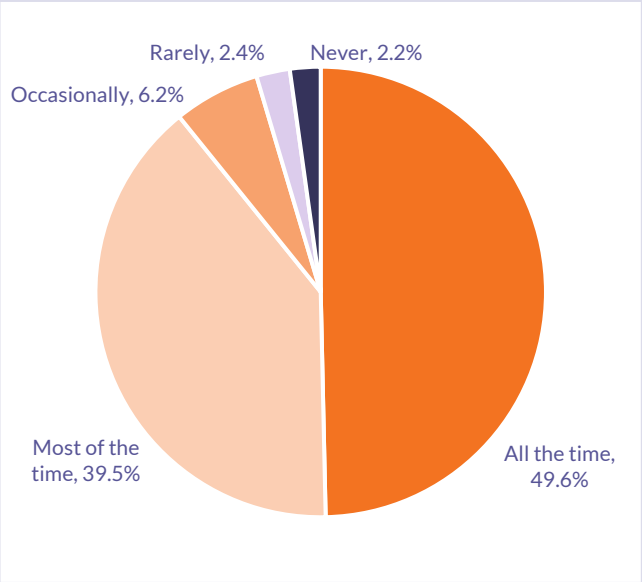

Figure 103. How often does your child's other parent understand and support you as a parent? (population weighted data).

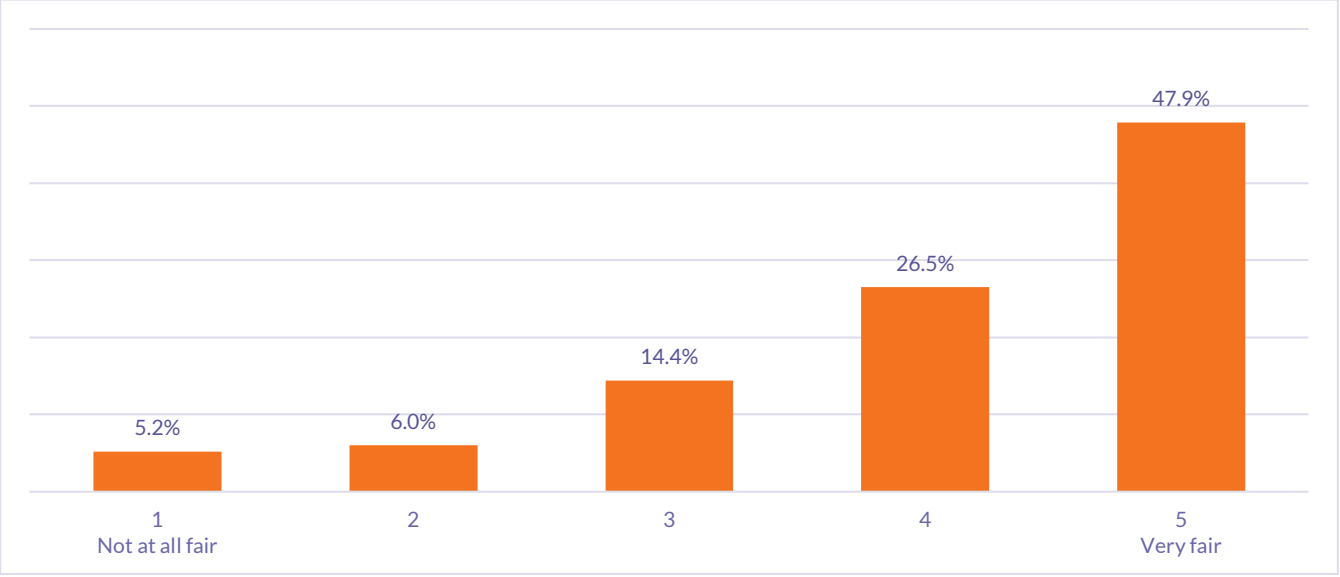

Figure 104. How fair is the current sharing of childcare and other parenting tasks? (population weighted data).

Table 41 shows mean ratings for the three questions on partner support for ***mothers and fathers***. Lower scores indicate a higher frequency of agreement and of feeling understood, and less satisfaction with shared duties.

On average, fathers' ratings showed that they thought they agreed with their partner more often than mothers, $F(1,2339) = 23.499$, $p<.001$. While 34% of mothers felt they agreed with their partner 'all of the time', 40% of fathers felt this way. And while 10% of mothers felt agreement occurred either occasionally, rarely or never, only 5% of fathers felt this way.

Fathers' average rating for feeling understood and supported by the child's other parent was lower than mothers', reflecting that fathers felt understood more often than mothers, $F(1,2350) = 69.723$, $p<.001$.

Fathers also reported feeling a greater degree of satisfaction with the way parenting duties were shared, $F(1,2340) = 106.083$, $p<.001$.

Although not directly comparable (as the definition of 'other parent'/'partner' was different between waves), these results are consistent with findings from the previous survey in 2016, with fathers on average reporting higher levels of agreement and support and higher levels of sharing duties (although only 'agreement about parenting' was statistically significant in 2016).

Table 41. Average ratings regarding parent agreement and support by mothers and fathers, *M* (*SD*) (population weighted data)

	Scoring	Fathers	Mothers
Agreement between parents on parenting children*	1=all the time, 5 = never	1.67 (.659)	1.82 (.785)
Feel understood and supported by other parent*	1=all the time, 5 = never	1.51 (.733)	1.81 (.942)
Satisfaction with shared parenting duties*	1=not at all fair, 5= very fair	4.33 (.949)	3.85 (1.154)

*$p<.001$

The difference across child age groups in how often parents said they agreed on parenting was statistically significant, $F(3,2337) = 7.377$, $p<.001$, with Bonferroni adjusted post hoc tests revealing the significant differences ($p<.001$) lay between the two older age groups (6-12 and 13-18 years) each with the youngest age group (0-2 years). Parents of older children agreed less often than parents of younger children.

There was also a statistically significant ***child age group*** difference in the degree to which parents felt understood and supported by their co-parent, $F(3, 2348) = 13.990$, $p<.001$, with Bonferroni adjusted post hoc tests revealing significant differences ($p<.001$) once again between the two older age groups (6-12 and 13-18 years) and the youngest age group (0-2 years) such that parents of older children felt less understood and supported by their parenting partner.

There were no differences across *child age groups* in parents' ratings of the extent to which parenting duties were shared.

The mean responses across child age groups for these items are summarised in Table 42.

Again, although not directly comparable, these results are generally consistent with findings from the survey in 2016, with parent of older children on average reporting lower levels of agreement and support.

Table 42. Average ratings regarding parent agreement and support by child age group, *M* (*SD*) (population weighted)

	Scoring	0–2 years	3–5 years	6–12 years	13–18 years
Agreement between parents on parenting children*	1=all the time, 5 = never	1.61 (.599)	1.72 (.699)	1.80 (.768)	1.81 (.784)
Feel understood and supported by other parent*	1=all the time, 5 = never	1.47 (.683)	1.60 (.763)	1.74 (.930)	1.79 (.925)
Satisfaction with shared parenting duties	1=not at all fair, 5= very fair	4.10 (1.040)	4.11 (1.066)	4.04 (1.183)	4.03 (1.241)

*Statistically significant difference across child age groups, $p<.001$.

There were no statistically significant differences between *metropolitan and regional* areas, parents of *children with or without complex needs* and for different *socio-economic areas* in the findings about how often parents agreed on parenting, how often parents felt understood and supported by their co-parents, or with the extent to which they felt parenting duties were shared.

SOURCES OF INFORMATION PARENTS HAVE USED AND WOULD USE

Parenting information sources used

Parents were asked what they had used when they needed information or advice about raising their children. The most highly endorsed sources of parenting information were asking other parents or friends, online information, and education staff (see Table 43). A relatively smaller proportion of parents (15%) reported using telephone helplines (was 19% in 2016). Parents reported obtaining parenting information or advice from an average of four to five different sources, with a range of zero to ten sources. These findings are very similar to the findings from 2016.

Compared to the initial survey in 2016, the percentage of parents saying they accessed parenting information or advice online and from early childcare staff or teacher/principal has increased by around four percentage points. On the other hand, the percentage of parents saying they had accessed parenting information or advice from books, a parenting group, or telephone helpline had decreased by between four and nine percentage points.

Table 43. Sources of information accessed outside the family about parenting, *N* (%) (population weighted data).

	Accessed source
Other parents/friends/neighbours	2241 (86.3%)
Accessing information online	2168 (83.4%)
Reading books	1664 (64.1%)
In person with a GP	1473 (56.7%)
In person with another type of health professional such as a speech pathologist, psychologist, family support worker	1443 (55.6%)
Early childcare staff or teacher/principal	1877 (72.3%)
Participate in a parenting group	785 (30.2%)
Telephone helpline	396 (15.3%)
Community leader such as an Elder or religious leader	372 (14.3%)
Something/someone else	94 (3.6%)
None of these	29 (1.1%)

There were significant differences across ***child age*** groups in the sources of parenting information participants reported ever having accessed (see Figure 105).

- A greater proportion of parents of younger children reported accessing information online, $\chi 2(3) = 48.001$, $p<.001$, and from telephone helplines, $\chi 2(3) = 126.997$, $p<.001$. Both these findings reflect 2016 data.
- A smaller proportion of parents of 0-2 year-old children reported approaching educators or teachers for parenting advice, $\chi 2\ (3) = 77.360$, $p<.001$, which also reflects 2016 findings.
- There were no significant differences between age groups in parents accessing information from parenting groups, in person with a GP or other health professional, a community leader or 'something/ someone else'.

In 2016 there was a significant child age group difference for books, and for other parents, friends or neighbours, but these differences were not observed in 2019.

As shown in Figure 106 a larger proportion of ***mothers than fathers*** reported accessing many of the sources of parenting information:

- Online, $\chi^2(1) = 12.686$, p<.001 (this was not significant in 2016)
- Participating in parenting groups, c2(1) = 55.808, p<.001 (same in 2016)
- In person with a GP, c2(1) = 41.650, p<.001 (not asked in 2016)
- In person with another type of health professional, c2(1) = 37.860, p<.001 (not asked in 2016)
- Other parents/friends/neighbours, c2(1) = 23.870, p<.001 (same in 2016)
- Early childcare staff/ teacher or principal, $\chi^2(1) = 14.319$, p<.001 (same in 2016).

In 2016 there was a significant parent gender difference for books and telephone helplines, but this was not observed in 2019.

