



Do Australian children have more problems today than twenty years ago?

The rising rate of child and youth problems, such as obesity, depression and substance use, has led many to believe that today's children are faring worse than yesteryear's children. But there is little information to test this view. Two landmark longitudinal studies, the *Australian Temperament Project* and *Growing Up in Australia*, asked parallel questions about children's temperament and behaviour, enabling a rare comparison of children born 20 years apart, in differing eras.

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It has been suggested that today's Australian children are not as healthy or well-adjusted as previous generations of children. While broad societal trends, such as the rise in life expectancy, increased educational attainment, and higher financial and material living standards, suggest that Australian adults are faring better nowadays than in the past, concern has been expressed about the progress of our children (e.g., Stanley, Richardson,

& Prior, 2005). Several problematic trends are evident—for example, the rise in obesity (World Health Organization, 2004), lower levels of fitness and greater inactivity (Dollman, Olds, Norton, & Stuart, 1999), and increasing rates of depression among youth (Birmaher et al., 1996).

What might underlie these trends? Family life is perceived to be “busier” than in the past (Bianchi, Robinson, & Milkie, 2006; Darrah, Freeman, &



English-Lueck, 2007). There have been changes in family circumstances, such as the tendency for parenthood to commence at an older age, the trend for more mothers of young children to return to work, and a rise in single parenthood. A variety of lifestyle changes have contributed to a more sedentary lifestyle—for example, parents acting as “taxi drivers” for their children, “couch potato” interests such as DVD/television watching and home computers, and heightened “stranger danger” fears. There have been changes in children’s early experiences as well, with many more experiencing non-parental care outside the family home than in the 70s and 80s. Concern is sometimes expressed about the effects of this trend (Belsky, 2001; Biddulph, 2006).

Today’s world is also a more uncertain place following the 9/11 attacks, the threat of terrorism and the new uncertainties surrounding climate change. These external stresses have been shown to affect parents’ childrearing practices and may flow on to affect children’s wellbeing (Mowder, Guttman, Robinson, & Sossin, 2006). There is also considerable research suggesting that greater societal inequality is linked to lower overall child wellbeing (Keating & Hertzman, 1999). Thus, it is possible that the pressures of our modern world are a source of additional stress for families and children.

But while some broad indicators suggest that today’s children are not progressing as well as children in

previous generations, few opportunities exist to directly compare children growing up in differing eras. Two ongoing longitudinal studies, the *Australian Temperament Project (ATP)* and *Growing Up in Australia: The Longitudinal Study of Australian Children (LSAC)*, contain parallel data on children’s temperament and behaviour problems, enabling a comparison of children born 20 years apart. The ATP is following a cohort of children aged 4–8 months at the first data collection (born in 1982–83), while the LSAC is following two cohorts, the first aged 0 to 1 years at first collection (born in 2003–04), and the second aged 4–5 years at first collection (born in 1999–2000).

The ATP cohort was previously compared with the two LSAC cohorts at child ages of 0–1 and 4–5 years, using data from the first wave of the LSAC and the first and fourth waves of the ATP (Smart &

Sanson, 2005). The findings revealed that most children in both studies were developing well, although there were some significant, albeit modest, differences between the ATP and LSAC cohorts.

As a group, ATP infants were reported by parents to be more temperamentally irritable than LSAC infants, but did not significantly differ on the temperament factors of persistence and sociability. A wider range of differences emerged from the comparison of the 4–5 year olds. These suggested that LSAC children were a little more easygoing and sociable, less anxious and more socially skilled than ATP children, according to parent reports. However, there were no significant differences on the incidence of behaviour problems such as conduct problems (e.g., aggressiveness, disobedience) or hyperactivity. Thus, it was concluded that on temperament and behaviour problems, there was no trend for today’s children to be faring worse than children of the 80s, and there were signs that they were progressing a little better in some areas.

