

Social Health Atlas of Australia: Notes on the Data Published 2013

Notes on the Data: General information contents

Geographical areas: outlines the PHIDU Social Health Atlas/es of Australia geographical areas

Statistical information: provides some statistical and data processing information relevant to the PHIDU data indicators

Notes on the Data: List of Indicators contents

Please click on the heading/s below to go to the *Data source/s* and *Notes* information for each data indicator.

Age distribution - Males/ Females/ Persons, 2011

• Age in 5 year groups: 0 to 85+ years/ Broad age groups: 0-14, 15-24, 25-44, 45-64, 65+, 70+, 75+, 85+ years, Estimated Resident Population

Age distribution - Aboriginal males/ females/ persons, 2011

Age in 5 year groups: 0 to 65+ years, Usual Resident Population

Indigenous status, 2006 and 2011

- Aboriginal population as per cent of total population, Experimental Estimated Resident Population, 2006
- Aboriginal population as per cent of total population, Usual Resident Population, 2011

Birthplace & non-English speaking residents, 2011

- Australian-born population
- People born (overseas) in predominately English speaking countries
- People born in predominately non-English speaking (NES) countries
- People born in NES countries resident in Australia for five years or more
- People born in NES countries resident in Australia for less than five years
- People aged 5 years and over who were born overseas and reported poor proficiency in English

Non-English speaking countries of birth, 2011

Top ten birthplaces of people born in non-English speaking countries

Total Fertility Rate, 2005 to 2007 and 2011

Total Fertility Rate

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- Full-time participation in secondary school education at age 16, 2011
- Participation in vocational education and training, 2010
- School leavers enrolled in higher education, 2013
- People who left school at Year 10 or below, or did not go to school, 2011

Early child development: AEDI, 2009

- Developmentally vulnerable on 1 or more domains
- Developmentally vulnerable on 2 or more domains
- Physical health and wellbeing domain developmentally vulnerable, at risk and on track
- Social competence domain developmentally vulnerable, at risk and on track
- Emotional maturity domain developmentally vulnerable, at risk and on track
- Language and cognitive (school based) domain developmentally vulnerable, at risk and on track
- Communication skills and general knowledge domain developmentally vulnerable, at risk and on track

Learning or Earning, 2011

• Learning or Earning at ages 15 to 19

Families, 2011

- Single parent families with children aged less than 15 years
- Jobless families with children aged less than 15 years
- · Children aged less than 15 years in jobless families

Housing/ Transport, 2011

- Households in dwellings receiving rent assistance from Centrelink
- Dwellings rented from the government housing authority
- · Low income households with mortgage stress
- Low income households with rental stress
- Low income households with financial stress from mortgage or rent
- Private dwellings with no motor vehicle

Income support recipients, June 2011

- Age pensioners
- Disability support pensioners
- Female sole parent pensioners
- Unemployment beneficiaries
- Long-term unemployment beneficiaries
- Youth unemployment beneficiaries
- Low income, welfare-dependent families (with children)
- Children in low income, welfare-dependent families
- Health care card holders
- Pensioner concession card holders
- Total concession card holders

Internet access at home, 2011

- No Internet connection
- Total with Internet connections
 - Broadband Internet connection
 - Dial-up Internet connection
 - Other Internet connection

Labour force, 2011, 2012 and 2013

- Unemployment, June 2013
- Labour force participation, June 2012
- Female labour force participation, 2011

Summary measure of disadvantage, 2011

Index of Relative Socio-economic Disadvantage

Child care: unpaid, 2011

- Child care to own child/children (unpaid), provided by people aged 15 years and over
- Child care to other child/children (unpaid), provided by people aged 15 years and over
- Total (unpaid) child care, provided by people aged 15 years and over

Community strengths, 2010 and 2011

ABS Census data, 2011

Voluntary work for an organisation or group, people aged 15 years and over

Modelled estimates, 2010

- Persons aged 18 years and over who did unpaid voluntary work in the last 12 months through an organisation
- Persons aged 18 years and over who are able to get support in times of crisis from persons outside the household
- Persons aged 18 years and over (or their partner) who provide support to other relatives living outside the household
- Persons aged 18 years and over who feel very safe/safe walking alone in local area after dark
- Persons aged 18 years and over who disagree/strongly disagree with acceptance of other cultures

Personal and financial stressors (modelled estimates), 2010

- Persons aged 18 years and over whose household could raise \$2,000 within a week
- Persons aged 18 years and over whose household had at least one cash flow problem in the last 12 months
- Persons aged 18 years and over whose household took at least one dissaving action in the last 12 months
- Persons aged 18 years and over who had government support as their main source of income in the last 2 years
- Persons aged 18 years and over who had government support as their main source of income, for 12 months or more, within the past 24 months

Health status and disability (modelled estimates), 2010

- Persons aged 18 years and over with self-assessed health status of fair/poor
- Persons aged 18 years and over with profound/severe/moderate/mild core activity restriction

Access to services: financial and transport barriers (modelled estimates), 2010

- Persons aged 18 years and over who delayed medical consultation because they could not afford it
- Persons aged 18 years and over who delayed purchasing prescribed medication because they could not afford it
- Persons aged 18 years and over who often has a difficulty or can't get to places needed with transport
- Persons aged 18 years and over who had difficulty accessing services
- Persons aged 18 years and over who accessed the Internet at home in the past 12 months

Mothers and babies, late 2000s

- Low birth weight babies, 2008 to 2010 (NSW, Qld, SA & ACT), 2009 to 2011 (Vic, WA & Tas), 2006 to 2008 (NT)
- Smoking during pregnancy, 2008 to 2010 (NSW, Qld, SA & ACT), 2009 to 2011 (Vic, WA & Tas), 2006 to 2008 (NT)

Child health, late 2000s

- Children fully immunised at 1 year of age, 2 years of age and 5 years of age, 2011/12
- Infant deaths, 2006 to 2010
- Child mortality, 2006 to 2010

Screening, mid to late 2000s

Bowel screening data

- Total males who participated in the National Bowel Cancer Screening Program (NBCSP), 2010
- Total females who participated in the NBSCP, 2010
- Total persons who participated in the NBSCP, 2010
- NBCSP: positive test result, persons, 2010

Breast screening data

- Breast screening participation, females aged 50 to 69 years, 2006 and 2007 (Vic), 2007 and 2008 (Qld, WA & ACT), 2009 and 2010 (SA)
- Breast screening outcomes: cancer, females aged 50 to 69 years, 2006 and 2007 (Vic), 2007 and 2008 (Qld, WA & ACT), 2009 and 2010 (SA)

Cervical screening data

- Cervical screening participation, females aged 20 to 69 years, 2009 and 2010 (NSW, Vic, Qld, WA & ACT), 2008 and 2009 (SA)
- Cervical screening outcomes: low grade abnormality, females aged 20 to 69 years, 2009 and 2010 (NSW, Vic, Qld, WA & ACT), 2008 and 2009 (SA)
- Cervical screening participation: high grade abnormality, females aged 20 to 69 years, 2009 and 2010 (NSW, Vic, Qld, WA & ACT), 2008 and 2009 (SA)

Modelled estimates of prevalence of certain chronic diseases, risk factors etc., 2007-08

Self-assessed health (modelled estimates), 2007-08

- Fair or poor health, persons aged 15 years and over
- Current long-term condition and reporting good, very good or excellent health, persons aged 15 years and over

Chronic disease and conditions (modelled estimates), 2007-08

- Type 2 diabetes
- High cholesterol
- Males with mental and behavioural problems
 - Males with mood (affective) problems
- Females with mental and behavioural problems
 - Females with mood (affective) problems
- Circulatory system diseases
- Hypertensive disease
- Respiratory system diseases
 - Asthma
 - Chronic Obstructive Pulmonary Disease (COPD)
- Musculoskeletal system diseases
 - Arthritis
 - Rheumatoid arthritis
 - Osteoarthritis
 - Females with osteoporosis

Psychological distress (modelled estimates), 2007-08

High or very high levels of psychological distress, persons aged 18 years and over

Health risk factors (modelled estimates), 2007-08

- Male current smokers, 18 years and over
- Female current smokers, 18 years and over
- Harmful use of alcohol, persons aged 18 years and over
- Physical inactivity, persons aged 15 years and over
- Overweight (not obese) males, 18 years and over
- Obese males, 18 years and over
- Overweight (not obese) females, 18 years and over
- Obese females, 18 years and over
- Overweight (not obese) persons, 18 years and over
- Obese persons, 18 years and over
- Males in normal weight range, 18 years and over
- Females in normal weight range, 18 years and over
- Usual daily intake of two or more serves of fruit, persons aged 5 to 17 years
- Usual daily intake of two or more serves of fruit, persons aged 18 years and over
- Persons with at least one of four major health risk factors smoking, harmful use of alcohol, physical inactivity or obesity – 18 years and over

Composite indicators – a chronic disease and an associated risk factor (modelled estimates), 2007–08

- Had type 2 diabetes and were overweight/ obese, persons aged 18 years and over
- Had asthma and were smokers, persons aged 18 years and over

Disability, 2011

- Assistance to persons with a disability (unpaid)
- Persons with a profound or severe disability, All ages
- Persons with a profound or severe disability living in the community, All ages
- Persons with a profound or severe disability, 0 to 64 years
- Persons with a profound or severe disability living in the community, 0 to 64 years
- Persons with a profound or severe disability, 65 years and over
- · Persons with a profound or severe disability living in the community, 65 years and over

Median age at death, 2003 to 2007

- Median age at death of males
- Median age at death of females
- Median age at death of persons

Premature mortality by sex, mid to late 2000s

Premature mortality by sex, 2003 to 2007

- Deaths of persons aged 15 to 24 years
- Deaths of males aged 15 to 64 years
- Deaths of females aged 15 to 64 years
- Total deaths, 15 to 64 years

Premature mortality by sex, 2006 to 2010

- Deaths of males aged 0 to 74 years
- Deaths of females aged 0 to 74 years
- Total deaths, 0 to 74 years

Premature mortality by selected cause, mid to late 2000s

Premature mortality by selected cause, 2003 to 2007

- Deaths from external causes, 15 to 24 years
- Deaths from cancer, persons aged 15 to 64 years
- Deaths from circulatory system diseases, persons aged 15 to 64 years
- Deaths from respiratory system diseases, persons aged 15 to 64 years
- Deaths from external causes, persons aged 15 to 64 years
- Deaths from all other causes, persons aged 15 to 64 years

Premature mortality by selected cause, 2006 to 2010

- Deaths from cancer, persons aged 0 to 74 years
 - Deaths from colorectal cancer, persons aged 0 to 74 years
 - Deaths from lung cancer, persons aged 0 to 74 years
- Deaths from circulatory system diseases, persons aged 0 to 74 years
 - Deaths from ischaemic heart disease, persons aged 0 to 74 years
 - Deaths from cerebrovascular disease, persons aged 0 to 74 years
- Deaths from respiratory system diseases, persons aged 0 to 74 years
 - Deaths from chronic obstructive pulmonary disease, persons aged 45 to 74 years
- Deaths from external causes, persons aged 0 to 74 years
 - Deaths from road traffic injuries, persons aged 0 to 74 years
 - Deaths from suicide and self-inflicted injuries, persons aged 0 to 74 years

Avoidable mortality, 2003 to 2007

Potentially avoidable deaths, 2003 to 2007

- Avoidable deaths at ages 0 to 74: All causes
- Avoidable deaths at ages 0 to 74 years: Cancer
 - Avoidable deaths at ages 0 to 74 years: Colorectal cancer

- Avoidable deaths at ages 0 to 74 years: Lung cancer
- Avoidable deaths at ages 0 to 74 years: Cardiovascular diseases
 - Avoidable deaths at ages 0 to 74 years: Ischaemic heart disease
 - Avoidable deaths at ages 0 to 74 years: Cerebrovascular disease
- Avoidable deaths at ages 0 to 74 years: Respiratory system diseases
 - Avoidable deaths at ages 0 to 74 years: Chronic obstructive pulmonary disease (45 to 74 years)
- Avoidable deaths at ages 0 to 74 years: Road traffic injuries
- Avoidable deaths at ages 0 to 74 years: Suicide and self-inflicted injuries

Amenable (treatable) mortality, 2003 to 2007

Amenable (treatable) mortality at ages 0 to 74 years

Preventable mortality, 2003 to 2007

• Preventable mortality at ages 0 to 74 years

Private health insurance (modelled estimates), 2007-08

Private health insurance, persons aged 15 years and over

MBS services, 2009/10

- GP services to males (MBS and DVA)
- GP services to females (MBS and DVA)
- Total GP services (MBS and DVA)
- 45 Year Old Health Checks by GPs, males aged 45 to 49 years
- 45 Year Old Health Checks by GPs, females aged 45 to 49 years
- 45 Year Old Health Checks by GPs, persons aged 45 to 49 years
- Annual health assessments by GPs, persons aged 75 years and over
- Other services by GPs for Enhanced Primary Care items
- Total services by GPs for Enhanced Primary Care items
- Practice Nurse services under the MBS
- Better Access Care Program: Preparation of Mental Health Care Plan by GPs
- Better Access Care Program: Psychiatrists
- Better Access Care Program: Psychologists
 - Better Access Care Program: General Psychologists
 - Better Access Care Program: Clinical Psychologists
- Better Access Care Program: Social Workers
- Better Access Care Program: Occupational Therapists