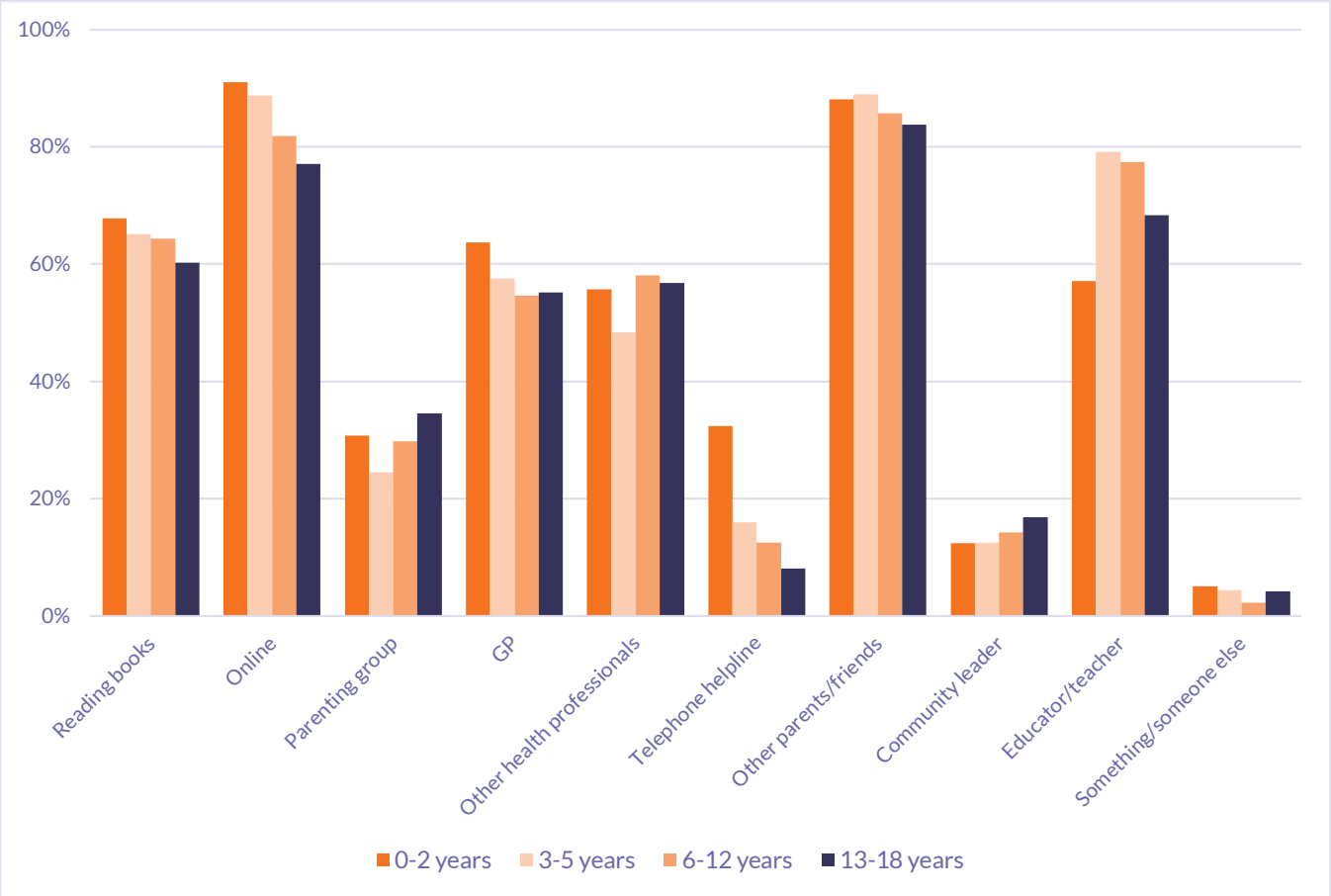

Figure 105. Sources of parenting information accessed, by child age group (population weighted data).

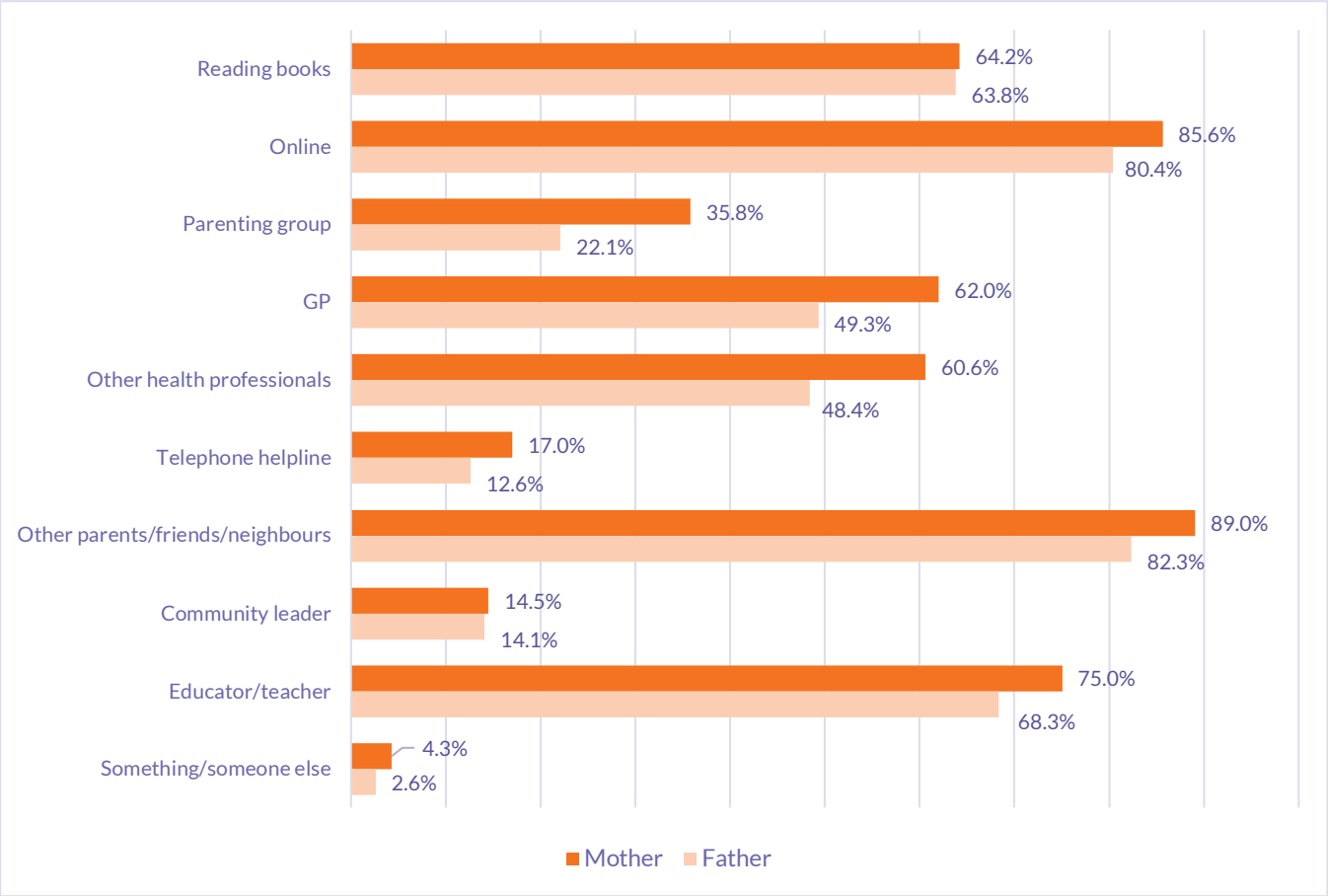

Figure 106. Sources of parenting information accessed, by mothers and fathers (population weighted data).

A greater proportion of parents living in ***metropolitan areas*** reported accessing parenting information online (85%), compared to ***regional*** dwellers (78%), $\chi^2(1) = 14.259$, $p<.001$. Although the magnitude of difference between metropolitan and regional parents was similar in 2016 (that is, 7 percentage points in 2019 and 5 percentage points in 2019), the difference in 2016 was not statistically significant.

There were no other statistically significant differences at $p<.001$ in types of information sources used by *metropolitan and by regional/remote parents*.

A greater proportion of ***parents of children with complex needs*** reported accessing parenting information or advice in a parenting group, $\chi^2(1) = 12.055$, $p<.001$, from a GP, $\chi^2(1) = 43.958$, $p<.001$, and from other health professionals, $\chi^2(1) = 94.667$, $p<.001$ (see Figure 107). These findings reflect 2016 conclusions.

In 2016 a significant difference was also detected for the extent to which parents of children with and without complex needs accessed parenting information from educators or teachers, however this difference was only just non-significant at the $p<.001$ level in 2019.

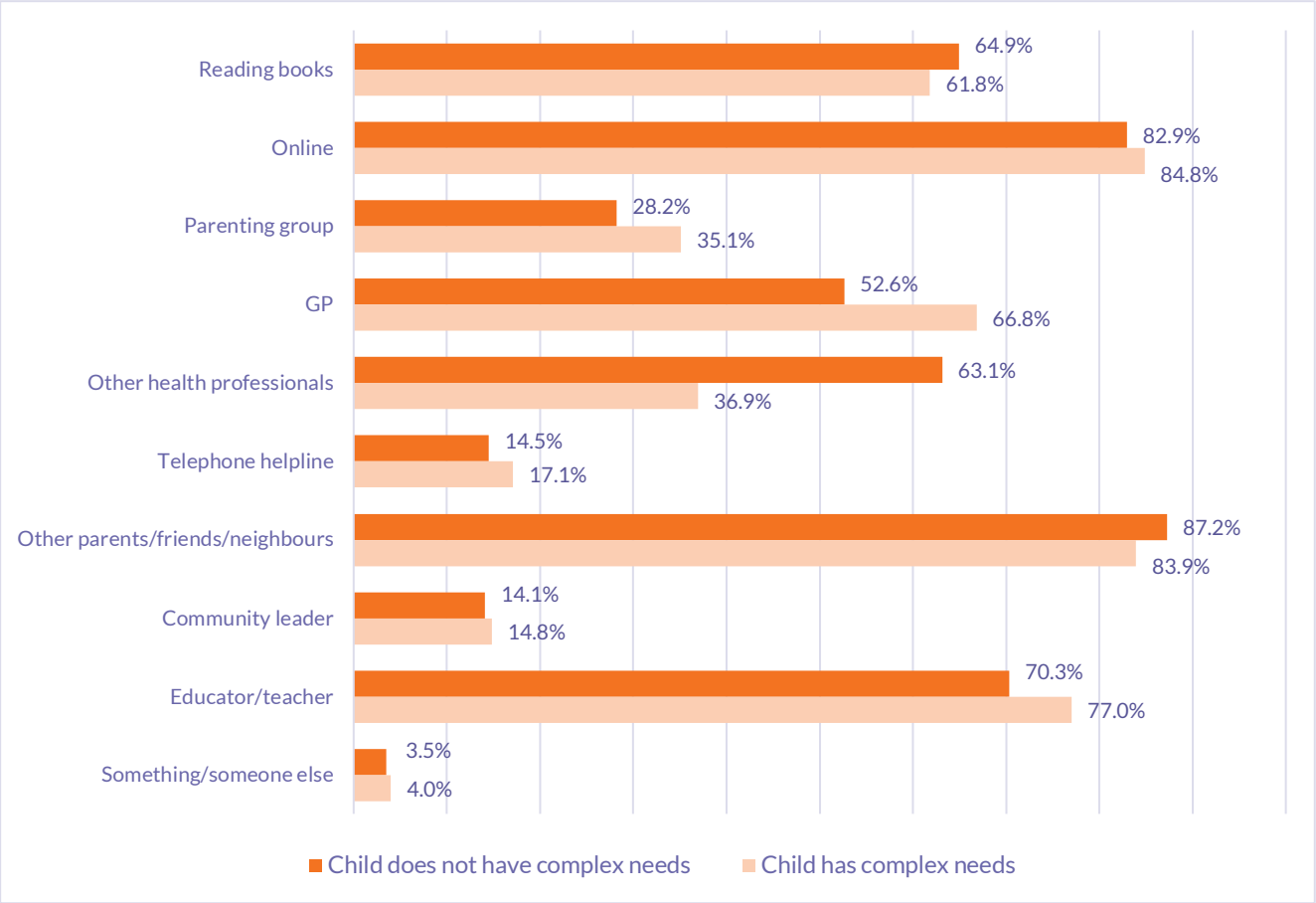

Figure 107. Sources of parenting information children accessed, by child with complex needs (population weighted data).

A larger proportion of parents living in more disadvantaged areas reported having accessed parenting information from a GP compared to those in less disadvantaged areas, $\chi^2(4) = 28.903$, $p < .001$ (see Table 44). There was no such effect observed in 2016.

In 2016 a smaller proportion of parents living in more *disadvantaged areas* reported having accessed parenting information from books, but this was not the case in 2019, where no difference between socio-economic areas was detected in terms of accessing information from books.

