

# Population health profile of the Fairfield

## Division of General Practice: supplement

Population Profile Series: No. 10a

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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 Fairfield Division of General Practice: supplement

This profile is a supplement to the *Population health profile of the Fairfield Division of General Practice*, dated November 2005, available from [www.publichealth.gov.au](http://www.publichealth.gov.au). This supplement includes an update of the population of the Fairfield 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:

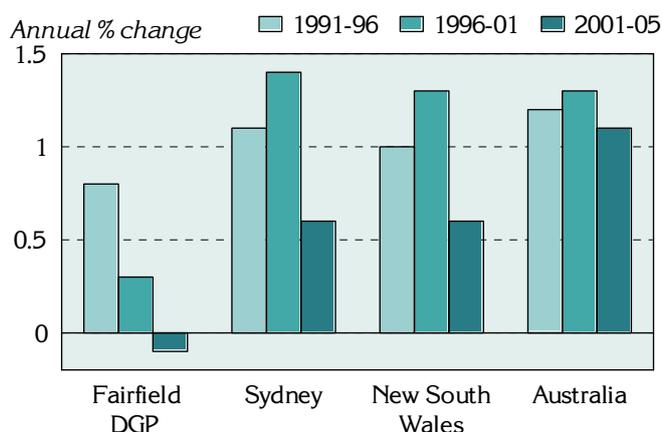
- Population [updated to June 2005]
- Additional socio-demographic indicators
- Unreferred attendances – patient flow/ GP catchment
- Additional prevalence estimates: chronic diseases and risk factors combined
- Avoidable hospitalisations: hospital admissions resulting from ambulatory care sensitive 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](http://www.publichealth.gov.au)).

## Population

The Fairfield Division had an Estimated Resident Population of 219,021 at 30 June 2005.

**Figure 1: Annual population change, Fairfield DGP, Sydney, New South Wales and Australia, 1991 to 1996, 1996 to 2001 and 2001 to 2005**



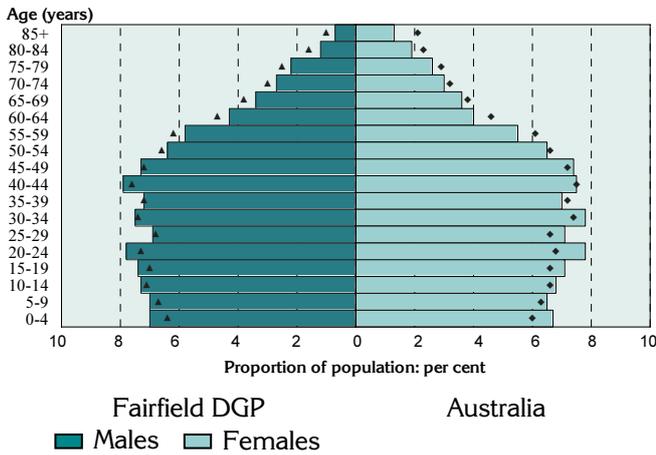
Over the five years from 1991 to 1996, the population change (0.8%) was lower on average each year in the Division than in Sydney (1.1%), New South Wales (1.0%) and Australia as a whole (1.2%). The population growth (0.3%) from 1996 to 2001 was substantially lower than the increases of 1.4% for Sydney and 1.3% for New South Wales. From 2001 to 2005, the Division's population decreased by 0.1% on average each year, compared to increases of 0.6% in Sydney and New South Wales, and 1.1% for Australia.

**Table 1: Population by age, Fairfield DGP and Australia, 2005**

Age group (years)	Fairfield DGP		Australia	
	No.	%	No.	%
0-14	45,257	20.7	3,978,221	19.6
15-24	32,953	15.0	2,819,834	13.9
25-44	64,525	29.5	5,878,107	28.9
45-64	51,475	23.5	4,984,446	24.5
65-74	13,968	6.4	1,398,831	6.9
75-84	8,643	3.9	954,143	4.7
85+	2,201	1.0	315,027	1.5
<b>Total</b>	<b>219,021</b>	<b>100.0</b>	<b>20,328,609</b>	<b>100.0</b>

As shown in the accompanying table and the age-sex pyramid below, Fairfield DGP had a higher proportion of children and young people than Australia, with 20.7% at ages 0 to 14 years, and 15.0% aged 15 to 24 (compared to 19.6% and 13.9%, respectively, for Australia) (Table 1). Conversely, there were lower proportions of people aged 45 years and over compared to Australia as a whole.