Home and Community Care

- Clients living alone
- Clients with carer
- Indigenous clients (as a proportion of total clients)
- Indigenous clients (as a proportion of the Indigenous population)
- Non-English speaking clients
- Total clients
- Allied health care instances at home
- · Allied health care instances at centre
- Care counselling instances
- Case management instances
- Centre based day care instances
- Client care coordination instances
- Domestic assistance instances
- Home maintenance and modification instances
- Meals at centre plus meals at home instances

- Nursing care at centre plus nursing care at home instances
- Personal care instances
- Respite care instances
- Social support instances
- Transport instances
- Total instances of assistance

Aged care places, June 2011

- Residential aged care high-level care places
- Residential aged care low-level care places
- Total residential aged care places
- Community aged care places

Notes on the Data: General information

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Geographical areas

The PHIDU Social Health Atlas data is generally available by the following geographical areas:

- Statistical Local Areas (SLAs), Australian Bureau of Statistics (ABS) Australian Standard Geographical Classification (ASGC) 2011 (and Statistical Local Area groups, PHIDU)
- Local Government Areas (LGAs), ABS ASGC 2006
- Medicare Locals (MLs), Australian Government
- Local Hospital Networks (LHNs), Australian Government
- Quintiles of socioeconomic disadvantage of area (Inequality graphs), produced using either the 2006 or 2011 Index of Relative Socio-economic Disadvantage, as noted for each data indicator.
- Remoteness areas (Remoteness graphs), produced using either the 2006 or 2011 ABS ASGC Remoteness Areas, as noted for each data indicator.

In addition, the 2011 Census data is available by the new ABS Australian Statistical Geographical Standard (ASGS) Statistical Areas Level 2.

Note: Not all the indicators included in this **Notes on the Data** summary are available by all geographical areas – refer to the **Contents** worksheet provided at the front of each data workbook for details.

Statistical information

Data adjustment

For the Census data, the ABS uses a method of 'introduced random error' to ensure that no data are released which could risk the identification of individuals in the statistics. The technique slightly adjusts all cells, resulting in small introduced random errors. Whilst the totals and subtotals in the Census summary tables are subjected to small adjustments to preserve the additivity within the tables, data at the higher geographic level may not be equal to the sum of the data for the component geographic units.

For further information, please refer to the ABS Census Dictionary 2011 (ABS Cat. No. 2901.0) on the following topics:

Introduced random error:

http://www.abs.gov.au/ausstats/abs@.nsf/Lookup/2901.0Chapter38202011

Confidentiality:

http://www.abs.gov.au/ausstats/abs@.nsf/Lookup/2901.0Chapter26802011

'Unknown/ ABS cell adjustment' [Census data] cell in PHIDU data spreadsheets: The 'Unknown/ ABS cell adjustment' cells shown in the spreadsheets for the Census data are the difference between the State/ Territory total and the sum of the SLA data for the indicator of interest: it includes data with 'no usual address', data where the SLA was unknown or not provided and the randomly adjusted counts (which may in some cases result in a negative number).

'Unknown/ ABS cell adjustment'** [non-Census data] cell in PHIDU data spreadsheets: The 'Unknown' cells shown in the worksheets for the non-Census data include data where the SLA was unknown or not provided (e.g. some data are confidentialised by removal of cells with values of <5 or <20 before being provided to PHIDU); or, where the SLA data was produced from postcodes, the 'Unknown' cells include data which is non-mappable, such as Post Office Boxes.

**Labelled 'Unknown/ ABS cell adjustment' in all data spreadsheets, as, in some cases, they include both ABS and non-ABS data indicators.

Standardisation of rates

The rates presented are indirectly standardised. Indirectly standardised rates compare the actual number of events in an area (e.g. the LGA of Bankstown) with the expected number of events based on rates of a reference population (e.g. Australia), generally based on the five-year age group data in this reference population. The standardised ratios are the ratio of the observed (actual) to expected number of events. The observed figures comes from the local area, and the expected from applying the rate in the reference population to the local population.

Age-standardisation is used as comparisons between areas for an indicator are likely to be affected by variations in the age profile of the area. This effectively means any differences in age-standardised rates between areas are reflecting the

influence of factors other than age. For example, the standardised ratios (SRs) (or standardised death ratios – SDRs) for Australia (or respective standard population) are 100. A SR of 110 in an area means the standardised ratio is 10% higher (for an area of its population size and structure) in the area than expected from the Australian (or respective standard population) rates. An index of 85 means the SR is 15% lower (for an area of its population size and structure) in the area than expected from the Australian rates. The indirect method is used as in most instances we cannot get the age for each record at the small area level: were the age data available, we would use the direct method of standardisation.

Statistical significance

The statistical significance was calculated using a Z score calculation, which gives a significance score for the observed number around the expected number for the local population. The expected number is calculated using the indirect method of age standardisation.

The Z score enables a user to assess the statistical significance of the difference between the observed and expected numbers. Z scores are significant at the 95% level if their absolute value is greater than or equal to ± 1.96 , and at the 99% level if their absolute value is greater than or equal to ± 2.58 .

Z score (labelled 'Sig.') in PHIDU data worksheets: Data which are statistically significant, at the 95% confidence level, have been marked *; data which are statistically significant, at the 99% confidence level, have been marked **.

95% Confidence Intervals (95% C.I.s)

A confidence interval is a range in which it is estimated the true population value lies. Confidence intervals of different sizes can be created to represent different levels of confidence that the true population value will lie within a particular range. A common confidence interval used in statistics is the 95% confidence interval. In a 'normal distribution', the 95% confidence interval is measured by approximately two standard errors either side of the estimate.

A confidence interval can be used to describe how reliable the data are. The greater the level of confidence required, the wider the range between the lower and upper confidence intervals. A major factor determining the range of a confidence interval is the **size of the population**.

95% C.I.s in PHIDU data worksheets: The indirectly standardised rates and associated ratios show upper and lower confidence intervals at the 95% level.

Relative Root Mean Squared error (RRMSE)

The RRMSE is a measure of the propensity for the synthetic predictions to give a different value to that which would be found for a region if it were possible to do an accurate census collecting that health indicator. Where the RRMSE values are high for some health indicators, it would be inappropriate to interpret the synthetic predictions as the actual proportion in a region at a given time.

The RRMSE is primarily a measure of prediction error but in its calculation it may also include some aspects of modelling and sampling error. The RRMSE generally decreases as the population size increases, and is used to assess the reliability of predictions.

RRMSE in PHIDU data worksheets: Predictions with RRMSEs from 0.25 and to 0.50 have been marked (~) to indicate that they should be used with caution; and those greater than 0.50 but less than 1 are marked (~~) to indicate that the prediction is considered too unreliable for general use.

Notes on the Data: Indicators and Data sources

Age distribution – Males/ Females/ Persons, 2011

 Age in 5 year groups: 0 to 85+ years/ Broad age groups: 0-14, 15-24, 25-44, 45-64, 65+, 70+, 75+, 85+ years, Estimated Resident Population, 2011

Notes: The Estimated Resident Population (ERP) is derived by applying the following adjustments to the usual residence Census counts:

- removing overseas visitors who were in Australia on Census night from the Census counts;
- adjusting the Census counts for undercounting using results of the Post Enumeration Survey;
- including Australian residents who were temporarily absent overseas on Census night; and
- backcasting the resulting estimates which relate to 8 August 2006 to 30 June 2006 using births, deaths and migration data.

NB: These ERP data are preliminary rebased estimates, and reflect information from the 2011 Census. Final estimates for 2011 will be released in August 2013, based on further refinements to components used to rebase population estimates.

Source: Compiled by PHIDU based on ABS Estimated Resident Population, 30 June 2011

Age distribution – Aboriginal males/ females/ persons, 2011

'Aboriginal' as used in the Social Health Atlas Data workbook and Notes on the Data refers to Aboriginal and Torres Strait Islander peoples.

Age in 5 year groups: 0 to 65+ years, Usual Resident Population, 2011

Notes: The data exclude the 4.9% of people (5.3% for males; 4.5% for females) whose Indigenous status was not recorded the proportion excluded was calculated based on the Australian data).

Source: Compiled by PHIDU based on ABS Census Usual Resident Population, 2011

Indigenous status, 2006 and 2011

Aboriginal population as per cent of total population, Experimental Estimated Resident Population, 2006

Notes: The Experimental Estimated Resident Population has a total of 517,043 Aboriginal persons compared with the 2006 Census-based Usual Resident Population of 455,016. This data has been retained until similar estimates have been produced for 2011.

Source: Compiled by PHIDU based on ABS Experimental Estimated Resident Population, 2006

Aboriginal population as per cent of total population, Usual Resident Population, 2011

Notes: This estimate of the Usual Resident Population is from the 2011 Census; the ABS has not produced an Estimated Resident Population at the SLA level from the 2011 Census.

The data exclude the 4.9% of people whose Indigenous status was not recorded, based on Australian totals (the proportion excluded was calculated based on the Australian data).

Source: Compiled by PHIDU based on ABS Census Usual Resident Population, 2011

Birthplace & non-English speaking residents, 2011

Source for all Birthplace & non-English speaking residents data: Compiled by PHIDU based on ABS Census 2011 data

- Australian-born population, 2011
- People born (overseas) in predominately English speaking countries, 2011
- People born in predominately non-English speaking (NES) countries, 2011
- People born in NES countries resident in Australia for five years or more, 2011
- People born in NES countries resident in Australia for less than five years, 2011

Notes for all *People born in predominately English speaking (ES) / non-English speaking (NES) countries* data: The following countries are designated as 'predominately ES': Canada, Ireland, New Zealand, South Africa, United Kingdom and the United States of America; the remaining countries are designated as 'predominately NES'.

Resident in Australia for five years or more: Data comprise NES residents arriving prior to 2007.

Resident in Australia for less than five years: Data comprise NES residents arriving from 2007 to 2011. The year 2011 is the period 1 January 2011 to 9 August 2011 (Census Night), therefore, the data presented represents a total time of approximately 4 years and 7 months.

The data exclude the 5.6% of the population who did not state their country of birth. In addition, the 'Resident in Australia for five years or more/ less than five years' data exclude the 4.5% of people born overseas who did not state their year of arrival. (The proportions excluded were calculated based on the Australian data).

People aged 5 years and over who were born overseas and reported poor proficiency in English, 2011

Notes: The data comprise people born overseas who reported speaking English 'not well' or 'not at all'.

The data exclude the 0.5% of people born overseas who did not state their proficiency in English, as well as the 5.6% of the population who did not state their country of birth (the proportions excluded were calculated based on the Australian data).

Non-English speaking countries of birth, 2011

Top ten birthplaces of people born in non-English speaking countries, 2011

Notes: The data comprise residents of Australia who were born overseas in one of the predominantly non-English speaking countries which are in the top ten for Australia in terms of high numbers of migrants. These are, from highest to lowest: China (excluding Special Administrative Regions of Hong Kong & Macau, and Taiwan), India, Italy, Vietnam, Philippines, Malaysia, Germany, Greece, Sri Lanka and Lebanon.

Source: Compiled by PHIDU based on ABS Census 2011 data

Total Fertility Rate, 2005 to 2007 and 2011

Total Fertility Rate, 2005 to 2007

Notes: Data are not shown for areas recording fewer than 20 births.

Source: Compiled by PHIDU based on births data, 2005 to 2007 (ABS unpublished); and ABS Estimated Resident Population, 30 June 2005 to 30 June 2007

Total Fertility Rate, 2011 [SLA and LGA data only]

Notes: Total fertility rates are not shown for areas recording fewer than 5 births.

NB: These data are currently only available by Statistical Local Area (SLA) and Local Government Area. Data are also not available for PHIDU SLA groups which include areas in Brisbane, Gold Coast, Townsville, Darwin and Canberra. If you wish to view the 2011 SLA data for these grouped areas, see *Table 3: Births, Summary, Statistical Local Area—2006 to 2011*: <u>Births, Australia, 2011</u>. For Medicare Local, Local Hospital Network and SLA groups, see PHIDU's 2005 to 2007 data.

Source: Compiled by PHIDU based on ABS data in *Table 3: Births, Summary, Statistical Local Area—2006 to 2011* and *Table 4: Births, Summary, Local Government Areas—2006 to 2011:* <u>Births, Australia, 2011</u>

Education, 2010, 2011 and 2012

Full-time participation in secondary school education at age 16, 2011

Notes: As data covering all sectors (government, non-government, Catholic and independent) are not available at the small area level from State and Territory education authorities, the data used in this analysis are from the 2011 Australian Bureau of Statistics (ABS) Population Census. As such they are not official estimates of participation at age 16 in full-time secondary education. However, they are useful in showing the extent of variations between areas, by socioeconomic status and by remoteness.