There were no other significant differences in reported access to parenting information across socio-economic areas.

Table 44. Proportion of parents who reported accessing parenting information from a GP across IRSD quintile ranks, *N* (%) (population weighted data).

	Index of Relative Socio-Economic Disadvantage (IRSD) quintile					
	1	2	3	4	5	Total
GP	173 (61.8%)	266 (63.8%)	317 (59.8%)	360 (54.9%)	346 (49.6%)	1462

Reasons for not participating in parenting group or seminar

A new item introduced in 2019 asked parents to indicate whether they had not participated in a parent education group or seminar and, if not, why this was the case.

In total, 807 (31%, unweighted data) parents said they had participated in a parenting group or seminar. Using the weighted data, this shows that 782 parents had participated in a parenting group.

Of the 1814 parents (weighted sample) who had not participated in a parenting group, 42% said they hadn't because they did not need help, 16% because the group or seminar format were not suitable for them, and 19% had no time to participate (see Table 45). A quarter of these parents said they were unaware of such groups/seminars, suggesting a need for greater promotion of the existence of such offerings in the community. This conclusion is supported by the other reasons parents provided for not attending parenting groups or seminars: 5% cited lack of information regarding availability or location and 6% noted they were not available where they lived.

Table 45. Reasons why parents had not attended a parenting group or seminar *N* (%) (population weighted data).

Reason	Proportion of those (n=1814) who had not attended a group or seminar
I didn't know about them	455 (25.1%)
Not available where I live	116 (6.4%)
Not comfortable asking/receiving help for parenting	42 (2.3%)
I don't need help	756 (41.7%)
Groups/seminars not suitable for me	285 (15.7%)
Not convenient time/location	148 (8.1%)
No time to participate	349 (19.3%)
Cost	9 (2.7%)
I have previous parenting experience	11 (3.1%)
I'm a professional in the child field	24 (6.9%)
Partner went instead	14 (4.2%)
Sought/seeking advice from other supports, professionals or websites	43 (12.6%)
Lack of information regarding availability or location	18 (5.4%)
Not interested	37 (11%)
I have attended in the past or will be attending	15 (4.3)
No reason	29 (7.8%)

Professional help-seeking

A further new item was introduced in 2019 asking parents whether they would seek help from a professional if they could not find the parenting information they needed. Responses were given on a scale of 1 to 5, where 1 = strongly disagree and 5 = strongly agree.

The majority (90%) agreed or strongly agreed that they would seek help from a professional in such circumstances (see Figure 108).

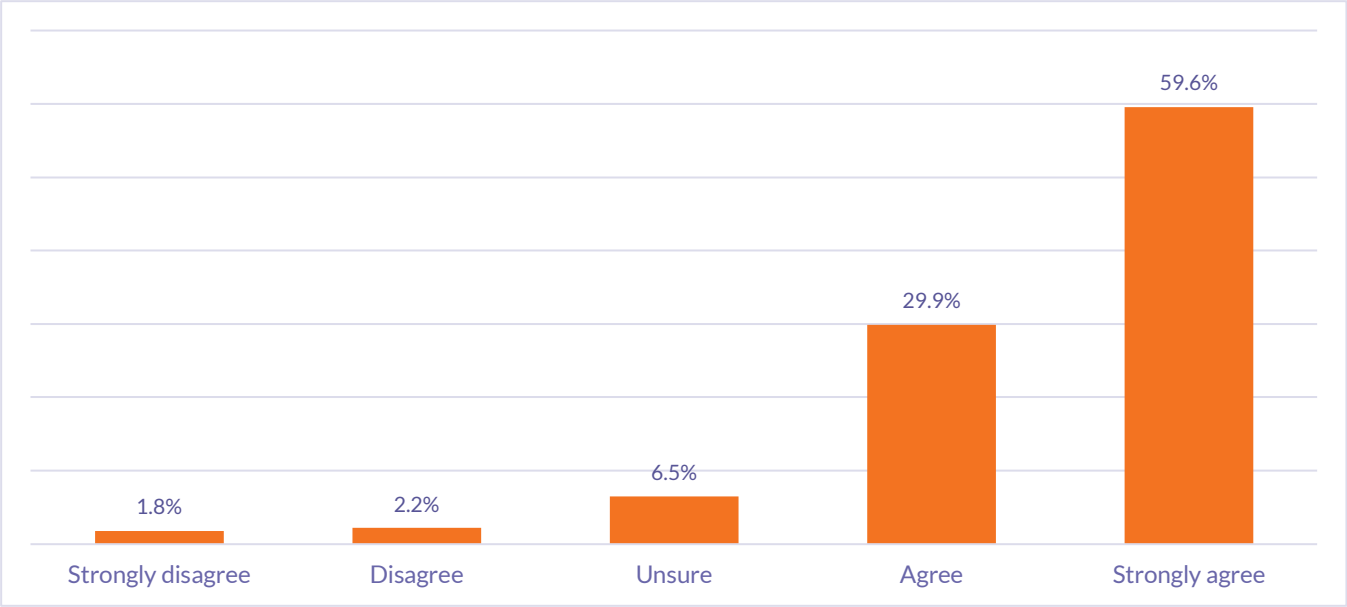

Figure 108. Proportion of total sample who would seek professional help for their parenting if they couldn't find it themselves (population weighted data).

Mothers were more likely to seek professional help than ***fathers***, $F(1,2593) = 48.650$, $p<.001$ (see Figure 109 and Figure 110).

There were no significant differences on this item for *child age groups*, *socio-economic areas*, for *metropolitan versus regional areas* or for *parents of children with or without complex needs*.

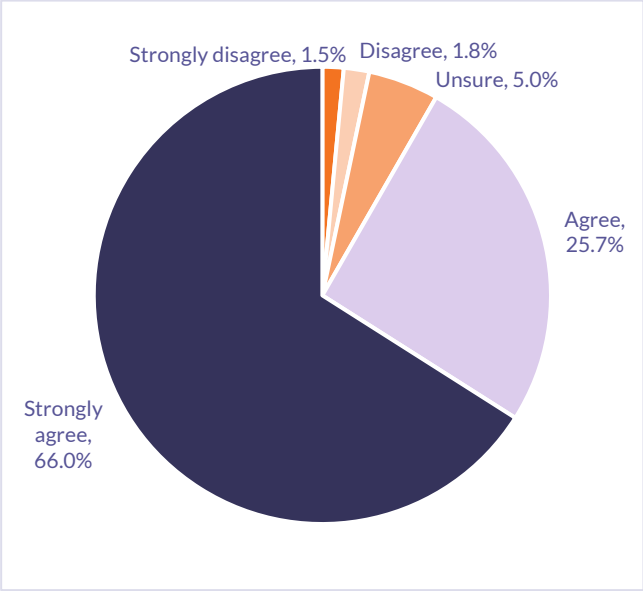

Figure 109. Proportion of mothers who would seek professional help for their parenting if they couldn't find it themselves (population weighted data).

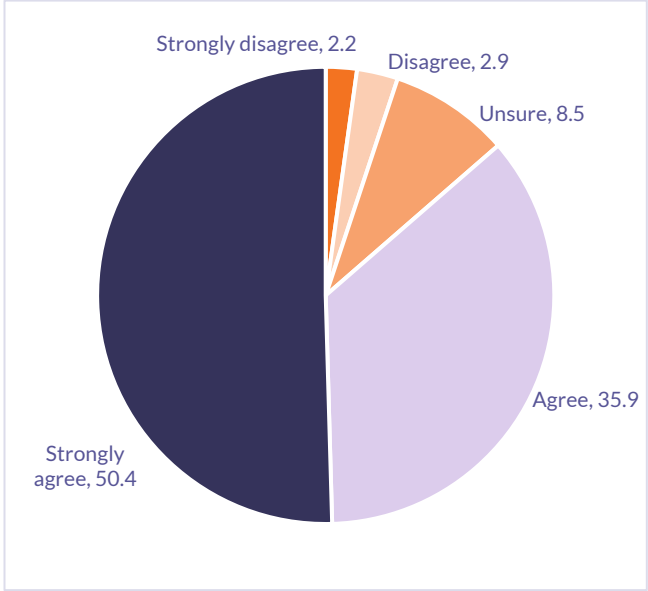

Figure 110. Proportion of fathers who would seek professional help for their parenting if they couldn't find it themselves (population weighted data).

Knowing where to get parenting help

A further new item introduced in 2019 asked whether parents knew where to get help from a professional for their parenting if they needed it. Responses were given on a scale of 1 to 5, where 1 = strongly disagree and 5 = strongly agree.

Most (84%) agreed or strongly agreed they knew where to get professional parenting help if needed (see Figure 111), although 6% did not and 9% were 'unsure', meaning 15% of parents were potentially unaware of where to go for parenting information or advice.

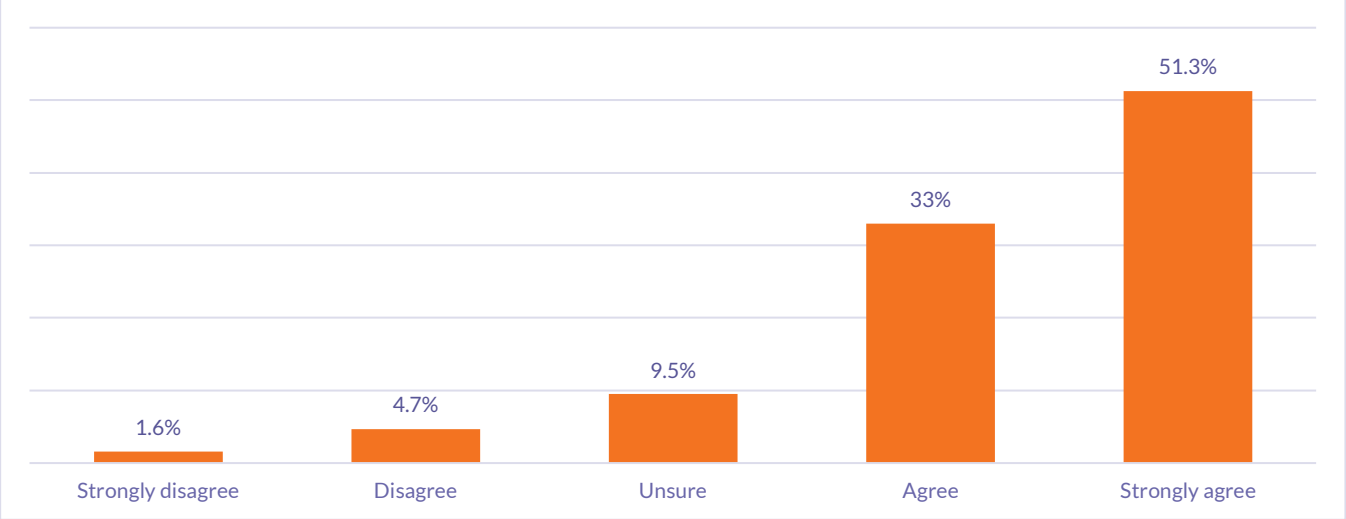

Figure 111. Proportion of total sample who knew where to get professional help for their parenting if needed (population weighted data).

A greater proportion of ***mothers*** agreed that they knew where to seek professional help than ***fathers***, $F(1,2593) = 48.987$, $p<.001$ (see Figure 112 and Figure 113).

There were no significant differences on this item by *child age group*, *socio-economic areas*, *metropolitan versus regional areas* or for *parents of children with or without complex needs*.

