Population health profile of the Capricornia

Division of General Practice: supplement

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Interpretation of differences between data in this profile and similar data from other sources needs to be undertaken with care, as such differences may be due to the use of different methodology to produce the data.

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Population health profile of the Capricornia Division of General Practice: supplement

This profile is a supplement to the *Population health profile of the Capricornia Division of General Practice*, dated November 2005, available from www.publichealth.gov.au. This supplement includes an update of the population of the Capricornia Division of General Practice, as well as additional indicators and aspects of the Division's socioeconomic status, use of GP services and health. The contents are:

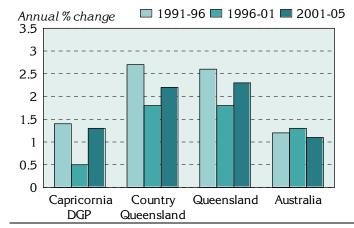
- Population [updated to June 2005]
- Additional socio-demographic indicators
- Unreferred attendances patient flow/ GP catchment
- Additional prevalence estimates: chronic diseases and risk factors combined
- Avoidable hospitalisations: hospital admissions resulting from ambulatory care sensitive conditions
- Avoidable mortality

For further information on the way Division totals in this report have been estimated, please refer to the 'Notes on the data' section of the *Population health profile*, November 2005 (www.publichealth.gov.au).

Population

The Capricornia Division had an Estimated Resident Population of 130,110 at 30 June 2005.

Figure 1: Annual population change, Capricornia DGP, country Queensland, Queensland and Australia, 1991 to 1996, 1996 to 2001 and 2001 to 2005



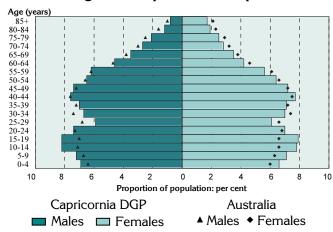
Over the five years from 1991 to 1996, the Division's population increased by 1.4% on average each year, around half the level in country Queensland (2.7%) and Queensland (2.6%). From 1996 to 2001, the annual percentage growth rate in the Division fell to 0.5%, much lower than in country Queensland and Queensland (both 1.8%). The higher growth rate of 1.3% per year from 2001 to 2005 was still around half the level in country Queensland (2.2%), and Queensland (2.3%).

Table 1: Population by age, Capricornia DGP and Australia, 2005

Age group	Capricorn	ia DGP	Austral	ia
(years)	No.	%	No.	%
0-14	28,474	21.9	3,978,221	19.6
15-24	19,824	15.2	2,819,834	13.9
25-44	35,759	27.5	5,878,107	28.9
45-64	31,242	24.0	4,984,446	24.5
65-74	8,119	6.2	1,398,831	6.9
75-84	5,058	3.9	954,143	4.7
85+	1,635	1.3	315,027	1.5
Total	130,110	100.0	20,328,609	100.0

As shown in the accompanying table and the age-sex pyramid below, Capricornia DGP had relatively more children aged 0 to 14 years (21.9%) and young people aged 15 to 24 years (15.2%) than Australia as a whole (with 19.6% and 13.9%). (Table 1). Conversely, the proportions of the Division's population aged 25 years and over were slightly lower than those for Australia.

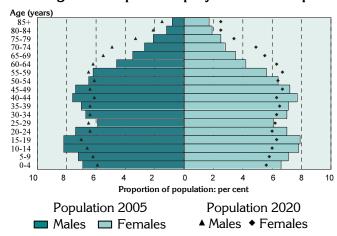
Figure 2: Population in Capricornia DGP and Australia, by age and sex, 2005



The most notable differences in the age distribution of the Division's population (when compared to Australia overall) are:

- at younger ages relatively more children and young people aged 0 to 24 years;
- from 25 to 39 years relatively fewer males and females; and
- relatively fewer males from 60 years and females from 50 years.

Figure 3: Population projections for Capricornia DGP, by age and sex, 2005 and 2020



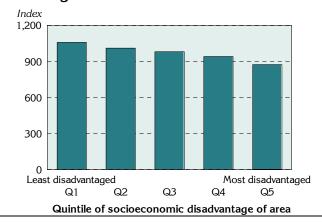
The population projections for the Division show a number of changes in age distribution, with the 2020 population projected to have:

- at ages below 50 years relatively fewer males and females aged 0 to 54 years (except for males and females aged 25 to 29 years); and
- from 55 years of age relatively more males and females (most pronounced at ages 60 to 74 years).