The second wave of LSAC data, released in September 2007, has provided an opportunity to further compare the ATP and LSAC cohorts at 2–3 and 6–7 years of age, two years later than the first comparison. Data are now available from teachers as well as parents, on which the two cohorts can be compared. Findings from numerous studies show only modest correlations between the reports of parents and teachers (Achenbach, McConaughy, & Howell, 1987). Reasons for this may include differing perceptions of parents and teachers (parents may witness a wider variety of behaviours over a longer period of time, while teachers have a broader reference point and can draw upon their experience of “normal” child behaviour when reporting on individual children), as well as the particular demands of home and school that may elicit differing child behaviours. Further, research consistently shows that parents tend to report more behaviour problems than teachers (e.g., Sawyer, Baghurst, & Mathias, 1992; Stanger & Lewis, 1993; Verhulst & Akkerhuis, 1989). Thus, it is possible that the reports of ATP and LSAC teachers might differ from those of ATP and LSAC parents.

Two questions are investigated in this paper:

- Do the early differences found between the ATP and LSAC cohorts continue, broaden or diminish over time?
- Are differences evident in both the home and school contexts; in other words, are there differences across children’s differing environments?

The Australian Temperament Project

The *Australian Temperament Project*, a collaboration between the Australian Institute of Family Studies, the University of Melbourne and the Royal Children’s Hospital, has focused on the developing child, investigating the contribution of personal, family and broader environmental factors to adjustment and wellbeing (Prior, Sanson, Smart, &

Oberklaid, 2000). Commencing in 1983 with a representative cohort of 2,443 infants and families from urban and rural areas of Victoria, 14 waves of data have been collected over the first 24 years of life. A wide range of domains has been assessed using self-complete questionnaires administered via mail surveys. The aspects assessed include the child's temperament style, behavioural and emotional adjustment, risk-taking, academic progress, health, social skills, and family and peer relationships, as well as family functioning, parenting practices and family socio-demographic characteristics (further details are available from the study website, www.aifs.gov.au/atp).

Informants include parents, maternal and child health nurses, primary school teachers and, from the age of 11 years, the young people themselves. Approximately 75% of families were still involved in the study at the data collection waves reported here (Wave 3 in 1985, age 2–3; Wave 5 in 1988, age 5–6; and Wave 6 in 1990, age 7–8). Attrition analyses reveal that lower socio-economic status (SES) families or those containing a non-Australian born parent are a little more likely to have been lost from the study. However, there are no significant differences between the retained and no-longer participating sub-samples on infant characteristics, such as easy/difficult temperament style or behaviour problems measured at 4–8 months. Thus, the findings reported here may slightly under-represent the effects of family disadvantage, but continue to reflect the diversity of children's characteristics. At the survey waves on which these findings are based, between 75% and 92% of those who were still enrolled in the study completed questionnaires.

Growing Up in Australia: The Longitudinal Study of Australian Children

As an overview of the LSAC has previously been provided on pages 5–13, only a brief description is provided here. The LSAC commenced in 2004 with the recruitment of two cohorts: 5,104 families with infants aged 0–1 year and 4,976 families with 4–5 year olds (Sanson et al., 2002). The families resided in urban and rural areas from all states and territories of Australia. A large body of information about the child and his/her family is being collected every two years up to 2010 and possibly beyond. Resident and non-resident mothers and fathers, carers, teachers and children are participating in the study. Information has been gathered via home interviews, self-complete questionnaires, direct assessments and data linkage. In Wave 2, responses were received from 4,606 families of 2–3 year olds, and 4,464 families with 6–7 year olds, a response rate of 90%.

Methodological issues

There were several differences between the cohorts that could have affected the comparisons undertaken. These are now described, as are the strategies developed to deal with these differences.