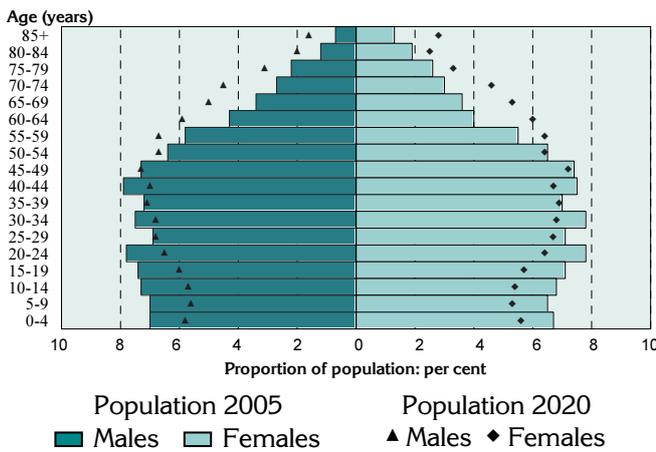
**Figure 2: Population in Fairfield DGP and Australia, by age and sex, 2005**



The age distribution of the Division's population is generally similar to that for Australia. The most notable differences are:

- at younger ages – higher proportions of children and young people aged 0 to 24 years; and
- from 50 years (55 for females) – slightly lower proportions of both males and females.

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



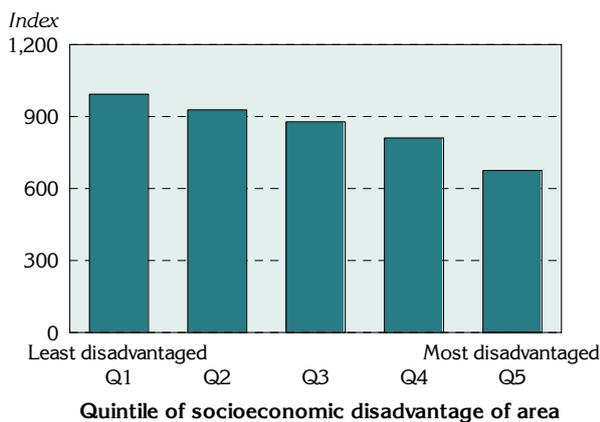
The population projections for the Division show a number of changes in age distribution, with the 2020 population projected to have:

- from 0 to 34 years – lower proportions of both males and females; and
- from 55 years onwards – higher proportions of 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 Fairfield Division of General Practice*, dated November 2005, available from [www.publichealth.gov.au](http://www.publichealth.gov.au), for other socio-demographic indicators.

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



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

The Fairfield DGP has an index score of 857, well below the score for Australia of 1000: this score varies across the Division, from a very low score of 675 in the most disadvantaged areas to 933 in the least disadvantaged areas.

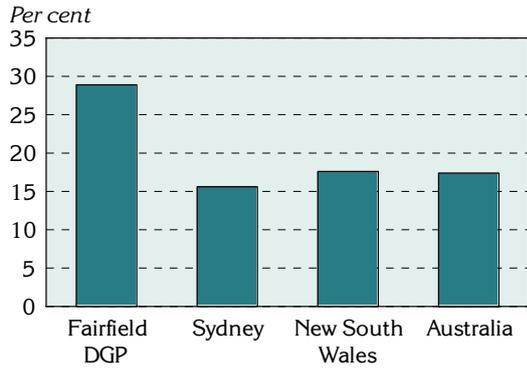
Note: each 'quintile' comprises approximately 20% of the population of the Division.

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 substantially more jobless families in the Fairfield DGP (28.9%), compared to Sydney as a whole (15.6%) (Figure 5, Table 2).

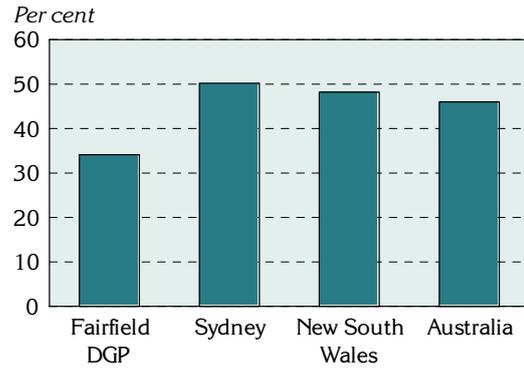
With the introduction of the 30% rebate for private health insurance premiums, there was a once-off registration process, providing information of the postcode and residence of those who had such insurance (these data are not available at this area level for later dates). In 2001, the Division had a markedly lower proportion of the population with private health insurance (34.1%), compared to Sydney (50.2%) (Figure 5, Table 2).