Additional socio-demographic indicators

Please refer to the earlier *Population health profile of the Capricornia, Division of General Practice,* dated November 2005, available from www.publichealth.gov.au, for other socio-demographic indicators.

Figure 4: Index of Relative Socio-Economic Disadvantage, Capricornia DGP, 2001



One of four socioeconomic indexes for areas produced at the 2001 ABS Census is the Index of Relative Socio-Economic Disadvantage.

The Capricornia DGP has an index score of 973, below the score for Australia of 1000: this score varies across the Division, from a low of 874 in the most disadvantaged areas to 1059 in the least disadvantaged areas.

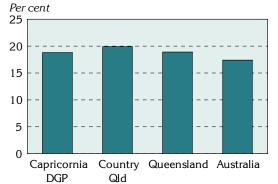
Note: each 'quintile' comprises approximately 20% of the population of the Division.

A new indicator, produced for the first time at the 2001 ABS Census, shows the number of jobless families with children under 15 years of age. There were fewer jobless families in the Capricornia DGP (18.8%), than for country Queensland as a whole (19.9%) (Figure 5, Table 2).

With the introduction of the 30% rebate for private health insurance premiums, there was a once-off registration process, providing information of the postcode and residence of those who had such insurance (these data are not available at this area level for later dates). In 2001, the Division had a notably higher proportion of the population with private health insurance (46.8%) than in country Queensland (40.3%) (Figure 5, Table 2).

Figure 5: Socio-demographic indicators, Capricornia DGP, country Queensland, Queensland and Australia, 2001

Jobless families with children under 15 years old



Private health insurance, 30 June

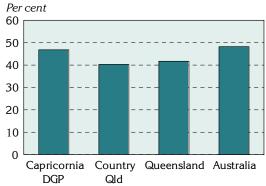


Table 2: Socio-demographic indicators, Capricornia DGP, country Queensland, Queensland and Australia, 2001

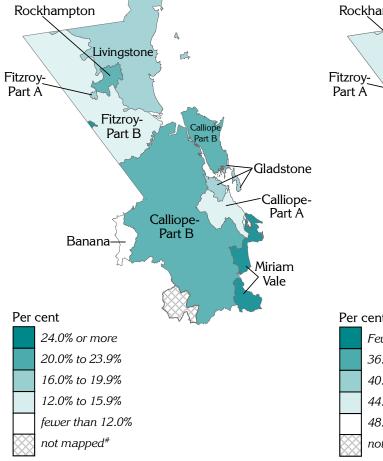
Indicator	Capricornia DGP			Country Queensland		Queensland		Australia	
	No.	%	No.	%	No.	%	No.	%	
Jobless families with children under 15 years old	2,645	18.8	42,801	19.9	74,942	18.9	357,563	17.4	
Private health insurance (30 June)	57,944	46.8	812,860	40.3	1,511,613	41.7	8,671,106	46.0	

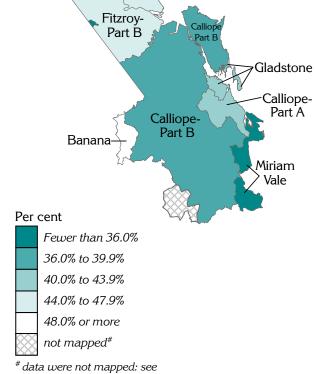
Details of the distribution of jobless families (Map 1) and of the population covered by private health insurance (Map 2) are shown by Statistical Local Area (SLA) in Maps 1 and 2, respectively.

Map 1: Jobless families with children under 15 years of age by SLA, Capricornia DGP, 2001

Map 2: People covered by private health insurance by SLA, Capricornia DGP, 30 June 2001

Livingstone





data were not mapped: see'Mapping' note under Methods

[#] data were not mapped: see 'Mapping' note under Methods

GP services to residents of the Capricornia DGP

The following tables include information, purchased from Medicare Australia, of the movement of patients and GPs between Divisions. Note that the data only include unreferred attendances recorded under Medicare: unreferred attendances not included are those for which the cost is met by the Department of Veterans' Affairs or a compensation scheme; or are provided by salaried medical officers in hospitals, community health services or Aboriginal Medical Services, and which are not billed to Medicare. At any attendance, one or more services may have been provided.

The majority (92.6%) of GP unreferred attendances to residents of Capricornia DGP were provided in the Division (ie. by a GP with a provider number in the Division): this represented 495,844 GP unreferred attendances (Table 3). The remaining 7.4% of unreferred attendances provided by the Division's GPs were to residents from other Divisions.

