Queensland Child Death Register Key findings 2023–24 Child deaths in Queensland

October 2024

Child deaths in 2023-24

In the 12-month period from 1 July 2023 to 30 June 2024, the deaths of 422 children aged 0–17 years were registered in Queensland. The child mortality rate was 34.5 deaths per 100,000 children aged 0–17 years and the infant mortality rate was 4.2 deaths per 1,000 births (rates are averaged over the last 5 years).

- Deaths from natural causes (diseases and morbid conditions) accounted for most child deaths (314—or 71%) (Table 1).
- External causes of death accounted for 70 deaths (19%).
- Transport was the leading external cause of death, with 20 deaths. Six of these were in motor vehicle crashes, 5 were motorcycle incidents, and 6 were pedestrian incidents.
- Suicide was the second leading external cause of death with 19 deaths.
- Ten children and young people drowned.
- Eight deaths were from unexplained causes. This includes deaths categorised as sudden infant death syndrome (SIDS) and undetermined causes.
- Two children died as a result of assault or neglect.
- 19 children died from other non-intentional injuries.ⁱ
- Thirty deaths were pending a cause of death at the time of reporting.

Table 1: Child deaths in Queensland, 2023–24°

	Number	Rate ^b			
Deaths of children 0–17 years	422	34.5			
Cause of death					
Natural causes	314	24.6			
External causes	70	6.7			
Transport	20	2.2			
Drowning	10	0.9			
Other non-intentional injury	19	1.1			
Suicide	19	1.9			
Fatal assault and neglect	2	0.6			
Unexplained causes	8	2.6			
SIDS and undetermined causes	8	2.6			
Cause of death pending	30	0.7			
Sudden unexpected deaths in infancy (SUDI)					
Sudden unexpected infant	27	0.6			
deaths					
Sex ^c					
Female	173	30.8			
Male	241	37.7			
Age category					
Under 1 year	280	4.2			
1–4 years	43	18.0			
5–9 years	18	6.8			
10–14 years	34	9.9			
15–17 years	47	25.4			
Aboriginal and Torres Strait Islander status					
Aboriginal & Torres Strait Islander	91	79.8			
Non-Indigenous	331	30.4			
Known to the child protection system					
Known to Child Safety ^d	53	60.4			
a By date of death registration.					

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b Five-year average rate per 100,000 population or per 1,000 births for under 1 year and SUDI.

c Excludes indeterminate sex.

d In the 12 months prior to death.

Trends from 2004 to 2024

The number of child deaths and mortality rates have generally declined over the 20 years in which the register has existed, driven largely by decreases in deaths from natural causes (Figure 1). The overall child mortality rate has decreased 2.0% per year on average. II

The rate of transport-related deaths has decreased 3.4% per year on average, notwithstanding the increased numbers of transport deaths in the previous 3 years.

Child mortality from suicide showed a slow increasing trend of 0.6% per year on average.

There were decreases in rates of deaths from drowning, other non-intentional injuries, unexplained causes and fatal assault and neglect.

Vulnerable groups

Some children are more vulnerable to experiencing adversity—including experiences that increase risk of death—than others. Aboriginal and Torres Strait Islander children and children who are known to the child protection system (Child Safety) are consistently and significantly over-represented in child mortality statistics.

Ninety-one **Aboriginal and Torres Strait Islander children** died in 2023–24. The Aboriginal and Torres Strait Islander child mortality rate was 2.7 times the rate for non-Indigenous children.

Fifty-three **children known to Child Safety** died in 2023–24. Only four of the 53 children were in care of the child safety system at the time of death while 49 had other types of contact with child protection ranging from interventions to no current involvement.

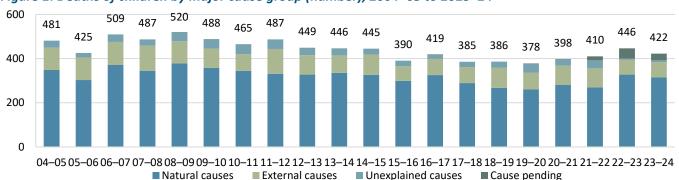


Figure 1: Deaths of children by major cause group (number), 2004–05 to 2023–24

Leading causes of death

The leading causes of death vary with age, largely in line with the risks faced by children at each stage of development (Table 2).

The leading causes of death for infants 0–27 days were perinatal conditions followed by congenital anomalies. For infants 28–364 days, the leading cause was SIDS and undetermined causes (as a group).

Cancers and tumours and transport incidents were among the top 3 leading causes for each age category from 1–17 years. Cancers and tumours

were the leading cause of death for children aged 1–4 years and 5–9 years.

Suicide and transport were leading causes of death for children aged 15–17 years and for those aged 10–14 years.

Young children aged 1–4 years are more vulnerable to external causes of death. After cancers and tumours, drowning, transport and other non-intentional injuries were leading causes in this age group.

Table 2: Leading causes of death by age, 5-year summary

Age category	Leading causes*		
	1	2	3
0–27 days	Perinatal conditions (2.2)	Congenital anomalies (0.8)	SIDS and undetermined causes (0.07)
28–364 days	SIDS and undetermined causes (0.3)	Congenital anomalies (0.3)	Perinatal conditions (0.2)
1–4 years	Cancers and tumours (2.8)	Drowning (2.3)	Transport (1.9)
5–9 years	Cancers and tumours (1.8)	Nervous system diseases (1.0)	Transport (0.9)
10–14 years	Suicide (2.0)	Cancers and tumours (1.8)	Transport (1.8)
15–17 years	Suicide (7.6)	Transport (6.2)	Cancers and tumours (2.3)

Notes: Cause of death data have been averaged over the 5-year period 2019–20 to 2023–24.

More information

This fact sheet provides summary information from the Queensland Family and Child Commission (QFCC)

Annual Report: Deaths of children and young people Queensland 2023–24, available at

https://www.qfcc.qld.gov.au/sector/child-death/child-death-reports-and-data

Data for prevention activities

The QFCC works with researchers and government agencies to raise community awareness and develop prevention programs and policies by identifying risk factors, trends and emerging safety hazards.

The QFCC can provide detailed Queensland child death data to researchers and organisations at no cost. Email child death prevention@qfcc.qld.gov.au

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¹ Unintentional injury deaths that fall outside the scope of transport or drowning e.g., threats to breathing, falls and poisoning.

[&]quot;Calculated using 5-year rolling rates.