The data exclude the 4.1% of people whose participation in secondary school education at age 16 was not stated (the proportion excluded was calculated based on the Australian data).

Note that the extent to which those who have left school at this age to enter the labour force is not accounted for in these data - see *Learning or Earning at ages 15 to 19.*

Source: Compiled by PHIDU based on ABS Census 2011 (unpublished) data

Participation in vocational education and training, 2010

Source: Compiled by PHIDU based on data from the National Centre for Vocational Education Research Ltd., 2010; and ABS Estimated Resident Population, 30 June 2010

School leavers enrolled in higher education, 2013

Notes: The data comprise school leavers who are identified as enrolled at an Australian university at 31 March 2013, expressed as a proportion of the Estimated Resident Population aged 17 years at 30 June 2012.

'School leavers' are students who attained a Year 12 qualification in 2012 in any State/ Territory through the completion of one or more Year 12 courses; may include (unless noted otherwise below) adult students, part time students and students doing one or more subjects to improve their overall score (repeating students).

The Estimated Resident Population is based on the number of 17 year olds in 2012, as this is the age of the majority of Year 12 students at 30 June 2012.

Data have been provided by individual States and Territories, other than Queensland. The exclusion of Queensland will under-represent participation in other State and Territories to the extent that students from those jurisdictions enrol in Queensland universities.

Variations in data between States:

Definitions vary across the States, however, the impact of any differences is considered to be small, other than for WA data which include school leavers who have accepted an offer to enrol although such 'acceptances' may not necessarily translate to 'enrolments' (other States and Territories count enrolments). Other differences of note are:

- WA data comprise normal school leavers and those who are repeaters, but exclude mature age students; and, for The University of Notre Dame Australia campuses in WA and NSW, comprise students who are under 20 years of age on 1 March in their year of admission and who have not attempted any post-secondary (TAFE or University) study.
- Tasmanian data include those who apply and are assessed as a Year 12 student (whether in previous year, or earlier).
- School leaver applicants and enrolees self-identify as being of Aboriginal and Torres Strait Islander descent or not. Those of 'unknown' Indigenous status have been included in the non-Indigenous counts. WA universities also admit some Aboriginal and Torres Strait Islander school leavers directly and data from the Tertiary Institutions Service Centre may therefore under-represent their participation.

For more information, please consult the relevant admissions centre as listed in the Source below.

Source: Compiled by PHIDU based on data from the:

1) Universities Admissions Centre (NSW & ACT), Victorian Tertiary Admissions Centre, South Australian Tertiary Admission Centre (SA & NT), Tertiary Institutions Service Centre (WA), The University of Notre Dame Australia (WA & NSW), the University of Tasmania; and

2) ABS Estimated Resident Population, 30 June 2012

People who left school at Year 10 or below, or did not go to school, 2011

The data comprise people who left school at Year 10 or below, or did not go to school, expressed as a rate per 100 people aged 15 years and over (Usual Resident Population)

Source: Compiled by PHIDU based on ABS Census 2011 data

Early child development: AEDI, 2009

- Developmentally vulnerable on 1 or more domains, 2009
- Developmentally vulnerable on 2 or more domains, 2009
- Physical health and wellbeing domain developmentally vulnerable, at risk and on track, 2009
- Social competence domain developmentally vulnerable, at risk and on track, 2009
- Emotional maturity domain developmentally vulnerable, at risk and on track, 2009
- Language and cognitive (school based) domain developmentally vulnerable, at risk and on track, 2009
- Communication skills and general knowledge domain developmentally vulnerable, at risk and on track, 2009

Notes for all *Early child development* data: In 2009, the Australian Early Development Index (AEDI), which provides a picture of early childhood development outcomes for Australia, was undertaken nationwide. In the 2009 data collection, information was collected on 261,147 Australian children (97.5 per cent of the estimated five-year-old population) in their first year of full-time school between 1 May and 31 July. A follow-up data collection occurred in some small areas in 2010. In addition, small numbers of children were combined so that more communities could have their results released.

The initial results from the AEDI provide communities and schools with information about how local children have developed by the time they start school across five areas of early childhood development: physical health and wellbeing, social competence, emotional maturity, language and cognitive skills (schools-based), and communication skills and general knowledge.

The AEDI results report on the number of children scoring in the following percentile ranges: 0 to 10th percentile (developmentally vulnerable), 11th to 25th percentile (developmentally at risk), 26th to 50th (on track lower range) and above the 50th percentile (on track higher range).

The data shown include children who were developmentally vulnerable (0 to 10th percentile) in one or more/ two or more domains; children in each domain who were assessed as being developmentally vulnerable (0 to 10th percentile), developmentally at risk (11th to 25th percentile) or developmentally on track (above the 25th percentile).

Data are not shown for areas where there were fewer than 15 children tested.

Source for all *Early child development* data: Compiled by PHIDU based on data from the AEDI 2009 Research CURF Version 1, Released August 2011, DEEWR

Learning or Earning, 2011

Learning or Earning at ages 15 to 19, 2011

Notes: The data comprise the number of 15 to 19 year olds who are engaged in school, work or further education/ training, expressed as a proportion of all those aged 15 to 19 years.

Source: Compiled by PHIDU based on ABS Census 2011 data

Families, 2011

Single parent families with children aged less than 15 years, 2011

Notes: The denominator for this indicator has changed from the data PHIDU published for the 2006 Census. The denominator is now 'Families with children under 15 years', not 'Total families'.

Source: Compiled by PHIDU based on ABS Census 2011 data

Jobless families with children aged less than 15 years, 2011

Source: Compiled by PHIDU based on ABS Census 2011 (unpublished) data

Children aged less than 15 years in jobless families, 2011

Source: Compiled by PHIDU based on ABS Census 2011 (unpublished) data

Housing/Transport, 2011

Households in dwellings receiving rent assistance from Centrelink, June 2011

Notes: The Centrelink rent assistance data is provided for individual recipients, and there may be multiple individual recipients in a household: to the extent that this occurs, the proportion will be understated. However, dwellings are the most appropriate denominator available for this dataset. In addition, some recipients live in non-private dwellings, which are not included in the denominator: to the extent that this occurs, the proportion will be overstated.

The Centrelink data were provided at the Statistical Local Area (SLA) level and data cells with less than 20 counts were removed (confidentialised). Due to the confidentialisation of data cells, there may be undercounting of some of the final numbers presented where the geographies (Local Government Area or Medicare Local) were aggregated based on

confidentialised (SLA) cells. The 'Unknown' data cells in the worksheets are calculated from the difference between the sum of the SLA data to the State/Territory totals, and include the sum of these confidentialised data.

Source: Compiled by PHIDU based on:

- 1) Renters: Centrelink as an agent for Families, Housing, Communities and Indigenous Affairs, June 2011; and
- 2) Dwellings: ABS Census 2011 data
- Dwellings rented from the government housing authority, 2011

Notes: The data exclude the population in the 2.5% of dwellings for which the tenure type was not stated (the proportion excluded was calculated based on the Australian data).

Source: Compiled by PHIDU based on ABS Census 2011 data

Low income households with mortgage stress, 2011

Notes: The data comprise households in the bottom 40% of income distribution (those with less than 80% of median equivalised income), spending more than 30% of income on mortgage repayments.

Income is equivalised; equivalised household income per week can be viewed as an indicator of the economic resources available to a standardised household. For a lone person household it is equal to household income. For a household comprising more than one person, it is an indicator of the household income that would be needed by a lone person household to enjoy the same level of economic wellbeing.

Income varies by State/ Territory: NSW, \$633; Vic, \$640; Qld, \$649; SA, \$551; WA, \$699; Tas, \$488; NT, \$853; ACT, \$987.

The data exclude the population in the 10.8% of private dwellings for which mortgage stress data was not recorded (the proportion excluded was calculated based on the Australian data).

NB: For caveats regarding this data, please refer to the attached Housing Costs caveats (.pdf).

Source: Compiled by PHIDU based on ABS Census 2011 (unpublished data)

Low income households with rental stress, 2011

Notes: The data comprise households in the bottom 40% of the income distribution (those with less than 80% of median income), spending more than 30% of their income on rent.

Income is equivalised; equivalised household income per week can be viewed as an indicator of the economic resources available to a standardised household. For a lone person household it is equal to household income. For a household comprising more than one person, it is an indicator of the household income that would be needed by a lone person household to enjoy the same level of economic wellbeing.

Income varies by State/ Territory: NSW, \$633; Vic, \$640; Qld, \$649; SA, \$551; WA, \$694; Tas, \$488; NT, \$853; ACT, \$987.

The data exclude the population in the 9.3% of private dwellings for which rental stress data was not recorded (the proportion excluded was calculated based on the Australian data).

NB: For caveats regarding this data, please refer to the attached Housing Costs caveats (.pdf).

Source: Compiled by PHIDU based on ABS Census 2011 (unpublished) data

Low income households with financial stress from mortgage or rent, 2011

Notes: The data comprise households in the bottom 40% of the income distribution (those with less than 80% of median income), spending more than 30% of their income on rent mortgage repayments or rent.

Refer to the notes on the above two indicators for the specific income levels and other information.

Source: Compiled by PHIDU based on ABS Census 2011 (unpublished) data

Private dwellings with no motor vehicle, 2011

Notes: The data exclude the population in the 3.0% of dwellings for which the number of motor vehicles was not stated (the proportion excluded was calculated based on the Australian data).

Source:: Compiled by PHIDU based on ABS Census 2011 data

Income support recipients, June 2011

Note for *all Income support recipients* data: The Centrelink data were provided at the Statistical Local Area (SLA) level and data cells with less than 20 counts were removed (confidentialised). Due to the confidentialisation of data cells, there may be undercounting of some of the final numbers presented, where:

- the geographies (Local Government Area, Medicare Local or Local Hospital Network) were aggregated based on confidentialised (SLA) cells; and/ or
- b) the final data presented is based on combining two indicator sub-sets, which may include the aggregation of confidentialised and non-confidentialised cells.

The 'Unknown' data are calculated from the difference between the sum of the SLA data to the State/Territory totals, and include the sum of these confidentialised data.

Age pensioners, June 2011

Notes: The Age Pension is available from Centrelink for persons who have reached Age Pension age. The Age Pension age depends on a person's date of birth, as follows:

- If born before 1/7/52, Age Pension age is 65
- If born before 31/12/48, Age Pension age is 64.5
- If born between 1/1/49 and 30/6/52, Age Pension age is 65

For men and women:

- If born between 1/7/52 and 31/12/53, Age Pension age is 65.5

- If born between 1/1/54 and 30/06/55, Age Pension age is 66
- If born between 1/7/55 and 31/12/56, Age Pension age is 66.5
- If born from 1/1/57 or later, Age Pension age is 67.

The Department of Veterans' Affairs (DVA) provides a Service Pension (Age) to eligible persons who have reached 60 years.

Centrelink pays the vast majority of Age Pensions. Age pensioners who also receive a Disability Pension from the Department of Veterans' Affairs (DVA) have the choice of having their Age Pension paid by either DVA or Centrelink.

In some instances, percentages are calculated at greater than 100%; this may be the result of the address data being a postcode which is not allocated to the correct SLA by the concordances available. In time, with more reliable recording of address details, these occurrences should be reduced. Note that it is unlikely to be the result of people claiming both the Age Pension and a DVA Service Pension (Age), as checks are made each year to ensure that such events do not occur.

Source: Compiled by PHIDU based on data from Centrelink as agent for the Department of Families, Housing, Community Services and Indigenous Affairs, June 2011; Department of Veterans' Affairs, 1 July 2011; and ABS Estimated Resident Population, 30 June 2011

Disability support pensioners, June 2011

Notes: People eligible for a Disability Support Pension (DSP) paid by Centrelink, must be aged 16 years or over and have not reached age-pensionable age; be permanently blind or have a physical, intellectual or psychiatric impairment level of 20% or more and a continuing inability to work for at least 15 hours per week. Details of people under 60 years of age receiving the Department of Veterans' Affairs (DVA) Service Pension (permanently incapacitated) – an income support pension – have been combined with the Centrelink DSP data; people above these ages receive an Age Pension or DVA Service Pension (Age).

Source: Compiled by PHIDU based on data from Centrelink as agent for the Department of Families, Housing, Community Services and Indigenous Affairs, June 2011; Department of Veterans' Affairs, 1 July 2011; and ABS Estimated Resident Population, 30 June 2011

• Female sole parent pensioners, June 2011

Notes: People eligible for a Parenting Payment (single) paid by Centrelink comprise female and male sole parents with at least one child under 16 years of age (who meet certain qualifications, or whose child attracts a child disability allowance). Only female sole parent pensioners have been included because females comprise the majority of sole parent pensioners.