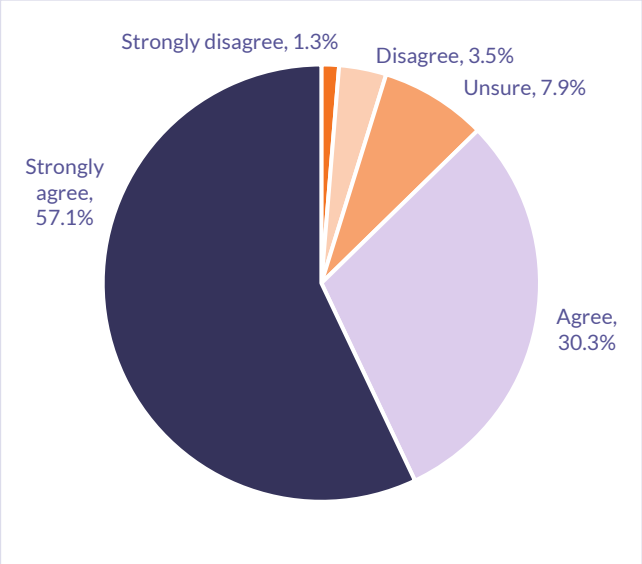

Figure 112. Proportion of mothers who knew where to get professional help for their parenting if needed (population weighted data).

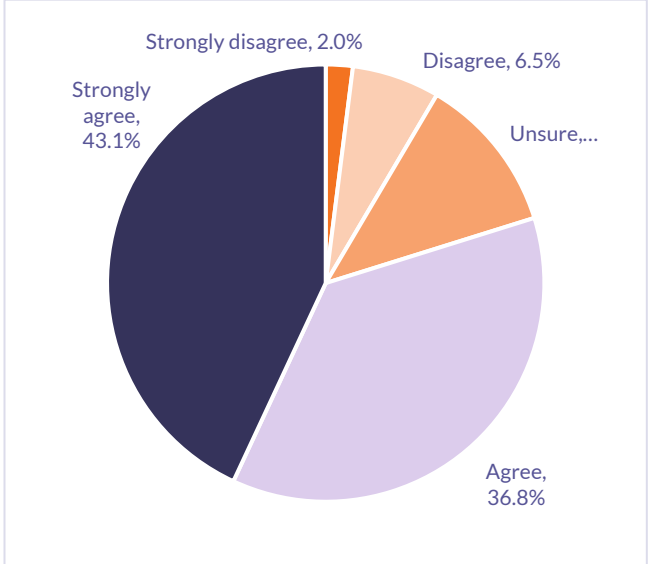

Figure 113. Proportion of fathers who knew where to get professional help for their parenting if needed (population weighted data).

WHAT ARE PARENTS' EXPERIENCES OF HELP RECEIVED?

Parents who indicated they had accessed help from a professional (GP, other health professional, parenting group or seminar, telephone helpline, or education staff) were asked to respond to three items about their interactions with those professionals. These items asked parents to rate the extent to which they agreed with the following statements:

- I was satisfied with the help offered
- I felt like the professional valued my ideas and opinions about my child
- I felt judged, blamed or criticised in my interactions with this/these professional/s

Each item was rated on a scale from, 1 (strongly disagree) to 5 (strongly agree), with 3 being 'mixed feelings'.

This series of questions was presented differently in 2016, when parents were asked about their satisfaction, feeling valued, and feelings of being judged, blamed or criticised for each of three different categories of professional – their children's teachers or educators, general practitioners and mental health or behavioural specialists. In 2019 we grouped all these professionals together.

Satisfaction with help offered

A total of 2,025 parents (78%) indicated they had sought help from at least one professional. Over three quarters (77%) of these parents agreed or strongly agreed that they were satisfied with the help offered. While only 4% disagreed, close to one in five (19%) who had sought professional help had mixed feelings about their satisfaction with the help offered.

There were no significant differences in the degree to which parents agreed they were satisfied with the help they received for *mothers versus fathers*, *child age groups*, *metropolitan vs. regional areas*, *socio-economic area of residence or child* complex needs.

Feeling valued when help-seeking

Again, over three quarters (77%) of parents who had accessed professional help agreed or strongly agreed that their ideas or opinions were valued. Five percent disagreed, and close to one in five (18%) who had sought professional help had mixed feelings about whether their ideas/opinions were valued by professionals.

Comparisons between *mothers and fathers*, *child age groups*, across *socio-economic areas*, *regional/metropolitan areas and children with and without* complex needs, showed no statistically significant differences in the proportion of parents indicating that their ideas or opinions were valued by professionals.

Feeling judged, blamed and criticised

The majority (79%) of parents who had accessed professional help disagreed or strongly disagreed that they had felt judged, blamed or criticised when seeking help. Nevertheless, one in ten (10%) did feel judged, blamed or criticised and another one in ten (11%) had mixed feelings.

There were no statistically significant differences in parents' reports of feeling judged, blamed or criticised for *mothers versus fathers*, across *child age groups*, *socio-economic areas*, *regional/metropolitan areas* and for *child's* complex needs.

Although it is not possible to directly compare these results with 2016 data (as the questions in 2016 pertained to different groups of professionals), it is worth noting that the 2019 results are slightly lower than in 2016, when:

- 80% (compared to 77% in 2019) or more parents agreed or strongly agreed they were satisfied with help offered
- at least 80% (compared to 77% in 2019) felt their ideas and opinions were valued, and
- at least 82% (compared to 79% in 2019) disagreed that they'd been judged, blamed or criticised.

PARTICIPATION IN PARENT SUPPORT GROUPS

Parents were asked if they were currently attending or had ever attended the following types of parent support groups:

- Maternal Child Health: First Time Parents Group
- Community Playgroup
- Supported Playgroup
- Another parent support group (e.g., MyTime).

When parents stated they had attended one of the above options, they were asked if they have ever attended it with their partner.

These results are not comparable to 2016 data, as the questions asked at that time asked parents if either they or their partner had attended such groups.

Results indicated that 55% of parents reported they had attended a Maternal and Child Health (MCH) or First-Time Parent Group, 47% had attended a Community Playgroup, 17% a Supported Playgroup, and 11% another type of parent support group. Over a quarter (27%) of parents had never attended any of these groups.

A significantly greater proportion of ***mothers than fathers*** reported ever having participated in First Time Parents Groups, χ^2 (1) = 209.327, p<.001, and Community Playgroups, χ^2 (1) = 24.557, p<.001 (see Figure 114). Parent gender differences for having attended Supported Playgroups or other types pf parent group approached but did not quite meet statistical significance at p<.001.

Comparing the percentages for mothers and fathers in Figure 114, in some cases (e.g., 'another type of parent group) the values do not differ between mothers and fathers. This may reflect widely held beliefs that fathers today are more engaged in parenting than their fathers' generation, or that parent support groups are increasing more accessible to and valued by men. However, it is also possible that these data reflect a socially desirable rate of father's attendance at parent groups. This possibility has been endorsed by a number of experts connected to the *Parenting Today in Victoria* study, who question the accuracy of some of this self-reported data.

For instance, 38% of fathers reported having attended a MCH First-Time Parent Group, and (although not directly comparable due to phrasing differences between the two waves) in 2016 41% of fathers were reported to have attended a MCH First Time Parents Group. Reactions from *Parenting Today in Victoria* stakeholders in 2016 were that 41% of fathers having had attended a First Time Parents Group seemed high. It is possible that in both 2016 and 2019 social desirability has played a role in responses to this item, with parents possibly overstating their actual attendance at such groups, or misunderstanding the nature/type of group they were attending (i.e., a parent 'get-together' may not be an official MCH First Time Parents Group).

Nevertheless, there still remains a discrepancy between mothers and fathers in attendance at parent support and parenting education groups, which is reflected in the significant difference between mothers and fathers who had never attended any of the types of parent group mentioned in the survey, $\chi^2(1)=138.177$, p<.001.

There were no statistically significant differences across ***child age groups*** in the proportion of parents who reported attending an MCH First-Time Parent Group, a Supported Playgroup or another parent group. However, parents were significantly more likely to say they'd attended a Community Playgroup as child age increased, χ^2 (1) = 34.691, p<.001 (see Figure 115).

There were no statistically significant differences in participation in any types of parent group for *socio-economic areas* or between parents living in *regional versus metropolitan* areas, although the difference between socio-economic areas approached significance (p<.01) for MCH First-Time Parent Groups.

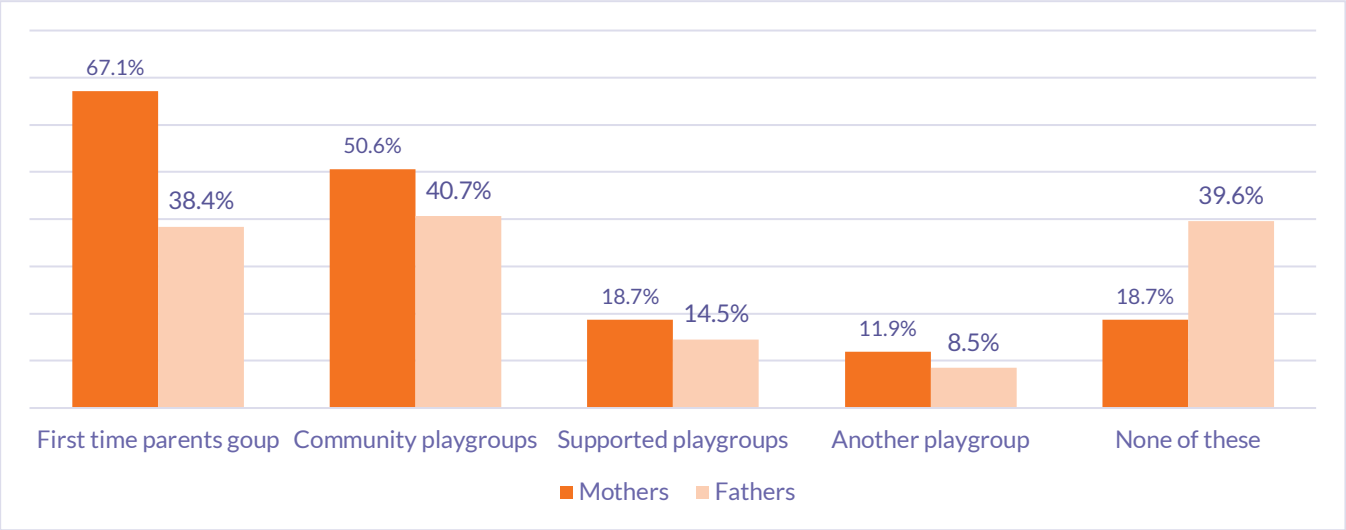

Figure 114. Percentage of mothers and fathers who had participated in a First Time Parents Group or Community Playgroup (population weighted data).

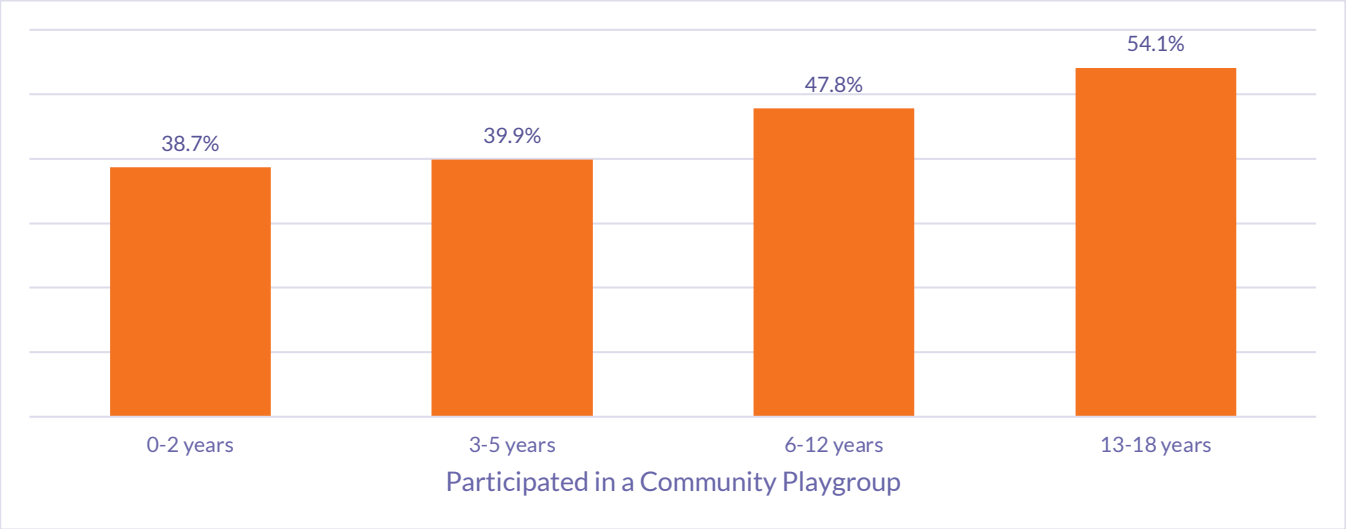

Figure 115. Percentage of parents in each child age group who had participated in a Community Playgroup (population weighted data).