Table 3: Patient flow – People living¹ in Capricornia DGP by Division where attendance occurred², 2003/04

Division		Unreferred a	ttendances
Number	Name	No.	% ³
419	Capricornia DGP	495,844	92.6
410	Central Queensland Rural DGP	9,175	1.7
405	GPpartners DGP	4,231	8.0
418	Sunshine Coast DGP	2,299	0.4
420	Wide Bay DGP	2,208	0.4
416	North & West Queensland DGP	2,143	0.4
411	Mackay DGP	2,023	0.4
406	Gold Coast DGP	1,413	0.3
Other		16,296	3.0
Total		535,632	100.0

¹ Based on address in Medicare records

Over four fifths (83.9%)of unreferred attendances provided by GPs with a provider number in Capricornia DGP were also to people living in the Division (ie. their Medicare address was in the Division) (Table 4). A further 9.3% of unreferred attendances by GPs in the Division were to people living in Central Queensland Rural DGP.

Table 4: GP catchment – Unreferred attendances provided by GPs¹ in Capricornia DGP by Division of patient address², 2003/04

Division		Unreferred a	ttendances
Number	Name	No.	% ³
419	Capricornia DGP	495,844	83.9
410	Central Queensland Rural DGP	54,714	9.3
416	North and West Queensland DGP	11,714	2.0
420	Wide Bay DGP	7,531	1.3
411	Mackay DGP	1,998	0.3
405	GPpartners DGP	1,834	0.3
418	Sunshine Coast DGP	1,580	0.3
414	Southern Queensland Rural DGP	1,152	0.2
Other		14,949	2.5
Total		591,316	100.0

¹ Division of GP based on provider number

² Division of GP based on provider number

³ Proportion of all unreferred attendances of patients with an address in Division 414 by Division in which attendance occurred

² Based on address in Medicare records

³ Proportion of all unreferred attendances to GPs with a provider number in Division 414 by Division of patient address

Additional prevalence estimates: chronic diseases and risk factors combined

Please refer to the earlier *Population health profile of the Capricornia Division of General Practice*, dated November 2005, available from www.publichealth.gov.au, for the separate prevalence estimates of chronic disease; measures of self-reported health and risk factors. The process by which the estimates have been made, and details of their limitations, are also described in the 'Notes on the data' section of this earlier profile.

In this section two estimates, which combine the prevalence of selected chronic diseases with a risk factor, are shown for the Division. The measures are of people who *had asthma and were smokers*, and people who *had type 2 diabetes and were overweight or obese*: note that the estimates have been predicted from self-reported data, and are not based on clinical records or physical measures.

It is estimated that there were more people in Capricornia DGP who had asthma and were smokers, compared to Australia as a whole, although the rate was consistent with that in country Queensland (Figure 6, Table 5): that is, the prevalence rates per 1,000 population were higher than the national rates. The rate for Capricornia DGP of people who had type 2 diabetes and were overweight/ obese was consistent with that for Australia, and slightly above that in country Queensland.

Figure 6: Estimates of selected chronic diseases and risk factors, Capricornia DGP, country Queensland and Australia, 2001



Table 5: Estimates of selected chronic diseases and risk factors, Capricornia DGP, country Queensland, Queensland and Australia, 2001

Variable	Capricornia DGP		Country Queensland		Queensland		Australia	
_	No.1	Rate ²	No.1	Rate ²	No. ¹	Rate ²	No.1	Rate ¹
Had asthma & smoked ³	2,992	24.7	46,582	24.8	83,759	23.2	397,734	20.8
Had type 2 diabetes & were overweight/obese ⁴	1,853	15.5	29,819	14.5	52,952	15.0	283,176	15.2

¹ No. is a weighted estimate of the number of people in Capricornia DGP reporting these chronic conditions/ with these risk factors and is derived from synthetic predictions from the 2001 NHS

² Rate is the indirectly age-standardised rate per 1,000 population

³ Population aged 18 years and over

⁴ Population aged 15 years and over

Avoidable hospitalisations: hospital admissions resulting from ambulatory care sensitive conditions

The rationale underlying the concept of avoidable hospitalisations is that timely and effective care of certain conditions, delivered in a primary care setting, can reduce the risk of hospitalisation. Admissions to hospital for these ambulatory care sensitive (ACS) conditions can be avoided in three ways. Firstly, for conditions that are usually preventable through immunisation or nutritional intervention, disease can be prevented almost entirely. Secondly, diseases or conditions that can lead to rapid onset problems, such as dehydration and gastroenteritis, can be treated. Thirdly, chronic conditions, such as congestive heart failure, can be managed to prevent or reduce the severity of acute flare-ups to avoid hospitalisation.