Source: Compiled by PHIDU based on data from Centrelink as agent for the Department of Education, Employment and Workplace Relations, June 2011; and ABS Estimated Resident Population, 30 June 2011

Unemployment beneficiaries, June 2011

Notes: People receiving an 'unemployment benefit' – which includes the Newstart Allowance or Youth Allowance (other)¹ paid by Centrelink – are shown as proportion of the eligible population (of persons aged 16 to 64 years).

Source: Compiled by PHIDU based on data from Centrelink as agent for the Department of Education, Employment and Workplace Relations, June 2011; and ABS Estimated Resident Population, 30 June 2011

Long-term unemployment beneficiaries. June 2011

Notes: People receiving an 'unemployment benefit' – which includes the Newstart Allowance or Youth Allowance (other)¹ paid by Centrelink – for more than 182 days (approximately 6 months) are shown as proportion of the eligible population (of persons aged 16 to 64 years).

Source: Compiled by PHIDU based on data from Centrelink as agent for the Department of Education, Employment and Workplace Relations, June 2011; and ABS Estimated Resident Population, 30 June 2011

Youth unemployment beneficiaries, June 2011

Notes: Young people receiving an 'unemployment benefit' – which includes the Newstart Allowance (people aged 15 to 24 years) or Youth Allowance (other)¹ paid by Centrelink – are shown as proportion of the population aged 15 to 24 years.

Source: Compiled by PHIDU based on data from Centrelink as agent for the Department of Education, Employment and Workplace Relations, June 2011; and ABS Estimated Resident Population, 30 June 2011

Low income, welfare-dependent families (with children), June 2011

Source: Compiled by PHIDU based on data from Centrelink as agent for the Department of Families, Housing, Community Services and Indigenous Affairs, June 2011; and ABS Estimated Resident Population, 30 June 2011

Children in low income, welfare-dependent families, June 2011

Source: Compiled by PHIDU based on data from Centrelink as agent for the Department of Families, Housing, Community Services and Indigenous Affairs, June 2011; and ABS Census 2011

Notes for both Low income, welfare-dependent families and Children in low income, welfare-dependent families data (above):

For 2011, families included are those with children under 16 years and with incomes under \$31,786 p.a. in receipt of the Family Tax Benefit (A) (whether receiving income support payments or not). These families would all receive the Family Tax Benefit (A) at the maximum level.

¹ Youth Allowance (other) is largely comprised of unemployed people aged 16 to 21 looking for full-time work or undertaking approved activities, such as part-time study or training. It excludes Youth Allowance customers who are full-time students or undertaking an apprenticeship/ traineeship.

The level of income used for this data was based on the *Poverty Lines: Australia, June Quarter 2011*, which contains a weekly income for a single parent with two children, including housing costs. *Poverty Lines: Australia* is a quarterly newsletter that updates the Henderson Poverty Line as defined in the 1973 Commonwealth Commission of Inquiry into Poverty. Poverty lines are presented for a range of family sizes, in order to avoid the situation of poverty. The updated Poverty Lines take into account changes in the average income level of all Australians, reflecting the idea that poverty is relative

[For further information, see: *Poverty Lines: Australia* (ISSN 1448-0530), Melbourne Institute of Applied Economic and Social Research, available from: http://melbourneinstitute.com/miaesr/publications/indicators/poverty-lines-australia.html]

Health care card holders, June 2011

Notes: People eligible for a Health care card (HCC) issued by Centrelink are those aged 0 to 64 years who do not hold a Pensioner Concession Card and receive one of the following Centrelink payments: Carer Allowance; Carer Payment (child) (short term or episodic); Exceptional Circumstances Relief Payment; Family Tax Benefit A (maximum rate only); Mobility Allowance (if not receiving a Disability Support Pension); Newstart Allowance; Parenting Payment (partnered); Partner Allowance; Special benefit; Widow Allowance; and Youth Allowance (job seekers only). People may also be eligible for a HCC if they are a foster carer; ex-holder of a Carer Allowance (child) Health Care Card; or are a low income earner.

Source: Compiled by PHIDU based on data from Centrelink, as agent for the Department of Families, Housing, Community Services and Indigenous Affairs, June 2011; and ABS Estimated Resident Population, 30 June 2011

Pensioner concession card holders, June 2011

Notes: People eligible for a Pensioner Concession Card issued by Centrelink comprise people aged 15 years and over who receive one of the following Centrelink payments: Age Pension; Bereavement Allowance; Carer Payment (adult); Carer Payment (child); Disability Support Pension; Newstart Allowance and Youth Allowance (job seeker) if single and caring for a dependent child; and Parenting Payment (single). People aged over 60 years may receive a Pensioner concession card if they have been receiving income support payments for more than nine months and receive: Newstart Allowance; Parenting Payment (partnered); Partner Allowance; Sickness Allowance; Special Benefit; and Widow Allowance. People may also be eligible for a Pensioner Concession Card if they have a partial capacity to work and are receiving any of the following payments: Newstart Allowance; Parenting Payment (partnered); and Youth Allowance (job seeker).

Source: Compiled by PHIDU based on data from Centrelink, as agent for the Department of Families, Housing, Community Services and Indigenous Affairs, June 2011; and ABS Estimated Resident Population, 30 June 2011

Total concession card holders, June 2011

Notes: Total concession card holders is the sum of those who hold either a Health Care Card or a Pensioner Concession Card. For details on the eligibility criteria for these cards see the above **Notes** for *Health care card holders* and *Pensioner concession card holders*.

NB: The Centrelink card holders' data were provided at the Statistical Local Area (SLA) level and data cells with less than 20 counts were removed (confidentialised). In addition, where the cells were less than 20 for either group, the corresponding cell for the presentation of the 'total' concession card holders data was removed (confidentialised).

Source: Compiled by PHIDU based on data from Centrelink, as agent for the Department of Families, Housing, Community Services and Indigenous Affairs, June 2011; and ABS Estimated Resident Population, 30 June 2011

Internet access at home, 2011

- No Internet connection, 2011
- Total with Internet connections, 2011
 - Broadband Internet connection, 2011
 - Dial-up Internet connection, 2011
 - Other Internet connection, 2011

Notes for all *Internet access at home* data: The data include Internet access at private dwellings only; the data for the population in the 3.5% of dwellings for which Internet access was not stated are excluded (the proportion excluded was calculated based on the Australian data).

Source for all Internet access at home data: Compiled by PHIDU based on ABS Census 2011 data

Labour force, 2011, 2012 and 2013

Unemployment, June 2013

Notes: These estimates, from the *Small Area Labour Markets – Australia* data series, are based on the Structure Preserving Estimation (SPREE) methodology which enables the generation of small area unemployment, unemployment rate and labour force estimates. They differ from the figures for people receiving an unemployment benefit as different rules are applied to eligibility for a welfare payment and being considered as unemployed. The estimates presented are derived from three primary data sources:

- 1. Centrelink data on people in receipt of Newstart or Youth Allowance (other) See 1 above, by postcode
- 2. ABS Labour Force Survey data at the ABS Labour Force Region level; and
- 3. ABS Census of Population and Housing labour force data at the Statistical Local Area (SLA) level.

The unemployment/ labour force estimates presented are based on the 'smoothed' data series, where the data has been averaged over four quarters to minimise the variability inherent in the estimates at the SLA level.

Source: Compiled by PHIDU based on *Small Area Labour Markets - Australia*, Department of Education, Employment and Workplace Relations, June Quarter 2013

Labour force participation, June 2012

Notes: See above Notes for Unemployment.

Source: Compiled by PHIDU based on *Small Area Labour Markets - Australia*, Department of Education, Employment and Workplace Relations, June Quarter 2012; and ABS Estimated Resident Population, 30 June 2012

Female labour force participation, 2011

Notes: Other labour force measures in this atlas (unemployment, labour force participation) have been compiled from data provided by DEEWR. As DEEWR do not produce small area estimates of female labour force participation, this indicator has been calculated from data in the ABS Population Census. As it is based on self-report, and not subject to the criteria for labour force participation applied by the ABS in the Labour Force Survey and utilised by DEEWR in their estimates, it will not necessarily be consistent with the data for total labour force participants.

Source: Compiled by PHIDU based on ABS Census 2011 data

Summary measure of disadvantage, 2011

• Index of Relative Socio-economic Disadvantage (IRSD), 2011

Notes: The Index has a base of 1000 for Australia: scores above 1000 indicate relative lack of disadvantage and those below indicate relatively greater disadvantage.

For further information see the information provided by the Australian Bureau of Statistics (ABS) at: http://www.abs.gov.au/websitedbs/censushome.nsf/home/seifa

or download the ABS Census of Population and Housing: Socio-Economic Indexes for Areas (SEIFA), Australia, 2011 (Cat. no. 2033.0.55.001) technical paper at: http://www.abs.gov.au/ausstats/abs@.nsf/mf/2033.0.55.001

NB: The 2011 IRSD differs from earlier IRSD releases in that the Indigenous variable has been removed – refer to the technical paper (see above) for further information.

Source: Compiled by PHIDU based on ABS Socio -Economic Indexes for Areas (SEIFA), 2011 data. Note: The SLA and LGA data were re-produced from the ABS originals. The PHIDU Statistical Local Area group, Statistical Subdivision, Local Hospital Network, Medicare Local, State/ Territory and Australian totals were constructed using population weighted averages, based on the published ABS SLA data (which was compiled by the ABS from population weighted SA1s).

Child care: unpaid, 2011

- Child care to own child/children (unpaid), provided by people aged 15 years and over, 2011
- Child care to other child/children (unpaid), provided by people aged 15 years and over, 2011
- Total (unpaid) child care, provided by people aged 15 years and over, 2011

Notes for all *Child care: unpaid* **data:** The data include unpaid child care provided by people aged 15 years and over who, in the two weeks prior to Census Night, spent time caring for a child/children (under 15 years).

The data indicators presented are:

- Unpaid child care provided by peopled aged 15 years and over to their own child/ children (aged under 15 years)
- Unpaid child care provided by people aged 15 years and over to other child/ children (aged under 15 years); and
- Total (unpaid) child care provided by people aged 15 years and over this includes the categories of people caring for
 a) their own child/ children only; b) other child/ children only; and c) both their own child/ children and other/ children
 combined (the data for this final group c) are not shown separately) (children aged under 15 years)

The data exclude the 7.8% of persons aged 15 years and over whose engagement in unpaid child care was not stated (the proportion excluded was calculated based on the Australian data).

Source for all Child care: unpaid data: Compiled by PHIDU based on ABS Census 2011 data

Community strengths, 2010 and 2011

ABS Census data, 2011

Voluntary work for an organisation or group - people aged 15 years and over, 2011

Notes: The 'Voluntary work for an organisation or group' variable records people who spent time doing unpaid voluntary work through an organisation or group in the twelve months prior to Census Night.

The data exclude the 8.2% of persons aged 15 years and over whose participation in voluntary work was not stated (the proportion excluded was calculated based on the Australian data).

Source: Compiled by PHIDU based on ABS Census 2011 data

Modelled estimates, 2010

[Note: Data for the indicators in this section are available by SLA, LGA, ML and LHN only – not available by Quintiles of socioeconomic disadvantage of area or Remoteness areas.]

- Persons aged 18 years and over who did unpaid voluntary work in the last 12 months through an organisation (modelled estimates), 2010
- Persons aged 18 years and over who are able to get support in times of crisis from persons outside the household (modelled estimates), 2010

- Persons aged 18 years and over (or their partner) who provide support to other relatives living outside the household (modelled estimates), 2010
- Persons aged 18 years and over who feel very safe/safe walking alone in local area after dark (modelled estimates),
 2010
- Persons aged 18 years and over who disagree/strongly disagree with acceptance of other cultures (modelled estimates), 2010

Notes for all Community strengths (modelled estimates) data: The ABS 2010 General Social Survey (GSS) includes a range of questions which aim to assess community strength, both in terms of its positive aspects (such as volunteering, tolerance of other cultures and availability of personal supports) and the negative effects on people when community strength is less apparent (such as feeling unsafe in the community, social isolation and the consequences of financial stress and disadvantage). The GSS collected data on the range of social dimensions from the same individual to enable analysis of the interrelationships in social circumstances and outcomes, including the exploration of multiple advantage and disadvantage experienced by that individual. For further information on the indicators, please refer to the General Social Survey: User Guide, Australia, 2010 (ABS Cat. No. 4159.0.55.002) - Glossary, available at: http://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/4159.0.55.002Glossary12010?OpenDocument.

The ABS survey was conducted by personal interview (using a Computer Assisted Interviewing questionnaire) and included people aged 18 years and over resident in private dwellings, throughout the not very remote areas of Australia, from August to November 2010.

The 2010 GSS achieved a response rate of 87.6%, with a total sample from the survey of 15,028 dwellings. Approximately 2,551 respondents (15%) did not provide one or more required answers but were deemed to have responded adequately to be included in the survey.

The modelled estimates presented have been synthetically predicted at the Statistical Local Area (SLA) level from the 2010 GSS.