A significantly higher proportion of ***parents of children with complex needs*** reported attending 'another' parent group, $\chi^2(1) = 16.106$, $p<.001$. Fourteen percent of parents whose child had complex needs said they'd attended 'another' type of parent group, compared to 9% of other parents. There were no additional significant differences according to whether or not the child had complex needs, although ratings for 'none of these' was just non-significant ($p<.01$), with a lower proportion of parents of children with complex needs saying they had never attended a parent group.

Attendance at parent groups with a partner

In 2019, we asked respondents to indicate whether they themselves had attended a parent group and we also introduced a follow-up question: 'Have you ever attended one of these groups with your partner?'. The results are presented in Table 46 and show, for respondents who had attended a parent group, 35-43% of partners had also attended that group at least once. This means that more than half of parents who do attend these groups do so alone (without their partner).

Table 46. Partners also attending each type of parent group, for respondents who said they had attended a particular type of group (population weighted data).

Group type	*N* (%)
MCH First Time Parents Group	609 (42.5%)
Community Playgroup	476 (39.4%)
Supported Playgroup	160 (36.3%)
Another parent group	97 (35.5%)

WHAT IS PARENTS' AWARENESS AND USE OF THE RAISING CHILDREN NETWORK?

The Raising Children Network – raisingchildren.net.au - is a trusted, evidence-based website with resources for parents, carers and professionals on raising children from pregnancy through to the teenage years. It is funded by the Australian government and is an initiative of the Parenting Research Centre and the Murdoch Children's Research Institute.

The Raising Children Network (RCN) has been operating for 13 years. Parents were asked about their knowledge and use of this resource.

The findings indicate that 26% of parents have used the RCN website, which is higher than the 18% who said so in 2016. A further 11% have heard of RCN but never used it (14% in 2016).

There is a significant ***parent gender*** effect associated with awareness of RCN, $\chi 2(2) = 306.114$, p<.001. For instance, a greater proportion of mothers (37%), compared to fathers (10%), reported having used the RCN website, see Table 47. While these parent gender differences reflect differences observed in 2016, they do show there have been increases in the percentage of both mothers and fathers who have used RCN (26% and 7% respectively in 2016).

Table 47. Parent awareness of the Raising Children Network by mothers and fathers, *N* (%) (population weighted data)

	Mothers	Fathers
Yes, have used RCN website	562 (36.8%)	103 (9.6%)
Heard of but never used	210 (13.7%)	86 (8.1%)
No, never heard of	756 (49.5%)	879 (82.3%)

There is also a significant ***child age*** effect associated with awareness of RCN, $\chi^2(6) = 196.163$, $p<.001$. Parents of younger children are more likely to say they had heard of and used the RCN website compared to parents of older children, see Table 48. These trends are similar to those observed in 2016, although the proportions of parents in each child age group who had used RCN is higher in 2019. This is true even for parents of teenagers: only 5% of parents of teens had used RCN in 2016, but this had increased to 11% in 2019. Despite this apparent improvement in awareness raising about the value of RCN for older children, it is still the case that more than four out of five parents of teens had not heard of RCN in 2019.

Table 48. Parent awareness of the Raising Children Network by child age groups, *N* (%) (population weighted data)

	Child Age			
	0-2years	3-5years	6-12years	13-18years
Yes, have used RCN website	183 (44.3%)	159 (33.1%)	251 (24.2%)	73 (11.0%)
Heard of but never used	48 (11.6%)	63 (13.1%)	131 (12.6%)	54 (8.1%)
No, never heard of	182 (44.1%)	259 (53.8%)	656 (63.2%)	539 (80.9%)

There were no differences in awareness of RCN according to whether parents lived in *metropolitan or regional areas*, across different *socio-economic areas of disadvantage*, or by whether or not their *child had* complex needs.

Of the 961 parents who reported having heard of or used the RCN website, 45% (38% in 2016) heard about it from their Maternal and Child Health nurses, 15% (14% in 2016) from a Google search, 9% (also 9% in 2016) from a health professional other than a Maternal and Child Health nurse, and 6% (9% in 2016) from friends or other parents. Twenty-nine percent (also 29% in 2016) heard about RCN from an 'other' source which included the television, Facebook or social media, through the school or school newsletter, or at the hospital after the birth of their child. Figure 116 summarises these results.

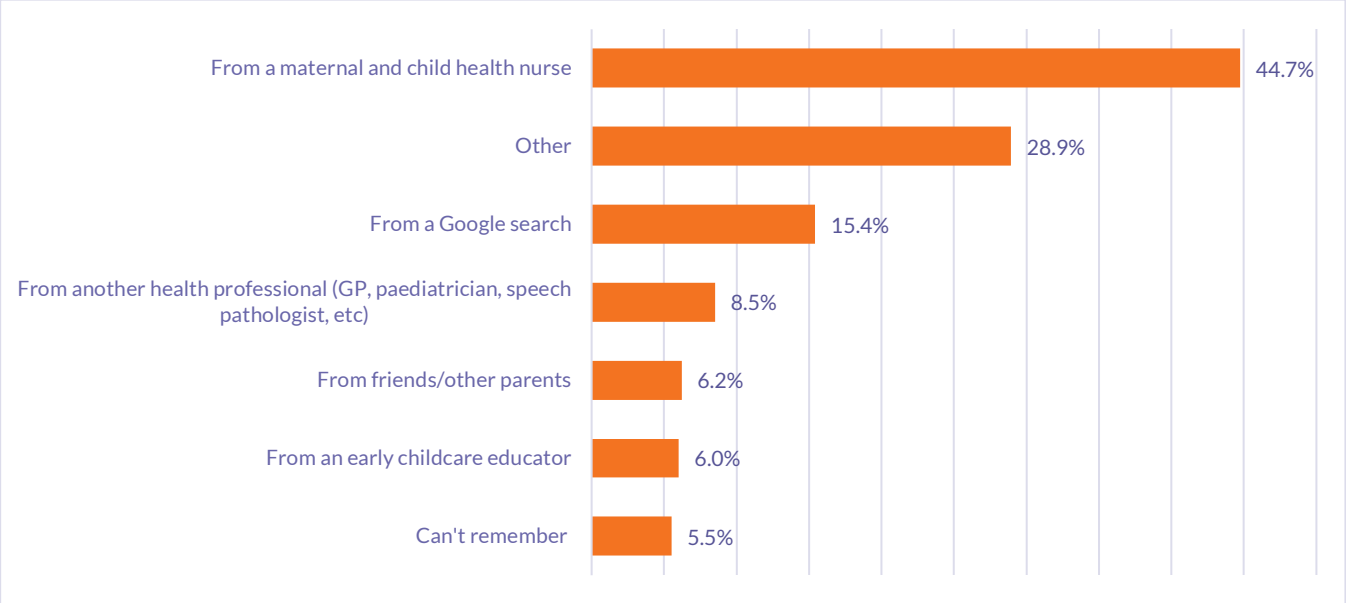

Figure 116. Percentage responses to the item 'How did you hear about the Raising Children Network?' (population weighted data).

Concluding statement

The *Parenting Today in Victoria* survey of 2016 provided a valuable measure of the experiences of Victorian parents. The administration of this survey with a new cohort of parents in 2019 allows ongoing understanding of contemporary parenting experiences, and offers new insights into the experiences of parents in 2019. While the conclusions highlighted below, regarding differences between 2016 and 2019, have not been subjected to statistical analysis, they provide an indication of emerging trends and point to areas for further investigation and continued monitoring.

As in 2016, mothers and fathers in 2019 are generally faring well. Most (around nine in ten) are confident in their parenting, have someone they can turn to for advice about childrearing and report positive interactions with their children's teachers or educators. New questions introduced in 2019 suggest most parents have a quality of life that compares closely to Australian norms, seven in ten parents felt their community was safe for children, and over half regularly do something for themselves to relax and re-energise.

Furthermore, most parents in 2019 report having overall positive parent-child interactions. Eight in ten often used positive reinforcement for good child behaviour and seven in ten never smacked their children. The frequency of preschool children (3-5-year olds) being read to is slightly higher than in 2016, with 60% being read to every day, compared to 54% in 2016.

Nevertheless, the 2019 survey does indicate some concerning trends. For instance, nearly half of parents (44%) said their child's sleep was a problem for them, which is higher than in 2016 (36%). Furthermore, many parents continue to express challenges in their own parenting – the prevalence of impatience and being overly critical with their children increased between 2016 and 2019. In particular, in 2019 parents of 6-12 years olds report higher rates of these behaviours than other parents.

Although the rates of smacking, rewarding, praising and talking with children about problems remained stable from 2016, an increasing proportion of parents also reported dissatisfaction or mixed feelings about the amount of time they can give their children – half of all parents in 2019 compared to 37% in 2016.

In relation to the topical theme of children using electronic devices, such as mobile phones and tablets, an increasing proportion of parents believe their children spend too much time on these devices (48% in 2019, 42% in 2016). Across all child age groups, the average time per weekday children reportedly spent on electronic devices was two hours and the average for adolescents was four hours. More than half of parents thought they used their mobile phones or other devices too much and this was especially the case for parents of younger children. Only around a third of parents thought that their child may be concerned about their parents' use of devices, but when compared to parents of older children, parents of younger children were more concerned about the impact of their device use on their children and they thought that their children were more concerned about their parents' device use.

Although most parents saw homework as important, and most felt it was their job to assist children with homework, a quarter of parents reported this was stressful for them, with rates of stress increasing as child age increased.

Most parents (70%) were not concerned about what others thought of their parenting, yet over a third felt they were often too hard on themselves about their own parenting. Many were worried about their children's future, and almost a quarter found parenting to be very or extremely frustrating.

Comparing results from 2016 with 2019 it appears that parents as a population are reporting poorer mental health over time. While most parents in 2019 (63%) scored in the low range of current psychological distress, close to a third (31%) scored in the moderate range and 6% had clinically concerning levels of distress. In 2016 only 4% were in the clinical range, 24% were in the moderate range and 72% were in the low distress range. Furthermore, rates of self-reported symptoms of depression and anxiety since becoming a parent were almost 50% higher than in 2016. Acknowledging that two timepoints provide limited evidence of a trend, it will be important to continue to monitor the mental health of parents in our community.

In the face of concerning levels of distress among parents, the evidence indicates that many parents are not allowing themselves much in the way of self-care, and many reported difficulties in their employment situation that prevented them from meeting their parenting responsibilities. Time limitations and fatigue were a common concern for many, especially for mothers and for parents of pre-school children.

Parents of children with complex needs reported particular challenges – poorer parental physical and mental health, poorer quality of life, and a greater proportion had children with sleep problems. Fewer of these parents saw themselves as happier than other parents, they were more likely to be worried about their children's future, they had higher rates of homework-related stress, and reported more child behaviour problems.