This measure does not include other aspects of avoidable morbidity, namely potentially preventable hospitalisations (hospitalisations resulting from diseases preventable through population based health promotion strategies, e.g. alcohol-related conditions; and most cases of lung cancer) and hospitalisations avoidable through injury prevention (e.g. road traffic accidents).

For information on the ambulatory care sensitive conditions and ICD codes included in the analysis in this section, please refer to the *Atlas of Avoidable Hospitalisations in Australia: ambulatory care-sensitive conditions*, available from www.publichealth.gov.au.

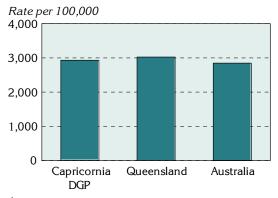
In 2001 to 2002, the 3,521 admissions from ambulatory care sensitive (ACS) conditions accounted for 9.8% of all admissions in the Capricornia DGP (Table 6, Figure 7), above the levels in Queensland (8.5%) and Australia (8.7%).

Table 6: Avoidable and unavoidable hospitalisations, Capricornia DGP, Queensland, and Australia, 2001/02

Category	Cap	ricornia DC	ìΡ	Qι	ieensland		Australia			
	No.	Rate ²	%	No.	Rate ²	%	No.	Rate ²	%	
Avoidable ¹	3,521	2,932.2	9.2	106,884	3,025.0	8.5	552,786	2,847.5	8.7	
Unavoidable	34,707	28,767.6	90.8	1,153,519	32,410.1	91.5	5,818,199	29,970.7	91.3	
Total	38,229	31,698.9	100.0	1,260,403	35,435.5	100.0	6,370,985	32,818.2	100.0	

¹ Admissions resulting from ACS conditions

Figure 7: Avoidable hospitalisations¹, Capricornia DGP, Queensland and Australia, 2001/02



The rate of avoidable hospitalisations in Capricornia DGP is slightly lower, a rate of 2,932.2 admissions per 100,000 population, compared to Queensland (a rate of 3,025.0), and slightly higher compared to Australia (2,847.5).

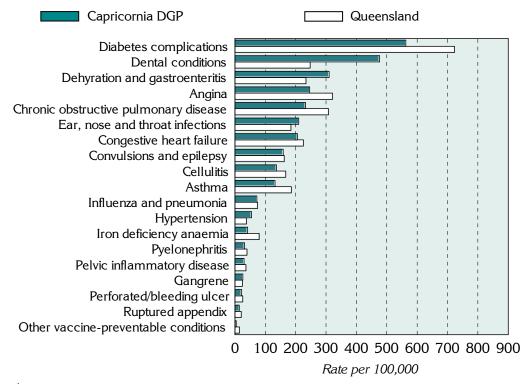
Diabetes complications, dental conditions, dehydration and gastroenteritis, and angina were the four conditions with the highest rates of avoidable hospitalisations in the Capricornia DGP (Figure 8, Table 7).

Table 7 shows the number, rate and proportion of avoidable hospitalisations, for the individual ACS conditions, as well as the vaccine-preventable; acute; and chronic sub-categories. Almost two-thirds of avoidable hospitalisations are attributable to chronic health conditions. The predominance of hospitalisations for chronic conditions in this period can be primarily attributed to the large number of admissions for diabetes complications. Dental conditions; and dehydration and gastroenteritis have the highest rates of avoidable hospitalisations for the acute conditions.

² Rate is the indirectly age-standardised rate per 100,000 population

¹ Admissions resulting from ACS conditions

Figure 8: Avoidable hospitalisations¹ by condition, Capricornia DGP and Queensland, 2001/02



¹ Admissions resulting from ACS conditions: excludes nutritional deficiencies as less than ten admissions

Table 7: Avoidable hospitalisations¹ by condition, Capricornia DGP, Queensland and Australia, 2001/02