First, while the 2–3 year old cohorts in the ATP and LSAC were similar in age, the LSAC child cohort was 6–7 years old when surveyed for Wave 2, whereas the nearest ATP data collections were at 5–6 and 7–8 years of age. The ATP behaviour problem and temperament measures were identical at 5–6 and 7–8 years, enabling scores to be averaged across the two ages to make them more equivalent to the LSAC 6–7 years cohort. Child age was also entered as a covariate in the statistical analyses (first averaged across the two time points for the ATP cohort) to further control for any age differences between the cohorts.

Second, there were differences between the ATP and LSAC cohorts on family characteristics (see Table 1; see also Smart & Sanson, 2005). LSAC parents were, on average, three years older than ATP parents and, as a group, tended to have completed more years of education. Finally, while approximately four-fifths of mothers and three-quarters of fathers in both studies were Australian-born, the origins of those born overseas reflect changing immigration patterns over the past twenty years, with more ATP parents being from southern European countries and more LSAC parents being from Asia and New Zealand. These naturally occurring differences were controlled in the statistical analyses undertaken.

Third, there were differences on some measures. While the measures of temperament were identical across the two studies, as were their response categories, different scales were used to measure behaviour problems. At 2–3 years, the ATP used the Richman, Stevenson, and Graham (1982) Child Behaviour Checklist (CBC), while the LSAC used the Briggs-Gowan, Carter, Irwin, Wachtel, and Cicchetti (2004) Brief Infant Toddler Social Emotional Assessment (BITSEA). For the older cohorts, the Rutter, Tizard, and Whitmore (1970) Child Behaviour Questionnaire (CBQ) was used in the ATP, while the Goodman (1997) Strengths and Difficulties Questionnaire (SDQ) was used in the LSAC. In each case, a subset of items was in common across the scales (i.e., across the CBC and BITSEA, and across the CBQ and SDQ), and these were used in the statistical analyses.

Last, the behaviour problem scales employed different response categories. For example, the SDQ used three responses: “not true”, “somewhat true”, “certainly true”; while the CBQ used the responses of “no problems”, “some problems” and “definite problems”. Because of these differences, the items were dichotomised to differentiate children with clear difficulties from those with mild or no difficulties (e.g., “not true/somewhat true” and “no/some problems” were scored as 0, and “certainly true” and “definite problems” were scored as 1).

Measures used at 2–3 years

For the ATP cohort, reports were available only from parents when children were 2–3 years of age and therefore comparisons of the two cohorts across home and elsewhere (e.g., preschool, child



care) were not possible. Three temperament dimensions from the Short Temperament Scale for Toddlers (STST; see Prior et al., 2000) were measured in both studies:

- sociability—reflecting the child’s ease when meeting new people or in new social situations (example item: outgoing with adult strangers outside the home);
- persistence—the child’s ability to stay with an activity and see tasks through to completion (e.g., practices a new skill for 10 minutes or more); and
- reactivity—the mildness or intensity with which the child reacts (e.g., responds to frustration intensely).

A six point response format of 1 = *almost never*, 2 = *rarely*, 3 = *variable: usually does not*, 4 = *variable: usually does*, 5 = *frequently* and 6 = *almost always*, was used. The CBL and the BITSEA contained 5 behaviour problem items in common, covering sleeping problems, worrying and signs of aggression. As noted earlier, the original response categories were dichotomised into 0 = *no/mild difficulties* and 1 = *clear difficulties*.

Measures used at 5–6 years

The parent-reported *sociability* (e.g., friendly and approaching of unknown adults), *persistence* (e.g., stays with an activity for a long time) and *reactivity* (e.g., if upset, hard to comfort) dimensions from the Short Temperament Scale for Children (STSC; see Prior et al., 2000) were used in both studies, with the same 6-point response format as the STST, except that response option 2 was phrased as “not often” rather than “rarely”. The behaviour problem items in common across the two studies covered four main areas:

- conduct problems (4 items, e.g., fighting, disobedience);
- internalising problems (3 items, e.g., worries, fearful);
- hyperactivity (2 items, e.g., cannot stay still); and
- peer problems (2 items, e.g., not liked by other children).