Parents of adolescents also reported particular challenges – more frustration and less reward and enjoyment in parenting, more homework-related stress, poorer communications with their children's teachers and educators, and less success in managing their children's electronic device use.

Parents of 6-12 year olds reported more challenges in their interactions with their children – more child behaviour problems, more criticism (of parent to child), more yelling and arguing, more impatience, and a greater desire to be more consistent in their parenting, compared to parents of younger and older children.

Despite ongoing public messaging about the importance of what parents do for children in the preschool years, a lower proportion of parents in 2019 felt that what they did at home with their preschool child was extremely important for their children's learning (80% in 2016, 75% in 2019).

There were other areas in the 2019 survey where parents' perceptions about parenting differed from experts. Over half of Victoria's parents felt parenting came naturally, and over half felt it was determined by how a person was parented themselves. Close to a quarter of parents thought there was no role for governments in supporting families with parenting.

These opinions diverge in interesting ways from expert views[3], which are founded on evidence rather than myth or assumption. Views of parents in *Parenting Today in Victoria* align fairly closely with what the general public have been found to believe[4]. Some of the disparities between what experts and parents believe about parenting point to opportunities for further policy attention.

Despite some of the concerns raised by the survey findings, there are important signs that parents in Victoria are feeling supported and capable, and that they know where to go for help if they need it. The use of the internet for parenting information is on the rise, and nine in ten parents said they would seek help for their parenting from a professional if they couldn't find help elsewhere.

Three in every four parents were satisfied with the professional help they've received. Further interrogation of who is seeking help, where they are seeking it from, and who may not be seeking help for their parenting could provide deeper insights into help-seeking. However, collectively these findings point to a society that embraces help-seeking for parenting as a normal and acceptable activity.

In sum, the findings accumulated from the analysis of 2016 and 2019 survey data provide valuable insights into the views and circumstances of Victorian parents. More in-depth consideration of these data over the coming years will help build the knowledge about important interactions between family characteristics, and parenting experiences, and will continue to guide support provision and policy for parents in this state.

3 For expert and general public views on parenting, see the Frameworks Institute's (2016) report on perceptions of parenting (https://www.parentingrc.org.au/publications/perceptions/.
4 ibid.

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Appendix 1. Survey items

PARENTING TODAY IN VICTORIA SURVEY 2019

Item	Response options	Source
Screening and quota questions		
What is your gender…? [ASK ONLY IF NECESSARY]	Male 1 Female 2 Other 97	NA[a]
Are you at least 16 years old?	Yes 1 No 2 Refused 97	NA
What is the postcode where you live?	☐☐☐☐	NA
How many children in total (biological, adopted, fostered or step) have you helped to raise?	Number:	Devised by team
How many children (0-18 years) are currently living in your household 4 days a week or more? How many children (0-18 years) are currently living in your household less than 4 days per week, but at least 4 days per month?	Record number Record number	Devised by team
What are the ages and genders of all of these children? Of the children who live with you full time, please select the child whose last birthday is closest to today's date. It's important to keep this child in mind for all of the questions I ask you. OR Thinking about the children you spend the most time with, of these children, please select the child whose last birthday is closest to today's date. It's important to keep this child in mind for all of the questions I ask you. OR For the rest of the survey, I would like you to keep this child in mind. *Note, if the child is of multiple birth (e.g. twin), the parent/carer will be asked to choose one of the children to focus on for the survey Interviewer to select qualifying child	Child 1 (eldest) Child 2 (next) Child 3 Etc CREATE SEPARATE VARIABLES FOR AGE AND GENDER OF EACH CHILD Include single response column for selection of focus child.	Devised by team
We would like to give this child a name for the rest of the interview, what name should I use? What name should we use to refer to this child?	Record name 1 Refused 97	NA
Family Context, structure and parenting roles		
What is your relationship with [child name]?	Biological Parent Foster Parent Stepparent Adoptive Parent Other Relative (please specify) Other (please specify) Grandparent	Devised by team
The following three questions will be about the person that <u>you</u> think of as the most significant other parent in the life of [name of target child]. For some people this person will be the child's biological parent, for other people it will be a partner who isn't the child's biological parent. For other people there won't be someone who they think of as their child's other parent.	Yes No	Devised by team

a. In your case, is there someone who you think of as being [target child's name] other parent? b. Yes or No. If No, go to Q5. If yes, ask b and What is the gender of this child's other parent? (note: if there is a biological parent AND a partner and the respondent wants clarification on which one to have in mind, questions should be answered with most significant other parent in mind)	Male Female Other: specify.....	
How often do you and this person agree on how to parent [child name]?	All to the time Most of the time Occasionally Rarely Never	Devised by team
How often do you feel that this person understands and is supporting you as a parent?	All to the time Most of the time Occasionally Rarely Never	LSAC[b]
On a scale of 1 (Not at all fair) to 5 (Very fair), how fair does the current sharing of child care and other parenting tasks between you and this person feel?	Not at all Fair ... ... Very fair	Wynter, et al (2017)
Still thinking about the child's most significant other parent, is this person living with you?	Yes - all of the time Yes - most of the time Yes – some of the time No – not at all	Devised by team
[If yes to above] Is this child's other parent their biological parent?	1. Yes 2. No	Devised by team
Are you living with a partner who is not the person you think of as this child's other parent?	1. Yes 2. No	Devised by team
[If yes to above] What is your partner's gender?	1. Male 2. Female 97. Other: specify.....	Devised by team
About your child		
Can I ask for [child name] month and year of birth?	mm/yyyy 99 refused	Devised by team
In general, would you rate [child name]'s physical health as excellent, very good, good, fair or poor?	Excellent Very Good Good Fair Poor Unsure	Devised by team
Does [child name] have any chronic health or medical conditions that have lasted, or are likely to last, for 6 months or more?	No Epilepsy or seizure disorders Diabetes Asthma/breathing problems Allergies/anaphylaxis Eczema/skin conditions Ear, nose, or throat problems (e.g. infections) Gastro-intestinal problems Frequent headaches/migraines Other (specify)	Devised by team (based loosely on ICD-11[c] categories)
Apart from [child name]'s do you have any other children with chronic health or medical conditions?	No Yes Unsure	Devised by team

To what extent do you agree that this condition or difficulty has limited your day to day activities or your ability to earn an income?	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	
Does [child name] have any sensory impairments or learning difficulties that have lasted, or are likely to last, for 6 months or more?	No Sensory disability (vision, hearing) Learning difficulties (dyslexia, dyspraxia, speech/language difficulty, slow progress) Developmental delay Intellectual disability Other (specify)	Devised by team (based loosely on ICD-11 categories)
Apart from [focus child name], do you have any other children with sensory impairments or learning difficulties?	No Yes Unsure	Devised by team
To what extent do you agree that this condition or difficulty has limited your day to day activities or your ability to earn an income?	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	
Does [child name] have any behavioural or emotional difficulties that have lasted, or are likely to last, for 6 months or more?	No Behavioural problems (e.g. ADHD, conduct disorder) Autism spectrum disorder (including what was known as Asperger's syndrome) Depression Anxiety Other (specify)	Devised by team (based loosely on ICD-11 categories)
Apart from [focus child name], do you have any other children with behavioural or emotional difficulties?	No Yes Unsure	Devised by team
To what extent do you agree that this condition or difficulty has limited your day to day activities or your ability to earn an income?	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
Thinking about your child's temperament, compared to other children, do you think your child is ...[Note: if parents doesn't understand term 'temperament' clarify its about your child's character or personality]	Very easy Easy Average Difficult Very difficult Cannot say	ATP[d]
To what extent do you agree or disagree with the following statement...I find my [child name]s behaviour difficult to manage	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
How much of a problem are [child name]s sleeping pattern or habits for you?	A large problem A moderate problem A small problem No problem at all Not sure/Don't know	LSAC
[If child is over 5 years] On a typical weeknight, how many hours of sleep does your child have? [If child is under 5] How many hours of sleep in 24 hours does your child typically have?	Record number	Devised by team
[If answered moderate or large problem to sleep item above:] **Why is your child's sleep a problem for you? Check yes/no for all**	Hard to get child to bed at bedtime Child goes to bed too late Takes a long time to fall asleep Nightmare/night terrors Hard to get child out of bed in morning	Devised by team

	Wakes repeatedly through night Wants to sleep in my room Watching TV Using electronic devices Bedwetting Other (specify)	
Learning and Education		
For parents of all ages of children: **How important do you think [child name] experiences in formal early learning settings (that is, childcare & kindergarten) were/are for their future success?** **[Note: use were/are depending on child age - <7 years = are; 7yrs+ = were] ('future success' is whatever a parent wants to define it as.)**	Not at all important Slightly important Somewhat important Moderately important Extremely important	Devised by team
For parents of all ages of children: **How important do you feel that what you do/did with [child name] in the years before primary school will affect [his/her] later development? (If clarity is required by what is meant by 'what you do', might refer to activities like reading, playing etc.) Note: use do/did depending on child age - <7 years = are; 7yrs+ = were]**	Not at all important Slightly important Somewhat important Moderately important Extremely important	Devised by team
Is [child name] in day care/kinder/primary/high school/ other (TAFE, working full time)? **(ask depending on age. 0-6 day care, 3-6 kinder, or combo day care and kinder, 0-6, no day care or kinder, 6-13primary, 12-18 high, 15-18, high school, TAFE, apprenticeship, working full time)**	1. No day care or kinder 2. Day care 3. Kinder 4. A combination of day care and kinder 5. Primary school 6. High school 7. Apprenticeship 8. TAFE 9. Working full time 10. Other (Pre Kinder aged) Specify 11. Other (Kinder aged) Specify 12. Other (Primary school aged) Specify 13. Other (high school aged) Specify 14. Seeking employment 99 refused terminate	Devised by team
How many days a week does your child attend {ECEC, school etc}	Record number	Devised by team
[If child attends kinder/ECEC] What type of kinder or day care does your child attend? (offer the response options if needed) **[If child attends school] What type of school does your child attend? (offer the response options if needed)**	Government (state/public) Non-Government (independent/ religious) NA	Education State Item
In the last week, on how many days did you or another member of your family, spend some time reading to [child name]?	0 days 1 day 2 days 3 days 4 days 5 days 6 days 7 days	Australian Bureau of Statistics (ABS)
In a typical week, on how many days does [child name] do formal activities outside of school hours? (e.g. swimming lessons, soccer, music lessons, tutoring)	0 days 1 day 2 days 3 days 4 days 5 days	Devised by team

	6 days 7 days	
On a scale of 1-5 where 1 is strongly disagree and 5 is strongly agree, How strongly do you agree with the following statement? **I feel that I can participate in decisions that affect my child at [ECEC, kinder, school etc]:** **('decisions' might be around needing extra help, disciplinary measures, selecting the child's teacher. For high school kids, choosing subjects might be a decision)**	Strongly disagree Disagree Mixed feelings Agree Strongly agree	Kids Matter Survey/ Devised by team - Item 1
I am satisfied with the way the [as relevant] early childcare, Kinder, school communicates with me	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Kids Matter Survey/ Devised by team - Item 2
I feel welcome at my child's [as relevant] Early childcare centre, Kinder, School	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
I am comfortable talking to my child's [as relevant] Early childcare staff, Teachers, about my child	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Kids Matter Survey/ Devised by team - Item 3
Homework other than reading is important for my child's learning	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
Other than reading, the homework given to my child is....	Far too much A bit too much About right A bit too little Far too little	Devised by team
It's my job to help my child with their homework	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
Helping my child with their homework is stressful for me	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
Experience of being a parent		
Using the same scale of 1-5 where 1 is strongly disagree and 5 is strongly agree, How strongly do you agree with the following statements? **I have confidence in myself as a parent**	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Me as a Parent Scale (MaaPS) -Item 3
I have the skills necessary to be a good parent to my child	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	MaaPS -Item 11
I know I am doing a good job as a parent	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	MaaPS -Item 12