Sub-category/ condition	Caprico	rnia DGP	Queen	sland	Austr	alia
	No.	Rate ²	No.	Rate ²	No.	Rate ²
Vaccine-preventable	93	76.6	3,188	89.6	16,573	85.4
Influenza and pneumonia	88	72.3	2,646	74.6	13,021	67.1
Other vaccine preventable	5	4.3	542	15.0	3,552	18.3
Chronic ³	1,709	1,476.1	65,455	1,882.0	352,545	1,816
Diabetes complications	652	562.7	25,175	722.9	141,345	728.1
Iron deficiency anaemia	48	41.8	2,772	79.7	16,451	84.7
Hypertension	63	54.9	1,324	38.3	6,354	32.7
Congestive heart failure	227	205.9	7,617	225.5	42,447	218.6
Angina	282	246.1	11,134	321.5	49,963	257.4
Chronic obstructive pulmonary disease	263	232.7	10,619	308.5	54,853	282.6
Asthma	174	132.0	6,814	185.6	41,009	211.3
Acute	1,793	1,416.5	41,300	1,143.3	200,913	1,035
Dehydration and gastroenteritis	369	310.3	8,278	234.1	37,766	194.5
Convulsions and epilepsy	203	158.7	5,902	162.3	31,137	160.4
Ear, nose and throat infections	283	210.0	6,829	184.4	32,075	165.2
Dental conditions	623	476.5	9,101	247.8	43,667	224.9
Perforated/bleeding ulcer	25	22.1	892	25.8	5,795	29.9
Ruptured appendix	18	14.2	754	20.7	3,866	19.9
Pyelonephritis	40	31.8	1,437	39.8	7,386	38.0
Pelvic inflammatory disease	37	30.1	1,315	36.2	6,547	33.7
Cellulitis	165	136.8	5,930	167.4	28,204	145.3
Gangrene	30	26.0	862	24.8	4,470	23.0
Total avoidable hospitalisations ⁴	3,521	2,932.2	106,884	3,025.0	552,786	2,847.5

¹ Admissions resulting from ACS conditions

² Rate is the indirectly age-standardised rate per 100,000 population

³ Excludes nutritional deficiencies as less than ten admissions

⁴ Sub-category and condition numbers and rates do not add to the reported total avoidable admissions: five conditions (influenza & pneumonia, other vaccine preventable, diabetes complications, ruptured appendix and gangrene) are counted in 'any diagnosis', so may be included in more than one condition group

Avoidable mortality

Avoidable and amenable mortality comprises those causes of death that are potentially avoidable at the present time, given available knowledge about social and economic policy impacts, health behaviours, and health care (the latter relating to the subset of amenable causes).

For information on the avoidable and amenable mortality conditions and ICD codes included in the analysis in this section, please refer to the *Australian and New Zealand Atlas of Avoidable Mortality*, available from www.publichealth.gov.au.

Almost three quarters (72.2%) of all deaths in Capricornia DGP at ages 0 to 74 years over the period 1997 to 2001 are considered to be avoidable, consistent with the proportion for country Queensland (72.8%) (Table 8). Deaths amenable to health care (amenable mortality, a subset of avoidable mortality) accounted for 30.2% of all deaths at ages 0 to 74 years in Capricornia DGP, compared to 29.3% in country Queensland.

Table 8: Avoidable and unavoidable mortality (0 to 74 years) by area, Capricornia DGP, country Queensland, Queensland and Australia, 1997 to 2001

Mortality category	Capricor	nia DGP	Country Queensland		Queensland		Australia	
	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹
Avoidable % of total	1,328 72.2	245.0	20,859 72.8	227.8	35,515 72.8	220.6	189,845 71.5	211.8
(Amenable) (% of total)	(556) (30.2)	(103.3) ()	(8,383) (29.3)	(91.5) ()	(14,323) (29.3)	(89.3) ()	(76,249) (28.7)	(85.1) ()
Unavoidable % of total	511 27.8	94.5 	7,793 27.2	85.0 	13,291 27.2	82.7	75,582 28.5	84.3
Total mortality %	1,839 100.0	339.5 	28,652 100.0	312.8 	48,806 100.0	303.4	265,427 100.0	296.1

¹ Rate is the indirectly age-standardised rate per 100,000 population

Rates of avoidable mortality were higher for males than for females in each of the comparator areas. Capricornia DGP's rate of avoidable mortality for males was 322.6 deaths per 100,000 males, almost twice the rate of 166.1 for females. Similarly, the rate of amenable mortality for males in the Division was higher, 119.3, compared to 86.9 for females, a rate ratio of 1.37 (Figure 9, Table 9).