Both teacher and parent reports of behaviour problems were available. As described above, the items were first recoded to identify children with clear problems. Profiles for the ATP and LSAC cohorts

Table 1 Differences between ATP and LSAC cohorts on family characteristics

	Mothers				Fathers			
	0–1 year olds		4–5 year olds		0–1 year olds		4–5 year olds	
	ATP	LSAC	ATP	LSAC	ATP	LSAC	ATP	LSAC
Average parental age	27.9	31.0	31.8	34.6	30.5	33.8	34.2	37.5
Parental education								
Postgraduate qualification	1.6	13.3	3.6	12.3	3.5	12.5	6.6	14.0
Undergraduate degree	10.0	19.6	7.2	16.2	14.5	16.3	12.7	15.2
Diploma	12.4	9.7	21.3	8.9	11.9	8.3	14.8	8.1
Certificate or equivalent	4.0	25.6	0.5	26.2	17.9	38.8	21.5	37.7
Year 11 or 12	38.0	20.0	34.5	21.5	26.2	14.1	21.5	13.4
Year 9 or 10	29.5	10.3	29.4	12.8	20.1	8.9	18.3	10.1
Less than Year 9	4.5	1.5	3.5	2.1	5.9	1.1	4.6	1.6
Parental country of origin								
Australia	79.9	80.5	83.9	78.9	73.3	77.2	76.8	75.5
New Zealand	0.9	3.2	0.5	3.5	1.0	2.7	0.7	2.9
Great Britain	6.0	4.5	5.4	6.4	7.3	6.0	7.1	7.4
Northern Europe	1.9	0.8	1.8	0.7	3.8	1.1	4.1	1.3
Southern Europe	6.4	0.3	5.1	0.6	9.8	0.5	7.8	1.0
Middle East	1.5	1.3	0.4	1.7	1.5	1.6	0.8	1.8
Asia	2.3	6.4	1.6	5.0	2.1	7.7	1.4	6.3
North America	0.2	0.7	0.6	0.7	0.3	0.5	0.3	0.6
South America	0.3	0.2	0.1	0.2	0.4	0.3	0.1	0.3
Africa	0.5	0.9	0.5	1.0	0.5	1.3	0.5	1.5
Pacific Islands	–	1.1	–	1.1	–	1.1	–	1.3

across the four broad areas (via computing the mean of the items within each area), and on the individual items, are reported.

Findings

Findings from the comparison of 2–3 year olds

Multivariate covariance analyses were used to compare the LSAC and ATP cohorts on parent-reported temperament style at 2–3 years. There were significant differences between the cohorts on all three temperament dimensions after controlling for parental age, education, country of origin and child age. Figure 1 shows the means for each cohort and indicates that ATP children were reported to be

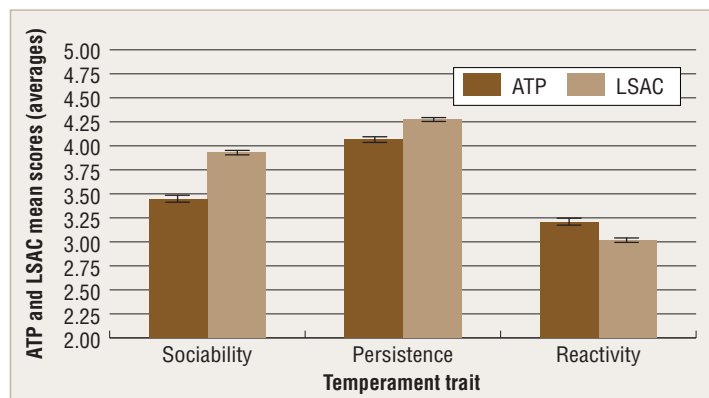


Figure 1 Differences between the ATP and LSAC 2–3 year old cohorts on temperament

Table 2 Differences between the ATP and LSAC 2–3 year old cohorts on rates of behaviour problems