I can stay focused on the things I need to do as a parent even when I've had an upsetting experience	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	MaaPS -Item 14
I know how to help my child 'bounce back' from difficulties or adversity	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
I worry about what others think of my parenting	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
I am often hard on myself for not being the kind of parent I really want to be	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
On a scale of 1-5 where 1 is not at all and 5 is extremely, to what extent do the following statements describe your experience as a parent in the last 6 weeks? **Parenting is frustrating**	Not at all Slightly Moderately Very Extremely	Devised by team
Parenting is enjoyable	Not at all Slightly Moderately Very Extremely	Devised by team
Parenting is demanding	Not at all Slightly Moderately Very Extremely	Adapted from Sanders et al 1999
Parenting is rewarding	Not at all Slightly Moderately Very Extremely	Adapted from Sanders et al 1999
Beliefs about parenting		
Parenting comes naturally	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
Parenting can be learned	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
My generation of parents is doing a better job than my parents' generation did	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
The way you raise your children is determined by how you were parented as a child	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team

Parenting advice is not helpful because every child is so different	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
Governments should help families with their parenting	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
Approach to parenting		
For the next four items, I am going to read out a statement and I am asking you to say how much you agree or disagree with the item. **Keep in mind [same child's name] when answering these questions.** **I wish I did not become impatient so quickly with my child**	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Parent Performance -Item 1
I wish I were more consistent in my parenting behaviours	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Parent Performance -Item 3
Sometimes I feel I am too critical of my child	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Parent Performance -Item 4
I am satisfied with the amount of time I can give to my child	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Parent Performance -Item 10
For the next three items, I am going to read out a statement and I am asking you to say how true the statement is for you. **When my child behaves well, I reward them with praise/a treat/attention**	Not at all A little Quite a lot Very much	Parenting and Family Adjustment Scale -Item 6
I smack my child when they misbehave	Not at all A little Quite a lot Very much	Parenting and Family Adjustment Scale -Item 9
I argue with or yell at my child about their behaviour or attitude	Not at all A little Quite a lot Very much	Parenting and Family Adjustment Scale -Item 10
[for children in Primary school and below] I talk to my child about problems/issues that they might be dealing with (e.g. friendships, bullies, schoolwork) **[for children in High school to 18 years] I talk to my child about problems/issues that they might be dealing with (e.g. relationships, schoolwork, sexual health, body image, mental health drug use)**	Never Seldom Sometimes Often Always	Parental Communication
Parent Coping, wellbeing and support		
Using the scale of 1-5 where 1 is strongly disagree and 5 is strongly agree, How strongly do you agree with the following statements? **If I was having problems in my life, there is someone I trust that I could turn to for advice**	Strongly disagree Disagree Unsure Agree Strongly Agree	Devised by team

My family are the people I turn to first when I am looking for help and support in raising [child name]	Strongly disagree Disagree Unsure Agree Strongly Agree	Devised by team
Outside your family, when you need information and advice about raising [child name], which of the following sources of information have you used? **a) Reading books** **b) Accessing information online** **c) Participate in a parenting education group or seminar (e.g., Triple P, Tuning into Kids)** **d) In person with a GP** **e) In person with another type of health professional such as a speech pathologist, psychologist, family support worker** **f) Telephone help line** **g) Other parents/friends/neighbours** **h) Community leader such as an Elder or religious leader** **i) Early childcare staff or teacher/principal** **j) Something/someone else (please specific)**	Yes No	Devised by team
[If no to question as sub-item above about participation in a parent education group or seminar] Why have you not participated in a parent education group or seminar?	Multiple responses 1. I didn't know about them 2. Not available where I live 3. I don't feel comfortable asking for, and/or receiving help with parenting 4. I don't feel like I need help with parenting or child issues 5. I don't think parenting programs/seminars are suitable for me/my family 6. Programs/seminars are not on at convenient time/location 7. No time to participate 8. Other specify	Father Survey
To what extent do you agree with the following statements : **If I couldn't find the information I needed I would seek help from a professional (e.g, nurse, GP, teacher, psychologist)**	Strongly disagree Disagree Unsure Agree Strongly Agree	Devised by team
I know where to get help from a professional with parenting if I needed it	Strongly disagree Disagree Unsure Agree Strongly Agree	Devised by team
In your interactions with professionals how much do you agree or disagree with the following statements: **I was satisfied with the help offered**	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
I felt like the professional valued my ideas and opinions about [child name]	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
I felt judged, blamed or criticised in my interactions with this/these professional/s	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
Have you heard of or have you used the Raising Children Network website (raisingchildren.net.au)?	No, never heard of Heard of but never used	Devised by team

	Yes, have used RCN website	
How did you hear about the Raising Children Network? **INTERVIEWER NOTE: Wait for them to offer a response and only provide the options listed if they need a prompt**	From a google search From a maternal and child health nurse From another health professional (GP, paediatrician, speech pathologist etc.) From an early childcare educator From friends/other parents Can't remember Other (please specify)	Devised by team
Are you currently or have you personally ever regularly attended: **Interviewer Note: This does not include partner** **a. Maternal Child Health: First Time Parents Group** **b. Community Playgroup** **c. Supported Playgroup** **d. Another parent support group (e.g., MyTime)**	Yes No	Devised by team
For any of the above, where parent answered 'yes', ask Have you ever attended one of these groups with your partner?	Yes No	Devised by team
Since becoming a parent, have you had symptoms of any of the following? **a. Depression** **b. Anxiety** **c. Stress** **d. None of these** **These do not have to have been diagnosed; just the respondents own assessment is fine.**	For each: Yes No	Devised by team
Did this include postnatal depression?	Yes No	Devised by team
The following questions are about how you have been feeling during the past 30 days. **During the past 30 days, about how often did you feel... nervous**	All of the time Most of the time Some of the time A little of the time None of the time	K6
During the past 30 days, about how often did you feel... hopeless?	All of the time Most of the time Some of the time A little of the time None of the time	K6
During the past 30 days, about how often did you feel... restless or fidgety?	All of the time Most of the time Some of the time A little of the time None of the time	K6
During the past 30 days, about how often did you feel... So depressed that nothing could cheer you up?	All of the time Most of the time Some of the time A little of the time None of the time	K6
During the past 30 days, about how often did you feel... That everything was an effort?	All of the time Most of the time Some of the time A little of the time None of the time	K6
During the past 30 days, about how often did you feel... worthless?	All of the time Most of the time Some of the time A little of the time None of the time	K6

To what extent do you agree with these statements: My community is a safe place for my children	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
I worry for my child's/ren's future	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
On a scale of 0-10 where 0 = no satisfaction at all and 10 = completely satisfied, How satisfied are you with Your standard of living	0 = no satisfaction at all to 10 = completely satisfied	Personal Wellbeing Index – Adult
Your health	0 = no satisfaction at all to 10 = completely satisfied	Personal Wellbeing Index – Adult
What you are achieving in life	0 = no satisfaction at all to 10 = completely satisfied	Personal Wellbeing Index – Adult
Your personal relationships	0 = no satisfaction at all to 10 = completely satisfied	Personal Wellbeing Index – Adult
How safe you feel	0 = no satisfaction at all to 10 = completely satisfied	Personal Wellbeing Index – Adult
Feeling part of the community	0 = no satisfaction at all to 10 = completely satisfied	Personal Wellbeing Index – Adult
Your future security	0 = no satisfaction at all to 10 = completely satisfied	Personal Wellbeing Index – Adult
Again using the scale of 1-5 where 1 is strongly disagree and 5 is strongly agree, How strongly do you agree with the following statements? I regularly do things for myself that help me relax and re-energise	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
Most other parents would be happier than I am	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
I have enough time to get what I need done	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
Tiredness gets in the way of being the parent I would like to be	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
My employment situation provides flexibility to enable me to fulfil parenting responsibilities	Strongly disagree Disagree Mixed feelings Agree Strongly Agree	Devised by team
Technology and Parenting		

We are interested in parents' views about use of electronic devices like ipads and other tablets, video games like PS4 and Nintendo, and internet and phone use for recreation and social interaction **In your opinion, the amount of time [child name] spends using electronic devices (such as iPad, computer, laptop, mobile phone) is:**	Far too much time Too much time About right Too little time Far too little time Don't know N/A	Devised by team
How many hours per weekday (on average) does your child spend using electronic devices	Record number of hours, OR unsure	Devised by team
How many hours per weekday would you be comfortable with your child using electronic devices?	Record number of hours	Devised by team
I have rules or strategies to control my child's use of devices	Yes No	Devised by team
My rules or strategies are successful in controlling my child's use of devices	Strongly disagree Disagree Mixed feelings Agree Strongly agree	Devised by team
I am confident I am managing my child's use of devices effectively	Strongly disagree Disagree Mixed feelings Agree Strongly agree	Devised by team
I feel like I use my mobile phone or device too much	Strongly disagree Disagree Mixed feelings Agree Strongly agree	Adapted from McDaniel & Radesky (2017)
I am comfortable with how I am using my technology when I am spending time with my children.	Strongly disagree Disagree Mixed feelings Agree Strongly agree	Devised by team
I feel annoyed when my child interrupts me while I am using my mobile phone or other device	Strongly disagree Disagree Mixed feelings Agree Strongly agree	Devised by team
My use of technology helps me to be a better parent	Strongly disagree Disagree Mixed feelings Agree Strongly agree	Devised by team
It's easy for me to put my mobile phone or other device away and focus fully on my child/ren when I am spending time with them	Strongly disagree Disagree Mixed feelings Agree Strongly agree	Devised by team
To what extent do you think your child/ren is/are concerned about your use of electronic devices?	Not at all concerned A little concerned Mixed feelings Quite concerned Very concerned	Devised by team
About you		
What is your birthdate?	dd/mm/yyyy	Devised by team
Do you identify as being of Aboriginal and /or Torres Strait Islander descent?	No Yes Aboriginal Yes Torres Strait Islander	LSAC

	Yes both Aboriginal and Torres Strait Islander	
What is the main language you speak at home? (if multiple, record the main one)	Select the main one: English Vietnamese Cantonese Arabic (or Lebanese) Mandarin Turkish Korean Khmer Spanish Persian Assyrian (or Aramaic) Greek Italian Japanese Aust. Aboriginal Other specify	LSAC
In general, would you rate your physical health as: excellent, very good, good, fair or poor.	Excellent Very Good Good Fair Poor	Devised by team
What are your main work or study activities at present?	Select as many as apply: Full-time paid employment Part-time paid employment Casual paid employment Unemployed and seeking work Home duties Full-time student Part-time student Permanently retired On leave from work Volunteer or unpaid work Other	LSAC plus devised by team
What are your partner's main work or study activities at present?	Select as many as apply: Full-time paid employment Part-time paid employment Casual paid employment Unemployed and seeking work Home duties Full-time student Part-time student Permanently retired On leave from work Volunteer or unpaid work Other	LSAC plus devised by team
What is the highest education level you have completed?	Select one: Year 9 or below Up to Year 10 or equivalent Year 11 or equivalent Year 12 or equivalent Vocational qualification (e.g. apprenticeship, trade, certificate) through a TAFE or college Diploma Bachelor Degree Postgraduate degree (PhD, Masters, Post-grad diploma) Other	LSAC plus devised by team
What is the highest education your partner has completed?	Select one: Year 9 or below Up to Year 10 or equivalent	LSAC plus devised by team

	Year 11 or equivalent Year 12 or equivalent Vocational qualification (e.g. apprenticeship, trade, certificate) through a TAFE or college Diploma Bachelor Degree Postgraduate degree (PhD, Masters, Post-grad diploma) Other	
Before income tax is taken out (so gross income), what is the total income in your household (including all adults who live in your home four days a week or more) **This should include income from work, investments, and government benefits.**	Select one: Less than $500pw ($25,999 or less per year) $500-999pw ($26,000-$51,999 yearly) $1000-$1,499pw ($52,000 - $77,948 yearly) $1,500 - $1,999pw ($78,000 - $103,948 yearly) $2,000 - $2,499pw ($104,000 - $129,948 yearly) $2,500 - $2,999pw ($130,000 - $155,948 yearly) $3,000 - $3,499pw ($156,000 - $181,948 yearly) Over $3,500pw (more than $182,000 yearly) Don't know Prefer not to answer	LSAC plus devised by team

[a]NA = Not applicable; [b]LSAC = Longitudinal Study of Australian Children; [c]ICD – International Classification of Diseases; [d]ATP = Australian Temperament Project

Appendix 2. Sample Size Calculations

Quantifying the optimal sample size for a survey study ensures adequate power to detect statistically significant differences between groups (e.g., between mothers and fathers within the survey sample, or between parents with high ratings on a variable of interest and those with lower ratings). Power is the probability that a statistical test will correctly find a significant difference between groups and is commonly set by researchers at 80%. The determination of ideal sample size is an essential step in survey planning, to avoid the risk of having an underpowered study.