Figure 9: Avoidable and amenable mortality by sex (0 to 74 years), Capricornia DGP, country Queensland, Queensland and Australia, 1997 to 2001

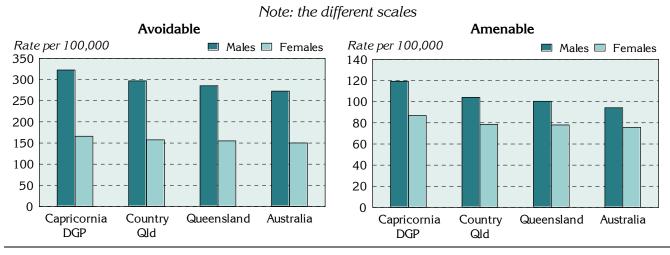


Table 9: Avoidable and amenable mortality (0 to 74 years) by sex, Capricornia DGP, country Queensland, Queensland and Australia, 1997 to 2001

Mortality category	Capricorr	nia DGP	Cour	5	Queen	sland	Austr	alia
and sex			Queen	<u>sland</u>				
	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹
Avoidable								
Males	895	322.6	9,362	269.5	23,316	285.3	123,026	272.6
Females	433	166.1	5,294	152.0	12,199	155.1	66,819	150.1
Total	1,328	245.0	14,656	211.2	35,515	220.6	189,845	211.8
Rate ratio-M:F ²	••	1.94**		1.77**		1.84**		1.82**
Amenable								
Males	329	119.3	3,249	95.2	8,181	100.4	42,568	94.3
Females	227	86.9	2,691	77.4	6,142	78.0	33,681	75.7
Total	556	103.3	5,940	86.4	14,323	89.3	76,249	85.1
Rate ratio-M:F ²		1.37**		1.23**		1.29**	••	1.25**

¹ Rate is the indirectly age-standardised rate per 100,000 population

Another way of measuring premature mortality is to calculate the number of years of life lost (YLL)¹, which takes into account the years a person could have expected to live at each age of death based on the average life expectancy at that age.

The numbers of YLL for Capricornia DGP, country Queensland, Queensland and Australia over the period of analysis are shown in Table 10 by mortality category. However, given the substantial variation in the populations of these areas, a comparison of the proportion of YLL for each area is also shown.

YLL from avoidable mortality accounted for 73.0% of total YLL (0 to 74 years) for Capricornia DGP, consistent with the 72.9% for country Queensland: the proportion of YLL from amenable mortality for Capricornia DGP (28.8%) was consistent with that for country Queensland (28.5%).

Table 10: Years of life lost from avoidable mortality (0 to 74 years), Capricornia DGP, country Queensland, Queensland and Australia, 1997 to 2001

Mortality category	Capricornia DGP			Country Queensland		Queensland		Australia	
	No.	% of	No.	% of	No.	% of	No.	% of	
		total		total		total		total	
Avoidable	19,260	73.0	369,609	72.9	629,779	72.9	3,327,375	71.9	
(Amenable)	(7,603)	(28.8)	(144,553)	(28.5)	(247,893)	(28.7)	(1,298,430)	(28.0)	
Unavoidable	7,140	27.0	137,686	27.1	234,699	27.1	1,303,289	28.1	
Total	26,400	100.0	507,294	100.0	864,478	100.0	4,630,664	100.0	

² Rate ratio (M:F) is the ratio of male to female rates; rate ratios differing significantly from 1.0 are shown with p < 0.05; ** p < 0.01

¹ Years of life lost were calculated using the remaining life expectancy method (this provides an estimate of the average time a person would have lived had he or she not died prematurely). The reference life table was the Coale and Demeny Model Life Table West level 26 female (for both males and females), with the YLL discounted to net present value at a rate of 3 per cent per year.

In each of the areas in Table 11, the majority of avoidable mortality at ages 0 to 74 years occurred in the 65 to 74 year age group (Table 11), with 1,586.8 deaths per 100,000 population in the Capricornia Division. The 45 to 64 year age group accounted for the next highest rate of avoidable death in all of the comparators, with a rate 360.5 in Capricornia DGP.

Table 11: Avoidable and amenable mortality by age, Capricornia DGP, country Queensland, Queensland and Australia, 1997 to 2001

Mortality category	Capricorr	nia DGP	Cou	ntry	Queer	sland	Austi	ralia
and age (years)	-		Queen	sland				
	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹
Avoidable								
0-14	51	36.9	500	30.1	1,208	32.2	5,669	28.8
15-24	57	61.1	562	44.8	1,386	54.3	7,045	52.8
25-44	160	86.0	1,916	77.8	4,527	84.9	24,356	83.9
45-64	473	360.5	5,107	301.7	12,543	322.5	64,282	304.9
65-74	587	1,586.8	6,571	1410.9	15,851	1404.6	88,493	1,358.1
Total	1,328	245.0	14,656	211.2	35,515	220.6	189,845	211.8
Amenable								
0-24	45	19.2	451	15.9	1,059	16.8	5,083	15.4
25-44	42	22.5	491	20.1	1,165	21.8	5,946	20.5
45-64	206	158.2	2,236	132.2	5,352	137.9	27,464	130.3
65-74	263	713.0	2,762	591.5	6,748	599.1	37,756	579.4
Total	556	103.3	5,940	86.4	14,323	89.3	76,249	85.1