	% with clear problems		p <
	ATP	LSAC	
Night waking	10	11	n.s.
Difficulty falling asleep	8	2	.001
Worries a lot	3	4	n.s.
Destructive	9	5	.001
Hurts other children	5	2	.001

Note: n.s. = not significant

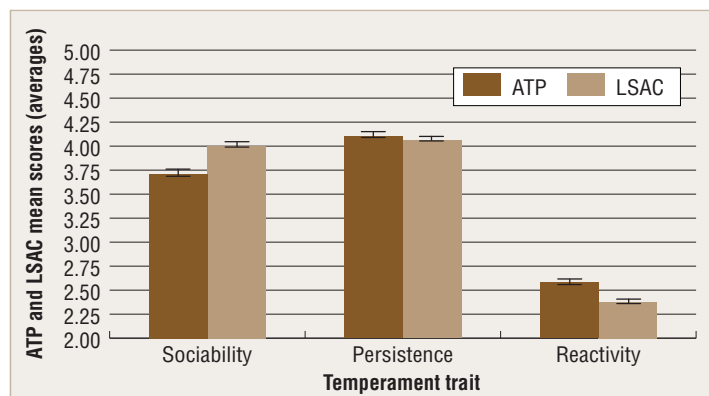


Figure 2 Differences between the ATP and LSAC 6–7 year old cohorts on temperament

significantly less sociable, less persistent and more reactive than LSAC children. The “I” symbols at the top of the bars show the 95% confidence intervals (CIs). When the “I” symbols do not overlap, this indicates that there are significant differences between the groups being compared. As an example, in Figure 1, the CIs for sociability do not overlap, indicating that the two cohorts differed significantly on this aspect.

Figure 1 also displays the two cohorts’ mean (average) levels on the three temperament traits. For sociability, the ATP cohort mean suggested that ATP children were equally likely to be or not be sociable; while the LSAC cohort mean suggested that LSAC children tended to be sociable more often than not. On persistence, both cohorts tended to be persistent (although occasionally were not), while on reactivity, both cohorts were usually not reactive (but could sometimes be so).

A small subset of behaviour problem items was in common across the two studies. Table 2 shows the percentages of each cohort reported by parents to have had clear problems on night waking, difficulty falling asleep, worrying, destructiveness and propensity to hurt other children. As can be seen, in general very few toddlers displayed these problems (between 5% and 11%). However, significantly more ATP than LSAC toddlers were reported to have had difficulty falling asleep and to have showed signs of aggression (destructiveness, hurting other children). Quantitatively, the differences, while significant, were modest.

Findings from the comparison of 6–7 year olds

Multivariate covariance analyses were used to compare the 6–7 year old cohorts on temperament style and behaviour problems. After controlling for parental characteristics and child age, the differences on temperament style at 6–7 years were similar to those found in toddlerhood, with the reports of parents suggesting that the ATP cohort was significantly less sociable and more reactive than the LSAC cohort (see Figure 2). However, the cohorts did not significantly differ on persistence. The group mean scores showed that the cohorts were perceived to be a little above the midpoint on sociability and persistence, and were a little below the midpoint on reactivity, indicating that the children were usually sociable and persistent but usually not reactive, although more “difficult” temperament tendencies were sometimes apparent.

Parent reports of behaviour problems at 6–7 years are shown in Figure 3, which displays the means for each area assessed. The figure indicates that, while levels of behaviour problems were very low overall, ATP children were significantly more often perceived to have conduct problems and anxiety than LSAC children. There were no significant differences on hyperactivity and peer problems.

Turning now to teacher reports, again very low levels of behaviour problems were reported (Figure 4). However, teacher reports suggested that LSAC children



displayed significantly more conduct problems, and were significantly more hyperactive but less anxious than ATP children. As for parent reports, there were no differences on peer problems.

Thus, conduct problems among 6–7 year olds were more often reported by ATP parents than LSAC parents, and less often by ATP teachers than LSAC teachers. On the other hand, parents and teacher reports both suggested that the LSAC cohort tended to be less anxious than the ATP cohort.