**Figure 5: Socio-demographic indicators, Fairfield DGP, Sydney, New South Wales and Australia, 2001**

**Jobless families with children under 15 years old**



**Private health insurance, 30 June**

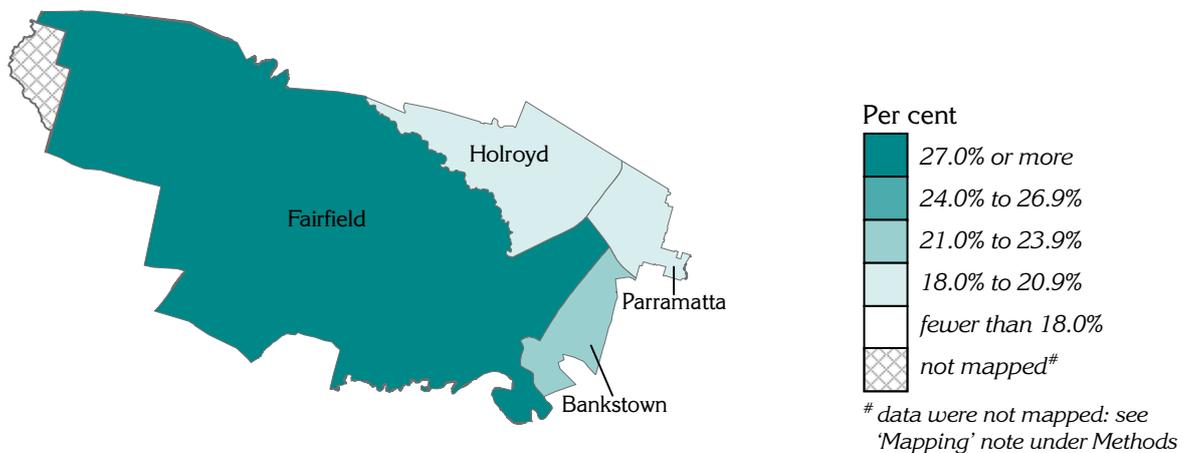


**Table 2: Socio-demographic indicators, Fairfield DGP, Sydney, New South Wales and Australia, 2001**

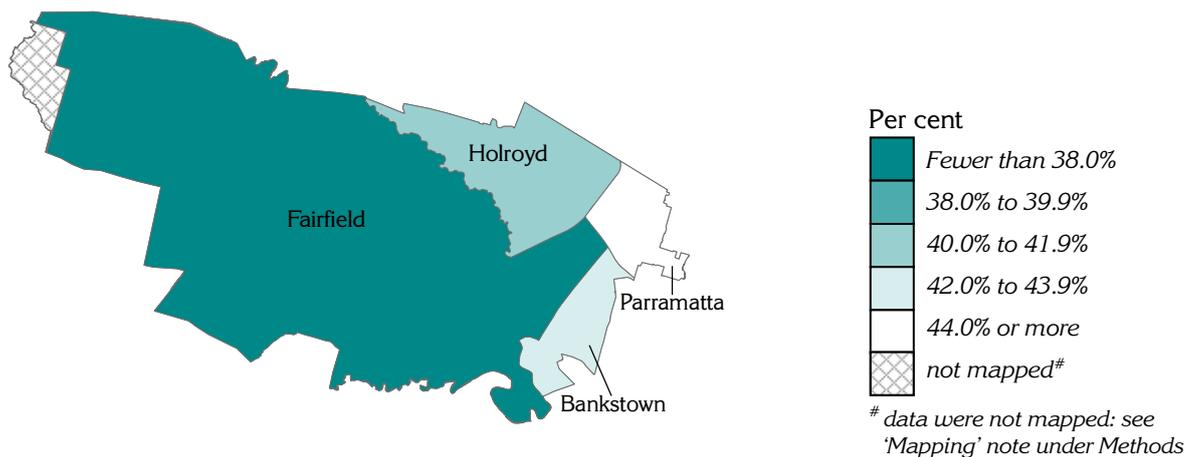
Indicator	Fairfield DGP		Sydney		New South Wales		Australia	
	No.	%	No.	%	No.	%	No.	%
Jobless families with children under 15 years old	7,278	28.9	66,526	15.6	121,409	17.6	357,563	17.4
Private health insurance (30 June)	71,913	34.1	2,000,802	50.2	3,062,382	48.2	8,671,106	46.0

Details of the distribution of jobless families and of the population covered by private health insurance 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, Fairfield DGP, 2001**



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



## GP services to residents of the Fairfield 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.

More than three quarters (77.9%) of all unreferred attendances for residents of Fairfield DGP were provided in the Division (ie. by a GP with a provider number in the Division): this represented 1,303,674 GP unreferred attendances (Table 3). A further 9.0% of unreferred attendances to residents were provided by GPs with a provider number in Western Sydney DGP, with 4.5% provided by GPs in Liverpool DGP.