Through the use of synthetic estimation techniques it is possible to produce SLA level statistics. Synthetic estimation predicts a value for an area with a small population based on modelled survey data and known characteristics of the area. A modelled estimate can be interpreted as the likely value for a 'typical' area with those characteristics. The model used for predicting small area data is determined by analysing data at a higher geographic level, in this case Australia. The relationship observed at the higher geographic level between the characteristic of interest and known characteristics is assumed to also hold at the small area level. The estimates are made by applying the model to data on the known characteristics that can be reliably estimated at the small area level. This modelling technique can be considered as a sophisticated prorating of Australian estimates to the small area level.

The ABS has used various methods to produce small area predictions from a number of surveys. The methods are described in the *Small Area Estimates Manual version 1.0* which was released in May 2006 and is available on the National Statistical Service website at: http://www.nss.gov.au/nss/home.NSF/pages/Small+Areas+Estimates?OpenDocument

Users of these modelled estimates should note that they do not represent data collected in administrative or other data sets. As such, they should be used with caution, and treated as indicative of the likely social dimensions present in an area with these demographic and socioeconomic characteristics.

What the estimates do achieve, however, is to summarise the various demographic, socioeconomic and administrative information available for an area in a way that indicates the expected social dimensions for a typical area in Australia with the same characteristics. In the absence of accurate, localised information about these indicators, such predictions can usefully contribute to policy and program development, service planning and other decision-making processes that require an indication of the geographic distribution of the social indicator.

The published GSS data and these small area estimates differ in scope. The 2010 GSS covered persons residing in urban and rural areas and excluded persons residing in collection districts (CDs) in Very Remote areas under the ABS remoteness classification. As such estimates were not produced for SLAs with more than 50% of their populations residing in Very Remote CDs. Due to the exclusion of persons living in CDs in Very Remote areas of Australia, survey estimates for the majority of SLAs in the Northern Territory are unreliable.

This and other limitations of the method mean that predictions have not been published for SLAs:

- 1) with populations under 1,000;
- 2) in which 50% or more of the population lives in Very Remote areas, as determined by ABS;
- 3) in which Aboriginal people comprise 75% or more of the population; and
- 4) where the relative root mean square errors (RRMSEs) on the predictions was 1 or more.

NB: Estimates with RRMSEs from 0.25 and to 0.50 have been marked (~) to indicate that they should be used with caution; and those greater than 0.50 but less than 1 are marked (~~) to indicate that the prediction is considered too unreliable for general use.

Note re additional data (Victoria only): In Victoria, indicators of community strength are collected via computer-assisted telephone interviewing as part of the Victorian Population Health Survey conducted by the Department of Health. Data estimates are available at the Local Government Area. See:

http://www.health.vic.gov.au/healthstatus/survey/vphs.htm

Source for all Community strengths (modelled estimates) data: Compiled by PHIDU based on modelled estimates from the 2010 General Social Survey, ABS (unpublished); and ABS Estimated Resident Population, 30 June 2010

http://www.health.vic.gov.au/healthstatus/survey/vphs.htm

Personal and financial stressors (modelled estimates), 2010

[Note: Data for the indicators in this section are available by SLA, LGA, ML and LHN only – not available by Quintiles of socioeconomic disadvantage of area or Remoteness areas.]

- Persons aged 18 years and over whose household could raise \$2,000 within a week (modelled estimates), 2010
- Persons aged 18 years and over whose household had at least one cash flow problem in the last 12 months (modelled estimates), 2010
- Persons aged 18 years and over whose household took at least one dissaving action² in the last 12 months (modelled estimates), 2010
- Persons aged 18 years and over who had government support as their main source of income in the last 2 years (modelled estimates), 2010
- Persons aged 18 years and over who had government support as their main source of income, for 12 months or more, within the past 24 months (modelled estimates), 2010

Notes for all Personal and financial stressors (modelled estimates) data: Refer to above Notes on the Data for Community strengths – Modelled estimates.

Source for all *Personal and financial stressors (modelled estimates)* **data:** Compiled by PHIDU based on modelled estimates from the 2010 General Social Survey, ABS (unpublished); and ABS Estimated Resident Population, 30 June 2010

Health status and disability (modelled estimates), 2010

[Note: Data for the indicators in this section are available by SLA, LGA, ML and LHN only – not available by Quintiles of socioeconomic disadvantage of area or Remoteness areas.]

- Persons aged 18 years and over with self-assessed health status of fair/poor (modelled estimates), 2010
- Persons aged 18 years and over with profound/severe/moderate/mild core activity restriction (modelled estimates),
 2010

Notes for all *Health status and disability (modelled estimates)* data: Refer to above Notes on the Data for *Community strengths – Modelled estimates*.

Source for all *Health status and disability (modelled estimates)* data: Compiled by PHIDU based on modelled estimates from the 2010 General Social Survey, ABS (unpublished); and ABS Estimated Resident Population, 30 June 2010

Access to services: financial and transport barriers (modelled estimates), 2010

- Persons aged 18 years and over who delayed medical consultation because they could not afford it (modelled estimates), 2010
- Persons aged 18 years and over who delayed purchasing prescribed medication because they could not afford it (modelled estimates), 2010
- Persons aged 18 years and over who often has a difficulty or can't get to places needed with transport (modelled estimates), 2010
- Persons aged 18 years and over who had difficulty accessing services (modelled estimates), 2010
- Persons aged 18 years and over who accessed the Internet at home in the past 12 months (modelled estimates), 2010

Notes for all Access to services: financial and transport barriers (modelled estimates) data: Refer to above Notes on the Data for Community strengths – Modelled estimates.

Source for all Access to services: financial and transport barriers (modelled estimates) data: Compiled by PHIDU based on modelled estimates from the 2010 General Social Survey, ABS (unpublished); and ABS Estimated Resident Population, 30 June 2010

Mothers and babies, late 2000s

Low birth weight babies, 2008 to 2010 (NSW, Qld, SA & ACT), 2009 to 2011 (Vic, WA & Tas), 2006 to 2008 (NT)

Notes: The data comprise all babies (live born) weighing less than 2500 grams at birth, expressed as a proportion of all live births (data over 3 years).

Data are not shown for areas where there were fewer than 20 births.

Source: Compiled by PHIDU based on data from NSW Department of Health (2008 to 2010), Vic Health (2009 to 2011), SA Health (2008 to 2010), WA Department of Health (2009 to 2011), NT Department of Health and Families (2006 to 2008), the Tasmanian Perinatal Database (2009 to 2011), and ACT Health (2008 to 2010)

² Any action where spending is greater than income thereby reducing already accumulated savings or leading to borrowing to finance the expenditure. Examples of dissaving actions include: reducing home loan repayments, increasing balance owed on credit cards, selling shares or other assets, taking out a personal loan etc.

Smoking during pregnancy, 2008 to 2010 (NSW, Qld, SA & ACT), 2009 to 2011 (Vic, WA & Tas), 2006 to 2008 (NT)

Notes: The data comprise the women who reported that they smoked during a pregnancy, expressed as a proportion of the number of pregnancies. Note that the data may include women who were pregnant more than once during the time period (3 years).

Source: Compiled by PHIDU based on data from NSW Department of Health (2008 to 2010), Vic Health (2009 to 2011), SA Health (2008 to 2010), WA Department of Health (2009 to 2011), NT Department of Health and Families (2006 to 2008), the Tasmanian Perinatal Database (2009 to 2011), and ACT Health (2008 to 2010)

Child health, late 2000s

• Children fully immunised at 1 year of age, 2 years of age and 5 years of age, 2011/12

Notes:

The data presented are of registered* children fully immunised at 1 year of age, 2 years of age and 5 years of age.

For the purposes of reporting the data, fully immunised means a child receives the vaccinations due at or immediately prior to the age at which the measurement occurs. It is assumed that all previous vaccinations were received.

The definitions of fully immunised are:

- Children aged 1 year: Fully immunised at 1 year means that a child aged 12 months to less than 15 months received their third vaccination for diphtheria, tetanus, whooping cough and polio and either their second or third vaccination (dependent on the type of vaccine used) for hepatitis B and Haemophilus influenzae type b, all prior to the age of 1 year. It is assumed that all previous vaccinations were received.
- **Children aged 2 years:** Fully immunised at 2 years means that a child aged 24 to less than 27 months received their third or fourth vaccination (dependent on the type of vaccine used) for diphtheria, tetanus, whooping cough and Haemophilus influenzae type b, their third vaccination for polio and hepatitis B and their first vaccination for measles, mumps and rubella, all prior to the age of 2 years. It is assumed that all previous vaccinations were received.
- **Children aged 5 years:** Fully immunised at 5 years means that a child aged 60 to less than 63 months received their fourth or fifth vaccination (dependent on the type of vaccine used) for diphtheria, tetanus and whooping cough, their fourth vaccination for polio and their second vaccination for measles mumps and rubella, all prior to the age of 5 years. It is assumed that all previous vaccinations were received.

Data are not shown for areas where there were fewer than 26 registered children or fewer than 6 children immunised.

*Registered on the Australian Childhood Immunisation Register (ACIR). The ACIR is a national register that records vaccinations given to children under seven years old. It also provides immunisation history statements to parents or guardians.

Source: Compiled by PHIDU based on data provided by the Australian Childhood Immunisation Register, Medicare Australia, 2011/12

Infant deaths, 2006 to 2010

Notes: The data presented are of deaths that occurred before 12 months of age.

Data are not shown for areas where there were fewer than 20 births.

Source: Compiled by PHIDU based on deaths data supplied by ABS on behalf of State and Territory Registrars of Deaths for 2006 to 2010; and ABS Births, 2006 to 2010

Child mortality, 2006 to 2010

Notes: The data presented are of deaths between 1 and 4 years of age.

Source: Compiled by PHIDU based on deaths data supplied by ABS on behalf of State and Territory Registrars of Deaths for 2006 to 2010; and ABS Estimated Resident Population, 30 June 2006 to 30 June 2010

Screening, mid to late 2000s

Bowel screening data [only SLA data currently available]

Conditions of Use for all *bowel screening* **data:** Users of the National Bowel Cancer Screening Program (NBCSP) data must acknowledge the Department of Health and Ageing as the original source of the data and include the following disclaimer:

- 1. Formal publication and reporting of the NBCSP data is undertaken by the Australian Institute of Health and Welfare on behalf of the Department of Health and Ageing. NBCSP data included in this report provided by the Department of Health and Ageing is not part of the formal publication and reporting process for NBCSP data.
- 2. Cautionary note about small numbers Due to a larger degree of statistical fluctuation in small numbers, great care should be taken when assessing apparent differences involving small numbers and measures based on small numbers.

Source for all *bowel screening* data: Compiled by PHIDU based on data provided by the Department of Health and Ageing from the National Bowel Cancer Screening Program, 2010

NB: These data are currently only available by Statistical Local Area.

- Total males who participated in the National Bowel Cancer Screening Program (NBCSP), 2010
- Total females who participated in the NBSCP, 2010
- Total persons who participated in the NBSCP, 2010

Notes for all *bowel screening participation* **data:** The data comprise the number of people aged 50, 55 or 65 years who participated in the National Bowel Cancer Screening Program in 2010, expressed as a proportion of the number of people aged 50, 55 or 65 years who were invited to participate in the National Bowel Cancer Screening Program in 2010.

Fewer than six participants (including zero results) are not shown due to confidentiality.

NBCSP: positive test result, persons, 2010

Notes: The outcome indicator presented is referred to as a 'positive test result'; a positive FOBT result indicates that blood has been found in the sample provided.

Less than six people (including zero results) with a positive test result in an area are not shown due to confidentiality. It is estimated that around 10 per cent of positive test results have been confidentialised.

The data comprise the number of people aged 50, 55 or 65 years who received a positive test result from the Faecal Occult Blood Test (FOBT) in the National Bowel Cancer Screening Program in 2010, expressed as an age-standardised rate per 100 population aged 50, 55 or 65 years who participated in the National Bowel Cancer Screening Program in 2010.

Breast screening data

 Breast screening participation, females aged 50 to 69 years, 2006 and 2007 (Vic), 2007 and 2008 (Qld, WA & ACT), 2009 and 2010 (SA)

Notes: The participation rate for the 24 month period to the end of each calendar year is based on the actual number of women screened as a percentage of the average of the ABS Estimated Resident Population for the two corresponding calendar years. If a woman has attended more than once in the 24 months, she is counted once only, and the age is taken from the first visit.

The data do not include women who undergo private screening; the impact of such services is estimated to be quite small – see: Department of Health and Ageing (2009) *BreastScreen Australia evaluation: Medicare Benefits Schedule (MBS) Mammography Analysis Project.* Screening monograph no. 11/2009. Canberra: Commonwealth of Australia.

The South Australian SLAs of Cleve, Franklin Harbour, Kangaroo Island, Kimba and Wudinna have been confidentialised as the Mobile Breast Screening Units in these regions were operating on a 25-26 month cycle. This means the data would not truly reflect the participation of women in these areas. In addition, the values for the LGAs, Statistical Divisions and Subdivisions containing these SLAs will be understated.