Rates of problems on the individual items within each behaviour problem scale were also examined to see where differences between the cohorts and sources of report might lie. ATP parents consistently reported more conduct problems (ranging from 3.3% to 11.1%) than LSAC parents, for whom rates were very low, with the exception of temper problems (1.1% to 8.5%; see Table 3). Very few teachers of ATP children reported conduct problems (between 1.1% and 2.3%), whereas more teachers of LSAC children reported these behaviour problems (2.5% to 3.5%) and, rather unusually, there was a consistent trend for slightly more problems to be reported by LSAC teachers than parents.

While rates of internalising problems were low over both cohorts and ranged from 2.2% to 12.3%, considerably more ATP children than LSAC children were reported to be worriers, according to parents and teachers. Trends were in a similar direction for the other two items, but were much weaker. Thus, the differences on internalising problems evident in Figures 3 and 4 primarily reflect differences on children's tendency to worry. As for conduct problems, teachers of LSAC children reported more internalising problems than did the children's parents.

A slightly higher proportion of children from both cohorts were reported by parents to have hyperactivity problems. Thus, averaged across the two items, rates were 10.6% for the ATP cohort and 10.3% for the LSAC cohort. Teacher reports of these problems were considerably lower than parent reports for the ATP cohort, but were similar to parent reports for the LSAC cohort. On peer problems, parent reports were similarly low across both cohorts, with less than 5% showing clear signs of such problems. However, as found for conduct and internalising problems, LSAC teachers reported more peer problems than did LSAC parents.

Discussion and implications

This study sought to provide information on the progress of today's Australian children, and to compare the temperament style and behaviour of children growing up in the new millennium with children growing up in the 1980s. The presence of parallel information in the longitudinal *Australian Temperament Project* and *Growing Up in Australia: The Longitudinal Study of Australian Children* provided a rare opportunity to compare children from differing eras.

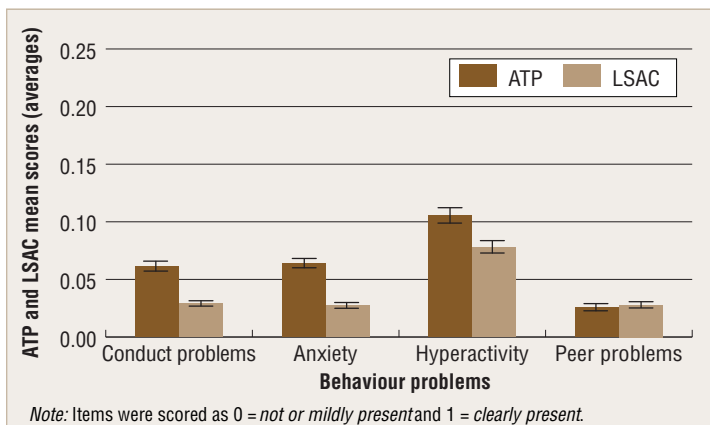


Figure 3 Differences between the ATP and LSAC 6–7 year old cohorts on parent-reported behaviour problems

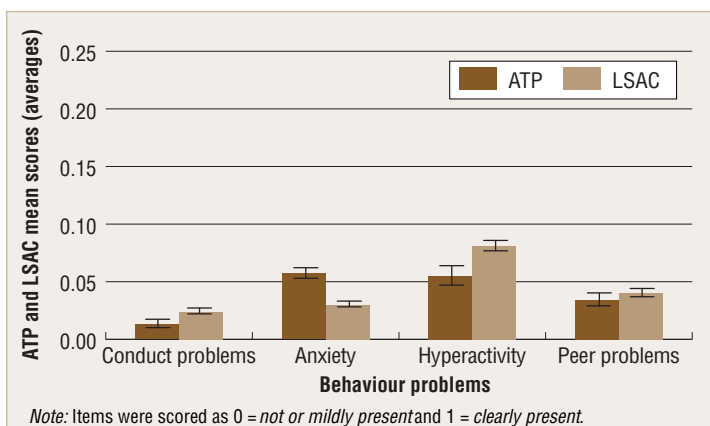


Figure 4 Differences between the ATP and LSAC 6–7 year old cohorts on teacher-reported behaviour problems