Sample size estimations for survey research are ideally calculated based on having clear research questions that inform decisions about which sub-groups to include in analyses (i.e., what groups are we comparing) and what survey items will be analyzed. The research question will typically guide the types of analyses to be conducted, which also influence sample size estimate calculations. However, in the case of a cross-sectional survey like *Parenting Today in Victoria*, where a broad range of research questions may be asked of the data, by a variety of stakeholders with varying interests in the data, it can be challenging to calculate the necessary statistical power at the outset of survey administration. Using information gleaned from policy documents and consultations with key stakeholders for the project, we can propose example research questions that are clearly of interest, and that can guide early power estimates to inform optimal sample size decisions. These example questions are:

- What proportion of Victorian parents hold high aspirations or positive expectations for their children's schooling achievements?
- What factors influence the degree to which children are exposed to a home environment that supports their development and learning?
- Does parenting self-efficacy differ over the age of the child?

Using the abovementioned example research questions as a guide, and with an understanding of the study design (cross-sectional with participants randomly selected from the population, potentially moving to more stratified sampling, if required) and included items, we can calculate estimates of optimal sample size, based on the desired power of 80%. Power is the probability of correctly rejecting the null hypothesis that sample estimates (e.g., Mean, proportion, odds, correlation co-efficient etc.) do not statistically differ from what would be seen in the broader population. Power proportionately increases as study sample size increases, therefore researchers can control the sample size by adjusting the study power, and vice versa.

For research questions related to the prevalence of a condition within the population, as with question 1 above, sample size can be estimated using the following formula (Suresh & Chandrashekara, 2012):

$$N = \frac{Z^2_{\alpha/2} * P * (1-p) * D}{E^2}$$

where *P* is the prevalence or proportion of an event of interest for the study (in this case, as estimated from previous literature, the prevalence of parents having low expectations for their children going on to post-school education is around 20%; Yu & Daraganova, 2015), *E* is the precision (or margin of error) with which a researcher would want to measure something (estimated margin of error here is 10%). $Z_{\alpha/2}$ is the critical value of the normal distribution at $\alpha/2$ (e.g. for a confidence level of 95%, α is 0.05 and the critical value is 1.96). This tells us how likely it is that the observed effect in the sample is due to chance. *D* is the design effect which reflects the sampling design used in the survey type of study. D would usually be 1 for simple random sampling and higher (usually 1.5 to 2) for other designs including stratified, systematic or cluster random sampling and closer to 10 for purposive or convenience sampling. As the sampling method for the *Parenting Today in Victoria* survey will start with simple random sampling but potentially move to stratified sampling, we will adopt a *D* of 1.5.

Thus,

$$N = (1.96)^2 * .20(1-.20) * 1.5/(0.1 * .20)^2 = 3.8416 * .16 * 1.5/(.02)^2 = 0.921984/.0004 = 2305$$

Therefore, a sample size of 2305 is required to conduct a community-based representative survey to estimate the prevalence of low educational expectations by parents. Allowing for a non-response rate of 10%, to calculate the final adjusted sample size for the above example:

$$2305/(1-0.10) = 2305/0.90 = 2561$$

Therefore, the adjusted optimal sample size will be 2561 for this research question.

For research questions regarding associations between multiple variables, as for question 2 above, analyses may involve simple regression (correlation between 2 variables) or more complex analyses such as multiple regression or Structural Equation Modelling. While estimates for ideal sample size for such analyses do vary widely, a general rule of thumb is for around 10 participants per parameter within an analysis (Tabachnick & Fidell, 1996). Thus, for question 2, it may be that we are interested in the influence of 3 parent-related factors (e.g., mental health, social support, and socio-economic status) on two types of parenting behaviour (e.g., warmth and irritability) and on two aspects of parent engagement with learning (e.g., how many days of the week do you read to your child? How important do you think learning activities outside of school are to your child's development?). These separate constructs may have a number of indicator items that are combined in analyses to reflect that construct of interest (e.g., social support may be measured by five individual items). Each of these five items are a "parameter", as is the proposed pathway of association between two items. Therefore, an analysis involving seven constructs, each measured by five items, with a range of pathways of influence to be measured, would require a sample size of at least 700 for the main analysis. Further, it is desirable to test the measurement model in a randomly selected proportion (typically 10%) of the overall sample to verify hypothesised associations between items and constructs. In addition, any analyses involving sub-group comparisons of the interrelationships between multiple variables (e.g., are the factors that influence the provision of supportive home environment different for fathers than for mothers?), would need to account for this in any power calculations. Thus, as an indication, to answer questions about whether mental health, social support and socio-economic status influence parenting differently for mothers and fathers, a sample size of at least 1500 would be desirable. More complex analyses involving more variables would, of course, call for large sample sizes.

For a research question involving the comparison of two or more groups, as for the third example research question provided above, we can use the following formula to estimate sample size needed to detect a difference between two independent groups (e.g., parents of 3-5 year olds compared to parents of 8-10 year olds):

$$N = (Z_{\alpha/2}+Z_{\beta})^2 * (p_1(1-p_1)+p_2(1-p_2)) / (p_1-p_2)^2$$

Where $Z_{\alpha/2}$ is the critical value of the normal distribution at $\alpha/2$ (e.g., for a confidence level of 95%, α is 0.05 and the critical value is 1.96), Z_{β} is the critical value of the normal distribution at β (e.g., for a power of 80%, β is 0.2 and the critical value is 0.84) and p_1 and p_2 are the expected sample proportions of the two groups. Expected sample proportions are what you expect the results to be. This can sometimes be determined from existing literature or a pilot study. If such information is not available, researchers are advised to use proportions close to 50%, which is conservative and will indicate larger sample sizes are needed. For research question 3, aimed at examining differences in parents' self-efficacy in their parenting for children under two compared to children ages between 13-18, we could estimate that parents of young children will feel more efficacious than parents of older children, therefore we use the estimates of .80 and .75 to claim that 80% of parents of younger children feel highly efficacious compared to 75% of parents of older children. In this scenario a sample size of 1091 for each group is recommended using the formula provided above. Allowing for a non-response rate of 10%, to calculate the final adjusted sample size for this example:

$$1091*2/(1-0.10) = 2182/0.90 = 2424$$

Therefore, based on the calculations above, it is determined that the sample size should include 2,600 respondents. This equates to approximately 0.2% of Victoria's child population (estimated to be 1.3 million across age 0-18 years; ABS, 2014).

Appendix 3. Introductory script for CATI

Hello, my name is XXXXX calling from Ipsos.

We're doing a survey for the Parenting Research Centre on behalf of the Victorian Government. It's for parents or carers with a child aged between newborn and 18 years. I'll be asking what it's like to be a parent, how you care for your child, who supports you to do this and what you think would help you in your role as a parent. There are also questions about child care and your child's education, your well-being and how you rate your parenting skills. We're hoping to speak with over 2,000 parents for the survey.

The survey will take between 30 - 45 minutes to do.

[IF PERSON COMPLAINS OF TIME CONSTRAINTS, OFFER TO DO THE INTERVIEW OVER A COUPLE OF CALLS OR ASK FOR A TIME TO CALL BACK]

We won't collect any information that identifies you (such as name or address). So, the information you give about yourself and your family is anonymous. When we write up the survey results, we will only have grouped information, no responses or answers from individual parents. The results will be used by the Victorian Government to help them develop policies and make decisions about how to best support parents in Victoria.

Do you have any questions about this?

[Obtaining Consent]

Would you like to take part in this survey? [If yes, continue…]

Can you please summarise your understanding of this survey for me so I can confirm your understanding?

Will information collected from you be anonymous or will it be able to identify you?

Who will be able to see your answers?

Do you agree to allow your answers to be available to researchers, the government and maybe others, to study the experiences of Victorian parents?

Before we begin, I would like to give you the name and contact details of the researcher in charge of this survey. Would you like to write this information down? [interviewer then provides Dr Catherine Wade's name and contact number]

Are you happy to start the survey with me now? If not, arrange another time

[After the parent has consented and before starting the survey:]

If you start the survey, then change your mind, you can stop at any time. If you do decide to stop the survey before we finish your answers will be deleted and won't be used. However, if you finish the survey and change your mind later we can't remove the information you gave because it's anonymous and so I won't be able to look up your answers in order to remove them.

One more thing before we start. If doing this survey brings up any concerns or worries for you, I can give you contact details for Lifeline and Parentline. When we've finished, I'll ask you if you'd like this information.

Appendix 4. End of Survey Script

[IF K6 SCORE IS IN THE 'HIGH' RANGE]

From some of your answers it sounds like you've felt distressed quite often in the past month, I'd like to give you a couple of contact numbers for helplines. Is that OK?

[IF PARENT SAYS YES ASK IF THEY HAVE A PEN & PAPER]

Lifeline is on 13 11 14 and can be contacted at any time and Parentline is 13 22 89 between 8am and midnight 7 days a week.

Your GP is also a good person to start talking to about matters that are distressing you, including those about parenting.

[IF K6 SCORE IS IN THE 'MODERATE' RANGE]

From some of your answers it sounds like you've experienced some distress in the past month. Would you like the number of a helpline?

[IF PARENT SAYS YES ASK IF THEY HAVE A PEN & PAPER]

Lifeline is on 13 11 14 and can be contacted at any time and Parentline is 13 22 89 between 8am and midnight 7 days a week.

Your GP is also a good person to start talking to about matters that are distressing you, including those about parenting.

[If K6 SCORE IS IN THE 'LOW' RANGE]

If doing this survey brought up any concerns or worries for you that you might want help with, Lifeline is available at any time and Parentline can be contacted between 8am and midnight 7 days a week. Would you like the contact numbers for these?

[IF PARENT SAYS YES ASK IF THEY HAVE A PEN & PAPER]

Lifeline is on 13 11 14 and Parentline is 13 22 89

[IN CONCLUSION, SAY TO ALL]

***Thank you very much** for taking part in this survey. Your contribution to this survey is very valuable and we appreciate the time you've given.*

*If you'd like **further information** about the project, you can contact the researcher in charge of this survey, Dr Catherine Wade at the Parenting Research Centre* [provide contact details if requested].

This survey has been approved by the Parenting Research Centre's ethics committee. If you have any concerns about the project you can also contact the Chair of this committee on 8660 3500.


Parenting
Research Centre