¹ Rate is the indirectly age-standardised rate per 100,000 population

Table 12 shows the number and age-standardised death rate by selected major condition group and selected causes included in the avoidable mortality classification.

The highest rates of avoidable mortality for the selected major condition groups in the Capricornia DGP were for cardiovascular diseases, with a rate of 83.6 deaths per 100,000 population, and cancer, 82.1 deaths per 100,000 population (Table 12, Figure 10). For the selected causes within the condition groups, the two major causes of avoidable mortality were ischaemic heart disease and lung cancer, with rates of 63.7 per 100,000 population and 27.8 per 100,000, respectively.

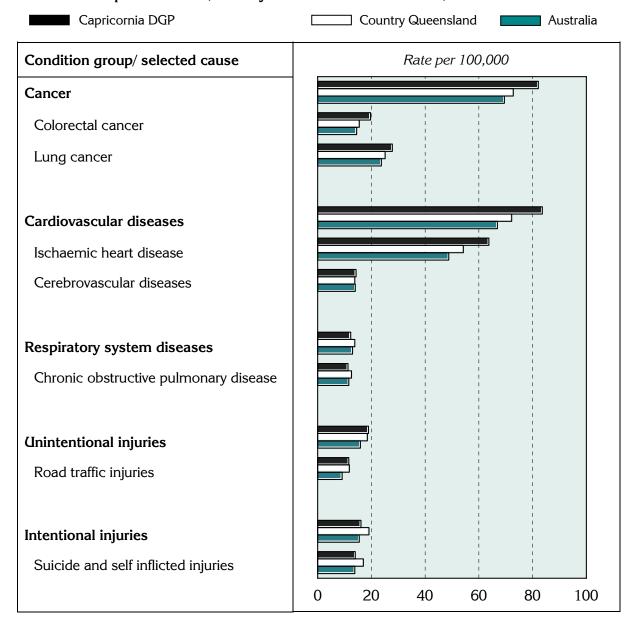
Table 12: Avoidable mortality (0 to 74 years) by major condition group and selected cause, Capricornia DGP, country Queensland, Queensland and Australia, 1997 to 2001

Condition group/ selected cause	Capricorn	ia DGP	Cour Queen	•	Queen	sland	Austr	alia
	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹
Cancer	438	82.1	6,690	72.8	11,618	72.6	62,338	69.5
Colorectal cancer	105	19.7	1,425	15.5	2,392	15.0	13,008	14.5
Lung cancer	148	27.8	2,329	25.1	4,062	25.4	21,208	23.7
Cardiovascular diseases	443	83.6	6,646	72.2	11,294	71.0	59,945	66.9
Ischaemic heart disease	338	63.7	5,005	54.2	8,434	52.9	43,712	48.8
Cerebrovascular diseases	75	14.3	1,263	13.8	2,210	14.0	12,558	14.0
Respiratory system diseases	64	12.3	1,262	13.8	2,168	13.7	11,612	13.0
Chronic obstructive pulmonary disease	59	11.3	1,159	12.6	1,970	12.5	10,395	11.6
Unintentional injuries	110	18.9	1,662	18.5	2,630	15.8	14,224	15.9
Road traffic injuries	68	11.6	1,054	11.8	1,565	9.4	8,138	9.1
Intentional injuries	93	16.1	1,712	19.1	3,017	18.2	13,891	15.5
Suicide and self inflicted injuries	81	14.0	1,521	17.0	2,719	16.4	12,393	13.8

¹ Rate is the indirectly age-standardised rate per 100,000 population

Rates in the Division were generally above, or consistent with, those for country Queensland and Australia: the exceptions were respiratory system disease and the intentional injury categories, where the rates are estimated to be below those in country Queensland (Figure 10).

Figure 10: Avoidable mortality (0 to 74 years) by major condition group and selected cause, Capricornia DGP, country Queensland and Australia, 1997 to 2001



Notes on the data

Data sources and limitations

General

References to 'country Queensland' relate to Queensland excluding the Brisbane Statistical Division.