Table 3 Differences between the ATP and LSAC 6–7 year old cohorts on rates of behaviour problems

	Parents		Teachers	
	% with clear problems		% with clear problems	
	ATP	LSAC	ATP	LSAC
Conduct problems				
Loses temper*	11.1	8.5	–	–
Disobedient	7.9	2.3	1.6	3.2
Fights with other children	3.3	1.1	2.9	3.5
Lies, cheats	3.3	1.7	1.6	2.5
Internalising problems				
Many worries	12.3	3.3	10.2	4.5
Unhappy, depressed	3.0	2.2	2.9	2.6
Many fears	4.7	4.1	3.9	2.5
Hyperactivity				
Restless, cannot stay still	13.1	11.8	6.2	8.1
Fidgets, squirms	8.1	8.7	5.6	8.5
Peer problems				
Solitary, plays alone	4.4	5.4	4.7	6.6
Not liked by other children	1.3	0.9	1.6	2.2

Note: * Not measured by teacher report in both studies



The great majority of today's Australian children seem to be progressing well in terms of their temperament style and behaviour problems.

The first point to note is that the great majority of children of the 2000s and the 1980s seemed to be developing well according to parents and teachers alike. The findings were consistent at 2–3 and 6–7 years of age. In terms of temperament style, cohort mean scores suggested that toddlers and children were *usually* sociable, *frequently* persistent and *usually not* reactive and intense. Very few toddlers and children were reported as showing clear signs of behaviour problems. The highest rates of behaviour problems at 2–3 years were found on night waking (10% of ATP and 11% of LSAC toddlers) and destructiveness (9% of ATP and 5% of LSAC toddlers). At 6–7 years, the highest rates of behaviour problems were on restlessness/inability to stay still (13% of ATP and 12% of LSAC children), worrying (12% of ATP and 3% of LSAC children), the child's tendency to lose his/her temper (11% of ATP and 8% of LSAC children), fidgeting (8% of ATP and 9% of LSAC children), and being disobedient (8% of ATP and 2% of LSAC children), according to parents. Rates of other types of behaviour problems were less than 5%.

Secondly, we sought to discover whether the differences found at 0–1 and 4–5 years between children of the 2000s and the 1980s, and reported in Smart and Sanson (2005), would remain stable, broaden or diminish over time, and whether differences would be evident across the home and school environments.

Parent reports confirmed the trends found previously, suggesting that today's children were progressing as well as children of the 1980s and, on some aspects, were faring better. However, teacher reports were, on some aspects, at odds with parent reports.

Parent reports revealed significant differences on almost all the aspects on which the cohorts were compared. Exceptions were night waking and the child's tendency to worry in toddlerhood, and persistence, hyperactivity and peer problems in childhood, for which no significant differences between the cohorts were found. The findings consistently suggested that LSAC children were faring a little better than ATP children.

The significant differences reported here are generally consistent with those found previously, in infancy and at 4–5 years (Smart & Sanson, 2005). Thus, ATP infants were found to be more irritable than LSAC infants and, as toddlers, were more reactive/intense. While ATP and LSAC infants did not differ on persistence and sociability, by 2–3 years differences on these temperament traits were evident, with ATP children as a group perceived to be less persistent and less sociable than LSAC children.

Turning now to the comparisons at older ages, ATP children had previously been found to be more reactive and less sociable, more anxious and less socially skilled than LSAC children at 4–5 years (Smart & Sanson, 2005). Later, at 6–7 years, ATP children continued to be more reactive and less sociable, and exhibited higher rates of conduct and internalising problems than LSAC children. At both 4–5 and 6–7 years, the cohorts did not differ on the persistence temperament trait.