The data for the Western Australian SLAs of Fremantle (C) - Inner and Fremantle (C) - Remainder have been pooled together; as have data for Narrogin (S) and Narrrogin (T); and Perth (C) - Inner and Perth (C) - Remainder.

In some instances, percentages are calculated at greater than 100%; this may be the result of:

- the address data being a postcode which is not allocated to the correct SLA by the concordances available; or
- the address of the facility where the consultation is held or the service is provided being used, rather than the address of the client/ patient.

In time, with more reliable recording of address details, these occurrences should be reduced.

Data are not available for New South Wales, Tasmania and the Northern Territory.

Source: Compiled by PHIDU based on data from:

- 1) BreastScreen Victoria, 2006 and 2007; BreastScreen Qld, 2007 and 2008; BreastScreen WA, 2007 and 2008; BreastScreen ACT, 2007 and 2008; and BreastScreen SA, 2009 and 2010; and
- 2) ABS Estimated Resident Population, average of 30 June 2006 and 30 June 2007 (Vic); average of 30 June 2007 and 30 June 2008 (Qld, WA and ACT); and average of 30 June 2009 and 30 June 2010 (SA)
- Breast screening outcomes: cancer, females aged 50 to 69 years, 2006 and 2007 (Vic), 2007 and 2008 (Qld, WA & ACT), 2009 and 2010 (SA)

Notes: The breast screening outcomes for the 24 month period to the end of each calendar year is based on the actual number of women diagnosed with breast cancer as an age-standardised rate of the actual number of women screened for the two corresponding calendar years. If a woman has attended more than once in the 24 months, she is counted once only, and the age is taken from the first visit.

Breast cancers include both invasive and ductal carcinoma in situ (DCIS).

The indirectly age-standardised rate per 10,000 women screened is based on the standard population of each respective jurisdiction.

The data do not include women who undergo private screening; the impact of such services is estimated to be quite small – for reference, see **Breast screening participation** note above.

The South Australian SLAs of Cleve, Franklin Harbour, Kangaroo Island, Kimba and Wudinna have been confidentialised as the Mobile Breast Screening Units in these regions were operating on a 25-26 month cycle. This means the data would not truly reflect the participation of women in these areas. In addition, the values for the LGAs, Statistical Divisions and Subdivisions containing these SLAs will be understated.

The data for the Western Australian SLAs of Fremantle (C) - Inner and Fremantle (C) - Remainder have been pooled together; as have data for Narrogin (S) and Narrrogin (T); and Perth (C) - Inner and Perth (C) - Remainder.

Data are not available for New South Wales, Tasmania and the Northern Territory.

Source: Compiled by PHIDU based on data from BreastScreen Victoria, 2006 and 2007; BreastScreen Qld, 2007 and 2008; BreastScreen WA, 2007 and 2008; BreastScreen ACT, 2007 and 2008; and BreastScreen SA, 2009 and 2010

Cervical screening data

 Cervical screening participation, females aged 20 to 69 years, 2009 and 2010 (NSW, Vic, Qld, WA & ACT), 2008 and 2009 (SA)

Notes: The participation rate for the 24 month period to the end of each calendar year is based on the actual number of women screened as a per cent of the average of the ABS Estimated Resident Population for the two corresponding calendar years, excluding an estimate of those who had undergone a full hysterectomy. If a woman has attended more than once in the 24 months, she is counted once only, and the age is taken from the first visit.

In some instances, percentages are calculated at greater than 100%; this may be the result of:

- the address data being a postcode which is not allocated to the correct SLA by the concordances available; or
- the address of the facility where the consultation is held or the service is provided being used, rather than the address of the client/ patient.

In time, with more reliable recording of address details, these occurrences should be reduced.

ACT totals include all of postcode 2618, although approximately 50% of the population in this postcode reside in NSW. Data are not available for Tasmania and the Northern Territory.

Source: Compiled by PHIDU based on data from the:

- 1) NSW Department of Health and NSW Central Cancer Registry, 2009 and 2010; Victorian Cervical Cytology Registry, 2009 and 2010; Queensland Health Cancer Services Screening Branch, 2009 and 2010; SA Cervix Screening Program, 2008 and 2009; Western Australia Cervical Cytology Register, 2009 and 2010; and ACT Cytology Register, 2009 and 2010; and
- 2) ABS Estimated Resident Population, average of 30 June 2009 and 30 June 2010 (NSW, Vic, Qld, WA and ACT); and average of 30 June 2008 and 30 June 2009 (SA); with hysterectomy fraction data derived from the 2007-08 National Health Survey
- Cervical screening outcomes: low grade abnormality, females aged 20 to 69 years, 2009 and 2010 (NSW, Vic, Qld, WA & ACT), 2008 and 2009 (SA)
- Cervical screening outcomes: high grade abnormality, females aged 20 to 69 years, 2009 and 2010 (NSW, Vic, Qld, WA & ACT), 2008 and 2009 (SA)

Notes for all *Cervical screening outcomes* data: Cervical screening outcomes for the 24 month period to the end of each calendar year are based on the number of women with an abnormal pap smear as an age-standardised rate of the number of women screened in the corresponding calendar years. If a woman has attended more than once in the 24 months, she is counted once only, and her age is taken from the first visit.

In the 2009-2010 data, low and high grade abnormalities in NSW have been categorised slightly differently from the other jurisdictions, as the data were provided prior to a new data specification being applied. For categories applied here, low grades do not include glandular abnormalities (E2 according to the national cytology coding schedule), and high grades do not include possible high grades (S4 or E3 according to the national cytology coding schedule). However despite the differences noted above, within-State comparisons for NSW are still valid.

ACT totals include all of postcode 2618, although approximately 50% of the population in this postcode resides in NSW.

The indirectly age-standardised rate per 1,000 women screened is based on the standard population of each respective jurisdiction.

Data are not available for Tasmania and the Northern Territory.

Source for *Cervical screening outcomes* **data:** Compiled by PHIDU based on data from the NSW Department of Health and NSW Central Cancer Registry, 2009 and 2010; Victorian Cervical Cytology Registry, 2009 and 2010; Queensland Health Cancer Services Screening Branch, 2009 and 2010; SA Cervix Screening Program, 2008 and 2009; Western Australia Cervical Cytology Register, 2009 and 2010; and ACT Cytology Register, 2009 and 2010

Modelled estimates of prevalence of certain chronic diseases, risk factors etc., 2007–08

Notes for all *Modelled estimates of prevalence of certain chronic diseases, risk factors etc.*: The estimates have been synthetically predicted at the Statistical Local Area (SLA) level from the 2007-08 National Health Survey (NHS), conducted by the ABS: a note on modelled estimates is at http://www.publichealth.gov.au/data_online/notes_estimates_Aust_2007-08.pdf.

Users of these modelled estimates should note that they do not represent data collected in administrative or other data sets. As such, they should be used with caution, and treated as indicative of the likely social dimensions present in an area with these demographic and socioeconomic characteristics.

What the modelled estimates do achieve, however, is to summarise the various demographic, socioeconomic and administrative information available for an area in a way that indicates the expected level of each health indicator for an area with those characteristics. In the absence of accurate, localised information about the health indicator, such predictions can usefully contribute to policy and program development, service planning and other decision-making processes that require an indication of the geographic distribution of the health indicator.

The NHS achieves a response rate in excess of 90%. Although the sample includes the majority of people living in private households, it excludes those living in the most remote areas of Australia; whereas these areas comprise less than 3% of the total population, Aboriginal people comprise up to one third of the population in these areas. This and other limitations of the method mean that predictions have not been published for SLAs:

- 1) with populations under 1.000:
- 2) in which 50% or more of the population lives in Very Remote areas, as determined by ABS;
- 3) in which Aboriginal people comprise 75% or more of the population; and
- 4) where the relative root mean square errors (RRMSEs) on the predictions was 1 or more.

NB: Estimates with RRMSEs from 0.25 and to 0.50 have been marked (~) to indicate that they should be used with caution; and those greater than 0.50 but less than 1 are marked (~~) to indicate that the prediction is considered too unreliable for general use

Note re additional data (Victoria and Queensland only): In Victoria, indicators of health and lifestyle, self-reported health and health conditions are collected annually via computer-assisted telephone interviewing as part of the Victorian Population

Health Survey conducted by the Department of Health. Data estimates are available at the Local Government Area. See: http://www.health.vic.gov.au/healthstatus/survey/vphs.htm

In Queensland, a Self-Reported Health Status Survey is undertaken annually by Population Health Queensland using computer assisted telephone interviewing. Data are available as estimates at the Local Government Area. See: http://www.health.qld.gov.au/epidemiology/publications/health-surveys.asp

Source for all *Modelled estimates of prevalence of certain chronic diseases, risk factors etc.:* Compiled by PHIDU based on data estimated from the 2007–08 National Health Survey (NHS), ABS (unpublished); and ABS Estimated Resident Population, average of 30 June 2007 and 30 June 2008

Self-assessed health (modelled estimates), 2007–08

Fair or poor self-assessed health, persons aged 15 years and over (modelled estimates), 2007–08

Notes: Respondents aged 15 years and over in the 2007–08 NHS were asked to rate their health on a scale from 'excellent', through 'very good', 'good' and 'fair', to 'poor' health. The data comprise those respondents who rated their health as fair or poor.

Current long-term condition and reporting good, very good or excellent health, (modelled estimates), 2007–08

Notes: Respondents aged 15 years and over in the 2007–08 NHS were asked to rate their health on a scale from 'excellent', through 'very good', 'good' and 'fair', to 'poor' health. The data comprise those respondents who had been diagnosed with a long term health condition (a condition which has lasted or is expected to last for 6 months or more) and who rated their health as good, very good or excellent.

Chronic disease and conditions (modelled estimates), 2007–08

- Type 2 diabetes (modelled estimates), 2007–08³
- High cholesterol (modelled estimates), 2007–08

Notes for *Type 2 diabetes/ High cholesterol* data: The data are self-reported data, reported to interviewers in the 2007–08 NHS. Respondents to the NHS were asked whether they had been diagnosed with any long term health condition (a condition which has lasted or is expected to last for 6 months or more), and were also asked whether they had been told by a doctor or nurse that they had asthma, cancer, heart and circulatory conditions, and/or diabetes3.

- Males with mental and behavioural problems (modelled estimates), 2007–08
 - Males with mood (affective) problems (modelled estimates), 2007–08
- Females with mental and behavioural problems (modelled estimates), 2007–08
 - Females with mood (affective) problems (modelled estimates), 2007–08

Notes for all *Mental and behavioural problems*/ *Mood (affective) problems* data: The data are self-reported data, reported to interviewers in the 2007–08 NHS. Mental health and behavioural/ mood (affective) problems were identified through the self-reported information on long term conditions obtained by the survey. However, unlike the approach used for conditions such as asthma, cancer, heart and circulatory conditions, and/or diabetes, respondents in the survey were not specifically asked whether they had been diagnosed with any mental disorders. The information provided by respondents could therefore be based on self-diagnosis rather than diagnosis by a health professional.

- Circulatory system diseases (modelled estimates), 2007-08
- Hypertensive disease (modelled estimates), 2007–08
- Respiratory system diseases (modelled estimates), 2007–08
 - Asthma (modelled estimates), 2007-08
 - Chronic Obstructive Pulmonary Disease (COPD) (modelled estimates), 2007–08
- Musculoskeletal system diseases (modelled estimates), 2007–08
 - Arthritis (modelled estimates), 2007–08
 - Rheumatoid arthritis (modelled estimates), 2007–08
 - Osteoarthritis (modelled estimates), 2007–08
- Females with osteoporosis (modelled estimates), 2007–08

The figures for all of Australia for type 2 diabetes published in the 2004-05 and 2007-08 National Health Surveys (NHSs) conducted by the Australian Bureau of Statistics (and used as the basis for the synthetic estimates shown here) is substantially lower than the AusDiab figure of 7.6% in 2000; 3.6% in the 2004-05 survey and 4.0% in the 2007-08 survey. The NHS is based on self-reported data: the AusDiab is based on physical and bio-chemical measures taken by qualified people.

The AusDiab figure is comprised of 3.8% diagnosed and 3.8% undiagnosed – that is, AusDiab state that for every one person with known diabetes, there is one unknown. There is good evidence [Qld and SA] to suggest this relationship is an overstatement. Further, the sample was taken in such a way [highly clustered, households replaced where contact could not be made] and respondents attending the test sites 'self-selected' such that bias in the results is clearly possible: the response rate (as distinct from the contact rate) was also very low. The sample also appears to have relatively few disadvantaged people; this would suggest their diagnosed figure is lower than would be achieved from a well-drawn/ executed sample with reasonable response rates across socioeconomic groups. For a comment on some of these issues from a Queensland perspective, see: http://www.mja.com.au/public/issues/180_02_190104/letters_190104_fm-2.html.

Given the problems with the AusDiab data, PHIDU was not prepared to use those data to predict rates in small areas.

