

Factsheet 2 – Information about the Middle Childhood Survey (MCS)

What is the Middle Childhood Survey (MCS)?

The **Middle Childhood Survey (MCS)** is one component of the [NSW Child Development Study](#). The MCS will provide an index of child mental health and wellbeing in the context of a longitudinal research study of children who were assessed using the *Australian Early Development Index* in 2009. The aim of the MCS is to measure the mental health of all NSW children at a critical stage of development, in order to better understand the needs of all children in this age-group, and how programs and policies for young children might be improved to meet these needs and promote healthy development into adulthood. The MCS is **not** a clinical diagnostic tool that could be used to “label” children or diagnose mental illness.

The MCS will be completed by all children enrolled in Year 6, in 2015, during class time. The MCS will obtain anonymous information on children’s thoughts, feelings, actions, and experiences. The questions have been designed to map patterns of mental health and wellbeing at individual, regional, and population levels, for use by the **Study’s Stakeholders and Partners** [Please see: [NSW-CDS Organisational Structure Map](#)] to plan policies and programs that promote healthy childhood development. The questions have been developed with input from representatives of all education sectors (Government, Catholic and Independent schools), as well as specially convened groups representing: the parents of public, Catholic, and Independent school children; teachers’ and primary principals’ associations; Indigenous people; isolated students and parents; and, the study’s Scientific Committee of researchers. Details regarding the range of experts, agencies, organisations, and groups involved are available at the [Who Are We](#) page.

How will the information be used?

Child responses obtained from the MCS will be examined on a community basis, to understand patterns of child mental health and wellbeing across the state, and to encourage community and government participation in the planning and provision of essential services for healthy child development. The MCS data will also be combined with information from other organisations using record linkage procedures that maintain privacy. Record linkage provides a unique and safe way to look at a range of factors in childhood that may have risk or protective effects for a range of outcomes during childhood, adolescence, and adulthood. Record linkages are undertaken by a third party according to strict privacy protocols (CHeReL) that are protected by NSW state and Commonwealth laws [Please see: [Information about Record Linkage](#)].

The MCS data, in combination with information from record linkages, will remain useful for many years in helping to identify childhood predictors of long-term mental health, education, social, and other outcomes in the population [Please see: [What We Do](#)]. The research team will work with our government partners and stakeholder groups, using the MCS data and linked records from other organisations, to provide schools, governments, and other agencies with information that can be used to develop policies and programs that promote healthy development for all Australian children.

Information about Record Linkages of other information with the MCS

An agency to support record linkage in NSW has been funded by the NSW Government in order to make best use of the important information contained in administrative records that are routinely collected (e.g., hospital admission information). With this recent support from the government, information from these rich and varied sources can now be used for public benefit, allowing researchers to examine health, education, and other information at a population level. This is important, because it means that everyone is able to contribute to plans for better public health policy and programs. For example, MCS data linkages with administrative records or other routinely collected data will help us to better understand how factors such as birth complications (for example, prematurity) might affect a child's *emotional* readiness to learn at school, or more generally, how patterns of mental health in the population compare in urban and rural parts of NSW. This kind of information will help local communities and governments develop and deliver programs for young children that promote healthy development. Examples of databases that may be linked to the MCS include, but are not limited to, records from children and their parents on *Health* (for example, information on hospital admissions), *Education* (for example, literacy and numeracy skills), *Welfare* (for example, information from Family and Community Services), and/or *Justice records* (for example, information on crime statistics).

Does my child have to participate in the MCS?

No. Child participation in the MCS is entirely voluntary and children can opt out if they wish. Parents may also choose to opt out their child from participating by completing the web form [here](#) (or by contacting their child's school). There will be no consequences for any child opted out of the study, and children who do not participate in class time will be given an alternative activity by their teacher.

Who organises the NSW Child Development Study?

The NSW-CDS is led by the University of New South Wales (UNSW) and involves academic collaborations between UNSW and the Universities of Newcastle, Western Australia, and Canterbury (NZ), and partnerships with Government organisations including the NSW Department of Education and Communities, NSW Ministry of Health, and the NSW Department of Family and Community Services. For more information, visit the [Who We Are](#) page or contact the NSW-CDS free helpline on **1800 901 922**.