Thus, differences were evident across similar and more diverse areas of functioning, suggesting trends were stable over time and had also broadened. Only on peer problems were cohort differences not maintained over time, with ATP children significantly more likely to be seen as experiencing peer problems than LSAC children at 4–5 years, but these differences were no longer evident at 6–7 years. Importantly, the same profile of differences emerged across the two sets of parents from whom reports were obtained in the LSAC (from the infancy and kindergarten cohorts), suggesting that the differences found are likely to be robust.

However, teacher reports revealed a somewhat different picture. While rates of problems were low overall, LSAC 6–7 years olds were reported as displaying more conduct problems and hyperactivity but fewer internalising problems at school than ATP children. There were no differences between the ATP and LSAC cohorts on peer problems, according to parents and teachers alike. Thus, the teacher-reported findings for conduct problems and hyperactivity were not consistent with parent reports, although those for internalising problems and peer problems were.

Why might parent and teacher reports of conduct problems and hyperactivity differ across the two cohorts? Some possible reasons are outlined below, any or all of which might play a role, although it should be noted that we have no direct evidence to call upon to support these suppositions. Firstly, the differences might reflect differing parental perceptions. Perhaps today's parents are more tolerant and understanding of, or less bothered by, challenging child behaviour and therefore less likely to report it as problematic. Secondly, the differences might reflect differences between teachers of the 1980s and the 2000s. It could be that today's teachers are more aware of conduct and hyperactive behaviour problems than in the past, and/or are more willing to report their presence.

Thirdly, perhaps there has been a change in children's behaviour in the school context since the 1980s.



While we do not have hard evidence to support this, some experienced teachers anecdotally report that today's children tend to behave more poorly at school than did children in the 1980s. We know that children can behave differently at home and at school. The differing contexts and their demands can elicit differing child behaviours; for example, a highly reactive child might be able to better control his/her behaviour in a regulated environment. If schools have become less tightly regulated over the last 20 years, higher rates of conduct and hyperactive behaviour might be apparent. This explanation might also account for the surprising finding that LSAC teachers tended to report more behaviour problems than LSAC parents. This unusual trend is inconsistent with past studies in which parent reports of behaviour problems are consistently higher than teacher reports (Prior et al., 1999; Sawyer et al., 1992; Verhulst & Akkerhuis, 1989). It will be interesting to see if other more recent studies also show the reversal evident in the LSAC data.

Some limitations that may have influenced the results must be acknowledged. As noted earlier, there were methodological differences between the two studies that may have affected or limited our ability to detect cohort differences. These include the small number of behaviour problem items available, especially at 2–3 years; the collapsing of response categories; and the age differences between the cohorts. The cohorts were compared in two significant areas of child functioning: temperament style and behaviour problems. However, many other areas of child functioning could not be examined; for example, physical health, cognitive ability, academic achievement and relationships with others. It is not possible to generalise beyond the current findings to these other important areas of child functioning.

In conclusion, the great majority of today's Australian children seem to be progressing well in terms of their temperament style and behaviour problems. Generally, children of the 1980s and 2000s appeared similar in temperament style and behaviour and, where there were differences, they were modest in size. According to parents, children of the 2000s were doing as well as children of the 1980s, and were a little easier in temperament style, and less inclined to show acting out and hyperactive behaviour or anxiety. According to teachers, children of the 2000s were slightly more likely to display conduct problems and hyperactivity than children of the 1980s, although they tended to be less anxious.

The evidence from the ATP, which has now followed participants to 25 years of age, is that the minority of children who show behavioural and emotional difficulties in early childhood are at risk for a range of later problems, such as depression, substance use and antisocial behaviour, although a number of factors can build children's resilience against these outcomes. Future comparisons of the ATP and LSAC data could help identify similarities and differences in developmental pathways across cohorts for those with troubled or untroubled early childhoods.

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