6. Summary

The information presented in this Atlas describes, in part, the social, economic and structural/systemic factors that contribute to patterns of health, injury, disability and service use in the compensable sector. While extensive, the available data have some important limitations. In particular, there is a need for better data to improve our overall understanding of the incidence and other contextual information relating to injuries that occur in the workplace and on the roads, and of the outcomes for those injured.

Despite these limitations, we can say that there is a strong association at the area level in Adelaide between high rates of workers’ compensation claims and socioeconomic disadvantage, and high rates of claims under the Compulsory Third Party Insurance scheme: there is also a weak association between cost per head of Compulsory Third Party claims and socioeconomic disadvantage.

For workers’ compensation claims (and number of services provided by GPs and physiotherapists) the association with socioeconomic disadvantage is very strong.

The correlation analysis for country South Australia showed there to be only weak and inconsistent associations with socioeconomic disadvantage, in part because of the smaller populations and numbers of claims in these areas.

The data support the need for an organised, population health response to the phenomenon of compensable injuries arising from trauma on the roads and at work. This response requires a close partnership between the compensation authorities and the Health Portfolio; and, wherever possible and appropriate, the integration and coordination of services provided in the compensation sector with other health and community services (both public and private) in the mainstream health and community services sectors.
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Bibliography


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