Data sources

Table 13 details the data sources for the material presented in this profile.

Table 13: Data sources

Section	Source			
Population				
Figures 1 and 2; Table 1	Estimated Resident Population, ABS, 30 June for the periods shown			
Figure 3	Estimated Resident Population, ABS, 30 June 2005; Population Projections, ABS, 30 June 2020 (unpublished) ¹			
Additional socio-demographic indicators				
Figure 4	ABS SEIFA package, Census 2001			
Table 2; Figure 5; Map 1	Jobless families, ABS, 2001 (unpublished)			
Table 2; Figure 5; Map 2	Private health insurance, from Hansard			
GP services – patient flow/ GP catchment				
Tables 3 and 4	Medicare Australia, 2003/04			
Additional prevalence estimates: chronic diseases and risk factors combined				
Figure 6; Table 5	Estimated from 2001 National Health Survey (NHS), ABS (unpublished)			
Avoidable hospitalisations: hospital admissions resulting from ambulatory care sensitive conditions				
Tables 6 and 7; Figures 7 and 8	National Hospital Morbidity Database at Australian Institute of Health & Welfare, 2001/02; data produced in HealthWIZ by Prometheus Information (not available in public release dataset)			
Avoidable mortality				
Tables 8, 9, 10, 11 and 12; Figures 9 and 10	ABS Deaths 1997-2001; data produced in HealthWIZ by Prometheus information (not available in public release dataset)			

¹ The projected population at June 2020 is based on the 2002 ERP. As such, it is somewhat dated, and does not take into account more recent demographic trends: it is however the only projection series available at the SLA level for the whole of Australia.

Methods

For background information on the additional prevalence estimates presented in this profile, please refer to the 'Notes on the data' section of the *Population health profile*, November 2005 (www.publichealth.gov.au).

Please also refer to the November 2005 profile for information on the data converters.

Mapping

In some Divisions the maps may include a very small part of an SLA which has not been allocated any population; or has a population of less than 100 or has less than 1% of the SLAs total population; or there were less than five cases (ie. jobless families, people with health insurance): these areas are mapped with a pattern.

Statistical geography of the Capricornia DGP

For information on the postcodes in the Division, please refer the Department of Health and Ageing website http://www.health.gov.au/internet/wcms/publishing.nsf/Content/health-pcd-programs-divisions-divspc.htm; also included in table format in the 'Notes on the data' section of the *Population health profile*, November 2005 (www.publichealth.gov.au).

Statistical Local Areas (SLAs) are defined by the Australian Bureau of Statistics to produce areas for the presentation and analysis of data. In this Division, some Local Government Areas (LGAs) have been split into SLAs. For example, the LGA of Calliope has two SLAs, Part A and Part B. All of these SLAs and all or parts of the other SLAs listed in Table 14 comprise the Division.

Table 14: SLAs and population in Capricornia DGP, 2005 on 2001 boundaries

SLA code	SLA/SLA group name	Per cent of SLA/SLA group's population in the Division*	Estimate of the SLA/ SLA group's 2005 population in the Division
30350	Banana	3.1	442
30450	Barcoo	2.3	#
30500	Bauhinia	<i>5.3</i>	118
32101	Calliope - Part A	100.0	13,682
32104	Calliope - Part B	100.0	2,785
32850	Duaringa	5. 1	392
33000	Emerald	1.9	<i>263</i>
33151	Fitzroy - Part A	15.0	751
33154	Fitzroy - Part B	21.4	1,151
33350	Gladstone	100.0	28,807
34100	Jericho	7.0	#
34550	Livingstone	73.0	20,992
35100	Miriam Vale	7.2	394
35350	Mount Morgan	1.9	#
35850	Peak Downs	7.3	242
36350	Rockhampton	99.8	59,946

^{*} Proportions are approximate and are known to be incorrect in some cases, due to errors in the concordance used to allocate CDs to form postal areas. In addition, in a small number of cases, part(s) of an SLA can be allocated to another Division, sometimes several hundred kilometres away. Although adjustments have not been made to the concordance to correct these errors, the affected SLAs are highlighted in the table (shown in bold italic typeface)

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Further developments and updates

When the re-aligned boundaries are released and DoHA have made known their geographic composition, PHIDU will examine the need to revise and re-publish these profiles (*Population health profile*, dated November 2005, and the *Population health profile*: supplement, dated March 2007).

PHIDU contact details

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^{*} Not shown as the total population is less than 100