The value of the modelled estimates, albeit on this low overall rate, is in showing likely variations between areas.

³ Note on diabetes estimates from the NHS and other sources:

Notes for all Long term health conditions (ie indicators above from Circulatory system diseases onwards) data: The data are self-reported data, reported to interviewers in the 2007–08 NHS. Respondents to the NHS were asked whether they had been diagnosed with any long term health condition (a condition which has lasted or is expected to last for 6 months or more), and were also asked whether they had been told by a doctor or nurse that they had asthma, cancer, heart and circulatory conditions, and/or diabetes.

Psychological distress (modelled estimates), 2007-08

High or very high levels of psychological distress, persons aged 18 years and over (modelled estimates), 2007–08

Notes: The data have been derived from the Kessler Psychological Distress Scale-10 items (K-10), which is a scale of non-specific psychological distress based on 10 questions asked of respondents about negative emotional states in the 4 weeks prior to interview. 'High' and 'very high' distress are the two highest levels of distress categories (of a total of four categories).

Health risk factors (modelled estimates), 2007–08

- Male current smokers, 18 years and over (modelled estimates), 2007–08
- Female current smokers, 18 years and over (modelled estimates), 2007–08

Notes for all *Current smokers* data: The data are self-reported data, reported to interviewers in the 2007–08 NHS. A current smoker is an adult who reported at the time of interview that they smoked cigarettes, cigars or pipes at least once a week.

Harmful use of alcohol, persons aged 18 years and over (modelled estimates), 2007–08

Notes: The data are self-reported data, reported to interviewers in the 2007–08 NHS. The level of health risk was based on estimated alcohol consumption in the seven days prior to interview using two components – the number of days on which the respondent reported consuming alcohol in the previous week; and the quantity consumed in the most recent days on which they consumed alcohol. For people who drank on no more than three days in the last week, their daily consumption was simply the total consumed divided by seven. Harmful use of alcohol is defined as average daily consumption of more than 75 ml (three standard drinks) for males and 50 ml (two standard drinks) for females.

Physical inactivity, persons aged 15 years and over (modelled estimates), 2007–08

Notes: The data are self-reported data, reported to interviewers in the 2007–08 NHS. Physical inactivity is defined as those aged 15 years and over who did not exercise in the two weeks prior to interview for the 2007–08 NHS, through sport, recreation or fitness (including walking).

- Overweight (not obese) males, 18 years and over (modelled estimates), 2007–08
- Obese males, 18 years and over (modelled estimates), 2007–08
- Overweight (not obese) females, 18 years and over (modelled estimates), 2007–08
- Obese females, 18 years and over (modelled estimates), 2007–08
- Overweight (not obese) persons, 18 years and over (modelled estimates), 2007–08
- Obese persons, 18 years and over (modelled estimates), 2007–08
- Males in normal weight range, 18 years and over (modelled estimates), 2007–08
- Females in normal weight range, 18 years and over (modelled estimates), 2007–08

Notes for all *Overweight/ Obesity/ Normal weight* **data:** The data are self-reported data, reported to interviewers in the 2007–08 NHS. The BMI was calculated from self-reported height and weight information and grouped as follows to allow reporting against both World Health Organization and National Health & Medical Research Council guidelines – normal range: 18.5 to less than 20.0 and 20.0 to less than 25.0; overweight: 25.0 to less than 30.0; obese: 30.0 and greater.

- Usual daily intake of two or more serves of fruit, persons aged 5 to 17 years (modelled estimates), 2007–08
- Usual daily intake of two or more serves of fruit, persons aged 18 years and over (modelled estimates), 2007–08

Notes for all *Usual daily intake of fruit* data: The data are self-reported data, reported to interviewers in the 2007–08 NHS. Data includes respondents reporting usually consuming two or more serves of fruit (excluding drinks and beverages) each day. A serve is approximately 150 grams of fresh fruit or 50 grams of dried fruit.

 Persons with at least one of four major health risk factors – smoking, harmful use of alcohol, physical inactivity or obesity – 18 years and over (modelled estimates), 2007–08

Notes: The data are self-reported data, reported to interviewers in the 2007–08 NHS. Data includes respondents who reported that they had at least one of the following health risk factors - smoking, harmful use of alcohol, physical inactivity or obesity.

Composite indicators – a chronic disease and an associated risk factor (modelled estimates), 2007–08

Had type 2 diabetes and were overweight/ obese, persons aged 18 years and over (modelled estimates), 2007–08

Notes: The data are self-reported data, reported to interviewers in the 2007–08 NHS.

For further information, refer to the chronic disease and risk factor information provided above.

Had asthma and were smokers, persons aged 18 years and over (modelled estimates), 2007–08

Notes: The data are self-reported data, reported to interviewers in the 2007–08 NHS.

For further information, refer to the chronic disease and risk factor information provided above.

Disability, 2011

Assistance to persons with a disability (unpaid), 2011

Notes: The 'Assistance to persons with a disability (unpaid)' variable records people who, in the two weeks prior to Census Night, spent time providing unpaid care, help or assistance to family members or others because of a disability, a long-term illness (lasting six months or more) and/or problems related to older age.

The data exclude the 8.5% of persons aged 15 years and over whose unpaid assistance to persons with a disability was not stated (the proportion excluded was calculated based on the Australian data).

Source: Compiled by PHIDU based on ABS Census 2011 data

- Persons with a profound or severe disability, All ages, 2011
- Persons with a profound or severe disability living in the community, All ages, 2011
- Persons with a profound or severe disability, 0 to 64 years, 2011
- Persons with a profound or severe disability living in the community, 0 to 64 years, 2011
- Persons with a profound or severe disability, 65 years and over, 2011
- Persons with a profound or severe disability living in the community, 65 years and over, 2011

Notes for all People with a profound or severe disability and People with a profound or severe disability living in the community data: The 'Core Activity Need for Assistance' variable was developed by the Australian Bureau of Statistics (ABS) for use in the five-yearly population Census to measure the number of people with a profound or severe disability, and to show their geographic distribution. A person with profound or severe limitation needs help or supervision always (profound) or sometimes (severe) to perform activities that most people undertake at least daily, that is, the core activities of self-care, mobility and/or communication, as the result of a disability, long-term health condition (lasting six months or more), and/or older age. Fewer people are reported under this measure as having a profound or severe disability as are measured in the ABS Survey of Disability, Ageing and Carers (SDAC). The reasons for this are definitional (the SDAC approach, which uses a filtering approach to determine whether the respondent has a disability, and the severity) as compared to the self-report approach in the Census; and the large not-stated category in the Census data, with more people not responding to this set of questions than are reported as having a profound or severe disability. While the SDAC figures should be used as the measure for this concept, the Census data are appropriate for getting an understanding of the geographic distribution of this population group.

The ABS figures include people – of all ages/ aged 0 to 64 years/ aged 65 years and over, as appropriate – living in long-term residential accommodation in nursing homes, accommodation for the retired or aged (not self-contained), hostels for the disabled and psychiatric hospitals: the 'total' figure (for each age group shown) in this atlas includes people living in these accommodation types, whereas the figure for 'living in the community' (for each age group shown) excludes them.

Details of the total number of people with a disability – including those with a moderate or mild disability – are not included.

Source for all *People with a profound or severe disability* **data**: Compiled by PHIDU based on ABS Census 2011 (unpublished) data

Median age at death, 2003 to 2007

[Note: Median age at death data indicators for the 2003 to 2007 period are included in the 2013 PHIDU releases by Quintiles of socioeconomic disadvantage of area or Remoteness areas only. 2003 to 2007 Premature mortality data by SLA, LGA, ML and LHN are available on ASGC 2006 boundaries in the 2012 PHIDU releases, available at: SLA & LGA data: published 2012; ML data: published 2012; and LHN data: published 2012.]

- Median age at death of males, 2003 to 2007
- Median age at death of females, 2003 to 2007
- Median age at death of persons, 2003 to 2007

Source for all *Median age at death* data: Data produced by PHIDU based on deaths data supplied by ABS on behalf of State and Territory Registrars of deaths for 2003 to 2007.

Premature mortality by sex, mid to late 2000s

Premature mortality by sex, 2003 to 2007

[Note: Premature mortality data indicators for the 2003 to 2007 period are included in the 2013 PHIDU releases by Quintiles of socioeconomic disadvantage of area or Remoteness areas only. 2003 to 2007 Premature mortality data by SLA, LGA, ML and LHN are available on ASGC 2006 boundaries in the 2012 PHIDU releases, available at: <u>SLA & LGA</u> data: published 2012; ML data: published 2012; and LHN data: published 2012.]

- Deaths of persons aged 15 to 24 years, 2003 to 2007 [Quintiles & Remoteness data only]
- Deaths of males aged 15 to 64 years, 2003 to 2007
- Deaths of females aged 15 to 64 years, 2003 to 2007
- Total deaths, 15 to 64 years, 2003 to 2007

Source for all 2003 to 2007 Premature mortality data: Data produced by PHIDU based on deaths data supplied by ABS on behalf of State and Territory Registrars of deaths for 2003 to 2007; and ABS Estimated Resident Population, 30 June 2003 to 30 June 2007

Premature mortality by sex, 2006 to 2010

Deaths of males aged 0 to 74 years, 2006 to 2010

- Deaths of females aged 0 to 74 years, 2006 to 2010
- Total deaths, 0 to 74 years, 2006 to 2010

Source for all 2006 to 2010 Premature mortality data: Data produced by PHIDU based on deaths data supplied by ABS on behalf of State and Territory Registrars of deaths for 2006 to 2010; and ABS Estimated Resident Population, 30 June 2006 to 30 June 2010

Premature mortality by selected cause, mid to late 2000s

Premature mortality by selected cause, 2003 to 2007

[Note: Premature mortality data indicators for the 2003 to 2007 period are included in the 2013 PHIDU releases by Quintiles of socioeconomic disadvantage of area or Remoteness areas only. 2003 to 2007 Premature mortality data by SLA, LGA, ML and LHN are available on ASGC 2006 boundaries in the 2012 PHIDU releases, available at: <u>SLA & LGA</u> data: published 2012; ML data: published 2012; and LHN data: published 2012.]

Deaths from external causes, persons aged 15 to 24 years, 2003 to 2007 [Quintiles & Remoteness data only]

International Classification of Diseases (ICD-10) codes: V01-V98

Deaths from cancers, persons aged 15 to 64 years, 2003 to 2007

ICD-10 codes: C00-D48

Deaths from circulatory system diseases, persons aged 15 to 64 years, 2003 to 2007

ICD-10 codes: 100-199

Deaths from respiratory system diseases, persons aged 15 to 64 years, 2003 to 2007

ICD-10 codes: J00-J99

Deaths from external causes, persons aged 15 to 64 years, 2003 to 2007

ICD-10 codes: V01-Y98

Deaths from all other causes, persons aged 15 to 64 years, 2003 to 2007

ICD-10 codes: All excluding C00-D48; I00-I99; J00-J99; V01-Y98

Source for all 2003 to 2007 Premature mortality data: Data produced by PHIDU based on deaths data supplied by ABS on behalf of State and Territory Registrars of deaths for 2003 to 2007; and ABS Estimated Resident Population, 30 June 2003 to 30 June 2007

Premature mortality by selected cause, 2006 to 2010

Deaths from cancer, persons aged 0 to 74 years, 2006 to 2010

ICD-10 codes: C00-D48

- Deaths from colorectal cancer, persons aged 0 to 74 years, 2006 to 2010

ICD-10 codes: C18-C21

Deaths from lung cancer, persons aged 0 to 74 years, 2006 to 2010

ICD-10 codes: C33, C34

Deaths from circulatory system diseases, persons aged 0 to 74 years, 2006 to 2010

ICD-10 codes: 100-199

Deaths from ischaemic heart disease, persons aged 0 to 74 years, 2006 to 2010

ICD-10 codes: 120-25

- Deaths from cerebrovascular disease, persons aged 0 to 74 years, 2006 to 2010

ICD-10 codes: 160-169

Deaths from respiratory system diseases, persons aged 0 to 74 years, 2006 to 2010

ICD-10 codes: J00-J99

Deaths from chronic obstructive pulmonary disease, persons aged 45 to 74 years, 2006 to 2010

ICD-10 codes: J40-J44

Note: A small number of deaths from COPD of persons under 45 years were included in the numerator.

Deaths from external causes, persons aged 0 to 74 years, 2006 to 2010

ICD-10 codes: V01-Y98

Deaths from road traffic injuries, persons aged 0 to 74 years, 2006 to 2010

ICD-10 codes: V01-V04, V06, V09-V80, V87, V89, V99

- Deaths from suicide and self-inflicted injuries, persons aged 0 to 74 years, 2006 to 2010

ICD-10 codes: X60-X84, Y87.0, Y10-Y34

Source for all 2006 to 2010 Premature mortality data: Data produced by PHIDU based on deaths data supplied by ABS on behalf of State and Territory Registrars of deaths for 2006 to 2010; and ABS Estimated Resident Population, 30 June 2006 to 30 June 2010

Avoidable mortality, 2003 to 2007

[Notes:

- 1) Avoidable mortality data indicators are included in the 2013 PHIDU releases by Quintiles of socioeconomic disadvantage of area or Remoteness areas only. 2003 to 2007 Avoidable mortality data by SLA, LGA, ML and LHN are available on ASGC 2006 boundaries in the 2012 PHIDU releases, available at: SLA & LGA data: published 2012; ML data: published 2012; and LHN data: published 2012.]
- 2) A number of the causes of premature mortality (listed above) are based on the same definition as used for avoidable mortality.]

Notes for all *Avoidable mortality* data: For information on the avoidable mortality concept; rationale for including conditions; and ICD-10 codes, please refer to the information available in the Australian and New Zealand Atlas of Avoidable Mortality, available from:

http://www.publichealth.gov.au/publications/australian-and-new-zealand-atlas-of-avoidable-mortality.html

The codes and rationale are included in Appendix 1.1: ICD codes; and Appendix 1.2: Rationale for including conditions.

Source for all *Avoidable mortality* **data:** Data produced by PHIDU from deaths data supplied by ABS on behalf of State and Territory Registrars of deaths for 2003 to 2007; and ABS Estimated Resident Population, 30 June 2003 to 30 June 2007

Potentially avoidable deaths

- Avoidable deaths at ages 0 to 74 years: All causes, 2003 to 2007
- Avoidable deaths at ages 0 to 74 years: Cancer, 2003 to 2007
 - Avoidable deaths at ages 0 to 74 years: Colorectal cancer, 2003 to 2007
 - Avoidable deaths at ages 0 to 74 years: Lung cancer, 2003 to 2007
- Avoidable deaths at ages 0 to 74 years: Cardiovascular diseases, 2003 to 2007
 - Avoidable deaths at ages 0 to 74 years: Ischaemic heart disease, 2003 to 2007
 - Avoidable deaths at ages 0 to 74 years: Cerebrovascular disease, 2003 to 2007
- Avoidable deaths at ages 0 to 74 years: Respiratory system diseases, 2003 to 2007
 - Avoidable deaths at ages 45 to 74 years: Chronic obstructive pulmonary disease, 2003 to 2007
- Avoidable deaths at ages 0 to 74 years: Road traffic injuries, 2003 to 2007
- Avoidable deaths at ages 0 to 74 years: Suicide and self-inflicted injuries, 2003 to 2007

Amenable (treatable) mortality

Amenable (treatable) mortality at ages 0 to 74 years, 2003 to 2007

Preventable mortality

Preventable mortality at ages 0 to 74 years, 2003 to 2007

Private health insurance (modelled estimates), 2007–08

Private health insurance, persons aged 15 years and over (modelled estimates), 2007–08

Notes: The data on which the predictions are based are self-reported data, reported to interviewers in the 2007-08 NHS. Respondents to the NHS were asked whether they were currently covered by private health insurance. Private health insurance was defined as "cover additional to that provided under Medicare, offered by private health organisations registered under the National Health Act to reimburse all or part of the cost of hospital and/or ancillary services"; cover provided/ arranged through employers was included; ambulance only cover, and cover arranged under Veteran's Affairs or other government health benefits cards, were excluded (see Australian Bureau of Statistics (ABS) 2009. National Health Survey: users guide - electronic, Australia 2007-08. ABS cat. no. 4363.0.55.001. ABS: Canberra, pp. 88-89. Accessed 30 April 2013,

http://www.abs.gov.au/AUSSTATS/abs@.nsf/allprimarymainfeatures/2851D0FD9C52AB56CA257ACC000E3DE1?opendocument.

See also the Note for all Modelled estimates data above.

Source: Compiled by PHIDU based on data estimated from the 2007–08 National Health Survey (NHS), ABS (unpublished); and ABS Estimated Resident Population, average of 30 June 2007 and 30 June 2008

MBS services, 2009/10

Source for all MBS services data: Compiled by PHIDU based on data from the Department of Health and Ageing, 2009/10; and average of ABS Estimated Resident Population, 30 June 2009 and 30 June 2010

- GP services to males (MBS and DVA), 2009/10
- GP services to females (MBS and DVA), 2009/10
- Total GP services (MBS and DVA), 2009/10
- 45 Year Old Health Checks by GPs, males aged 45 to 49 years, 2009/10

MBS Item Nos: 717

45 Year Old Health Checks by GPs, females aged 45 to 49 years, 2009/10

MBS Item Nos: 717

• 45 Year Old Health Checks by GPs, persons aged 45 to 49 years, 2009/10

MBS Item Nos: 717

Note: The difference between the sum of males and females, and the persons total, for the 45 Year Old Health check data is due to not all data being reported by sex.

Annual health assessments by GPs, persons aged 75 years and over, 2009/10

MBS Item Nos: 700, 702

Other services by GPs for Enhanced Primary Care items, 2009/10

MBS Item Nos: 721, 725, 723, 727, 729, 731

Total services by GPs for Enhanced Primary Care items, 2009/10

MBS Item Nos: 700-746, 749, 757-759, 762, 765, 768, 771-773, 775, 778-779, 900, 903, 2710, 2712-2713

Practice Nurse services under the MBS, 2009/10

MBS Item Nos: 10993-10999

Better Access Care Program: Preparation of Mental Health Care Plan by GPs, 2009/10

MBS Item Nos: 2702, 2710, 2712, 2713

Better Access Care Program: Psychiatrists, 2009/10

MBS Item Nos: 291, 293, 296, 297, 299

Better Access Care Program: Psychologists, 2009/10

MBS Item Nos: 80100, 80105, 80110, 80115, 80120

Better Access Care Program: General Psychologists, 2009/10

MBS Item Nos: 80000, 80005, 80010, 80015, 80020

Better Access Care Program: Clinical Psychologists, 2009/10

MBS Item Nos: 80150, 80155, 80160, 80165, 80170

Better Access Care Program: Occupational Therapists, 2009/10

MBS Item Nos: 80125, 80130, 80135, 80140, 80145

Home and community care, 2010/11

Source for all *Home and community care* **data**: Compiled by PHIDU using data from the Department of Health and Ageing, 2010/11; and average of ABS Estimated Resident Population, 30 June 2010 and 30 June 2011

Clients living alone, 2010/11

Notes: Clients whose status is recorded as living alone at the date of most recent assessment.

• Clients with carer, 2010/11

Notes: Clients whose status is recorded as having a carer at the date of most recent assessment. The carer may be living with the client or not.

Indigenous clients (as a proportion of total clients), 2010/11

Notes: Clients whose status is recorded as Indigenous at the date of most recent assessment.

Indigenous clients (as a proportion of the Indigenous population), 2010/11

Notes: Clients whose status is recorded as Indigenous at the date of most recent assessment.

Non-English speaking clients, 2010/11

Notes: Clients whose main language spoken at home at the date of most recent assessment is not English.

Total clients, 2010/11

Notes: All clients that recorded at least one instance of assistance for the time period.

Allied health care instances at home, 2010/11

Notes: Includes physiotherapy, occupational therapy, podiatry, advice from a dietician or nutritionist, or speech therapy. Can be provided from a community centre or in the client's home.

Allied health care instances at centre, 2010/11

Notes: Includes physiotherapy, occupational therapy, podiatry, advice from a dietician or nutritionist, or speech therapy. Can be provided from a community centre or in the client's home.

Care counselling instances, 2010/11

Notes: Assistance with understanding and managing situations, behaviours and relationships associated with the person's need for care and/or the caring role, including the provision of information, advice and training.

Case management instances, 2010/11

Notes: The active assistance received by a client from a formally identified agency worker who coordinates the planning and delivery of a suite of services to the individual clients.

Centre based day care instances, 2010/11

Notes: Attendance/participation in structured group activities designed to develop, maintain or support the capacity for independent living and social interaction which are conducted in a centre-based setting. It includes group excursions/activities conducted by centre staff but held away from the centre.

Client care coordination instances, 2010/11

Notes: Assistance which focuses on facilitating access to HACC services and includes implementing, monitoring and reviewing the care plan, liaison with service providers and advocacy to ensure the client has access to the range of services required.

Domestic assistance instances, 2010/11

Notes: House cleaning, washing and ironing, help with shopping, transport to and from banks and appointments et cetera, and general household support.

NB: The reporting of Victorian data differs from other States and Territories for this type of assistance. For Victoria, the instances of meals at home are reported under this 'Domestic assistance instances' category (rather than in the 'Meals at centre plus meals at home instances' category).

Home maintenance and modification instances, 2010/11

Notes: Assistance with the maintenance and repair of the client's home, garden or yard to keep their home in a safe and habitable condition. This also includes minor modifications such as grab rails, hand rails, ramps, and shower rails to reduce the impact of disability on the activities of daily living.

Meals at centre plus meals at home instances, 2010/11

Notes: Provision of meals prepared and delivered to the client's home or provided in a community centre.

NB: The reporting of Victorian data differs from other States and Territories for this type of assistance. For Victoria, the instances of meals at home are reported as part of the 'Domestic assistance instances' category.

Nursing care at centre plus nursing care at home instances, 2010/11

Notes: Health care provided to a client by a registered or enrolled nurse. This care can be provided from a community centre or in the client's home.

Personal care instances, 2010/11

Notes: May include help with bathing, toilet use, eating, dressing and personal grooming.

Respite care instances, 2010/11

Notes: Assistance to carers by provision of a substitute carer. Can include centre-based, in-home, host family and peer support respite care.

Social support instances, 2010/11

Notes: Assistance provided by a companion either within the home or while accessing community services, whose primary purpose is to meet the person's need for social contact and/or accompaniment in order to participate in community life. This includes friendly visiting.

NB: The reporting of Victorian data differs from other States and Territories for this type of assistance. For Victoria, 'Transport instances' are reported under this 'Social support instances' category.

Transport instances, 2010/11

Notes: Assistance to provide or coordinate individual or group transport services.

NB: The reporting of Victorian data differs from other States and Territories for this type of assistance. For Victoria, 'Transport instances' are reported as part of the 'Social support instances' category.

Total instances of assistances, 2010/11

Notes: Includes all the above types of support plus:

- other food services
- provisions of goods and equipment such as self care and support and mobility aids, and
- formal linen service

Aged care places, June 2011

Source for all *Aged care places* **data:** Compiled by PHIDU based on data from the Department of Health and Ageing, June 2011; and ABS Estimated Resident Population, 30 June 2011

Notes for all *Aged care places* data: This data includes: Multi-Purpose Services; National Aboriginal and Torres Strait Islander Aged Care Program; and Consumer Directed Care. See:

http://www.health.gov.au/internet/main/publishing.nsf/content/ageing-rescare-servlist-download.htm for further information.

Data for the Transition Care Program (TCP), which provides short-term support and active management for older people after a hospital stay in either a residential or community aged care setting, are not included here.

The data show a number of areas as having rates that are very high: these are areas with relatively high proportions of Indigenous population. As ageing and disability affect Aboriginal and Torres Strait Islander people earlier than they do non-Indigenous Australians, planning for services is based on the number of people aged 50 years and over, instead of 70 years and over as used for the rest of the population. See:

http://www.health.gov.au/internet/publications/publishing.nsf/Content/ageing-publicat-aged-care-australia.htm~ageing-publicat-aged-care-australia-pt8~ageing-publicat-aged-care-australia-pt8~for further information.

Residential aged care – high-level care places, June 2011

Notes: High-level care is nursing home care provided when health deteriorates to such a degree that a person becomes very frail or ill and can no longer be cared for adequately in their present accommodation. It provides 24-hour nursing and personal care for the very frail or ill, with support for the activities of daily living – dining, showering, continence

management, rehabilitation, medications etc. Allocation is based on availability and the assessment of an individual's needs, as compared with other residents.

Residential aged care – low-level care places, June 2011

Notes: Low-level care is hostel accommodation, offering a greater quality of life for people who benefit significantly from supportive services, companionship and activities, and for whom living without assistance is difficult. Independence is encouraged in maintaining daily living skills. Services provided may include showering, dressing, bed making, room cleaning, supervision of medication, provision of all meals and laundry.

This data includes: Multi-Purpose Services; National Aboriginal and Torres Strait Islander Aged Care Program; and Consumer Directed Care. Further details can be found here.

Total residential aged care places, June 2011

Notes: These data comprise both residential high-level and low-level care places. See above Notes for Residential aged care – high-level care places and Residential aged care – low-level care places for further information.

Community aged care places, June 2011

Notes: Community Aged Care Packages offer low dependency level care for older people who are frail and/or disabled, in their own home, whether they live with their spouse, family or on their own. Trained staff provide flexible and coordinated support, which may include assistance with personal care (eg showering, grooming); household help (eg shopping, cleaning); linking with activities and pursuits in the community; and other assistance as negotiated according to individual need.

NB: The data shows the Statistical Local Area of the location of the agency funded, which is not necessarily the address of the person receiving the package of care.