**Table 3: Patient flow – People living<sup>1</sup> in Fairfield DGP by Division where attendance occurred<sup>2</sup>, 2003/04**

Division		Unreferred attendances	
Number	Name	No.	% <sup>3</sup>
211	Fairfield DGP	1,303,674	77.9
206	Western Sydney DGP (now WentWest & part Hawkesbury-Hills)	149,866	9.0
210	Liverpool DGP	74,743	4.5
205	Bankstown DGP	50,975	3.0
201	Central Sydney DGP	23,332	1.4
204	Canterbury DGP	9,924	0.6
215	Macarthur DGP	9,836	0.6
212	Hornsby Ku-ring-gai Ryde DGP	7,620	0.5
Other	..	29,365	1.8
<b>Total</b>	<b>..</b>	<b>1,958,263</b>	<b>100.0</b>

<sup>1</sup> Based on address in Medicare records

<sup>2</sup> Division of GP based on provider number

<sup>3</sup> Proportion of all unreferred attendances of patients with an address in Division 211 by Division in which attendance occurred

Almost three quarters (72.6%) of unreferred attendances provided by GPs with a provider number in Fairfield DGP were also to people living in the Division (ie. their Medicare address was in the Division) (Table 4). A further 11.1% of unreferred attendances by GPs in the Division were to people living in Liverpool DGP, with 6.6% to residents from Western Sydney DGP.

**Table 4: GP catchment – Unreferred attendances provided by GPs<sup>1</sup> in Fairfield DGP by Division of patient address<sup>2</sup>, 2003/04**

Division		Unreferred attendances	
Number	Name	No.	% <sup>3</sup>
211	Fairfield DGP	1,303,674	72.6
210	Liverpool DGP	198,991	11.1
206	Western Sydney DGP (now WentWest & part Hawkesbury-Hills)	117,969	6.6
205	Bankstown DGP	46,386	2.6
215	Macarthur DGP	36,571	2.0
201	Central Sydney DGP	14,842	0.8
237	Nepean DGP	11,517	0.6
212	Hornsby Ku-ring-gai Ryde DGP	9,139	0.5
204	Canterbury DGP	8,932	0.5
209	St George DGP	5,758	0.3
Other	..	42,305	2.4
<b>Total</b>	<b>..</b>	<b>1,796,084</b>	<b>100.0</b>

<sup>1</sup> Division of GP based on provider number

<sup>2</sup> Based on address in Medicare records

<sup>3</sup> Proportion of all unreferred attendances to GPs with a provider number in Division 211 by Division of patient address

## Additional prevalence estimates: chronic diseases and risk factors combined

Please refer to the earlier *Population health profile of the Fairfield Division of General Practice*, dated November 2005, available from [www.publichealth.gov.au](http://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 relatively more people in Fairfield DGP who had asthma and were smokers, compared to Sydney, but notably fewer than for Australia as a whole (Figure 6, Table 5): that is, the prevalence rates per 1,000 population were lower than the national rates. However, there were higher rates in Fairfield DGP of people who had type 2 diabetes and were overweight/ obese, compared to Sydney or Australia.

**Figure 6: Estimates of selected chronic diseases and risk factors, Fairfield DGP, Sydney and Australia, 2001**



**Table 5: Estimates of selected chronic diseases and risk factors, Fairfield DGP, Sydney, New South Wales and Australia, 2001**

Variable	Fairfield DGP		Sydney		New South Wales		Australia	
	No. <sup>1</sup>	Rate <sup>2</sup>	No. <sup>1</sup>	Rate <sup>2</sup>	No. <sup>1</sup>	Rate <sup>2</sup>	No. <sup>1</sup>	Rate <sup>1</sup>
Had asthma and smoked <sup>3</sup>	3,938	17.8	72,198	17.0	126,542	19.7	397,734	20.8
Had type 2 diabetes & were overweight/ obese <sup>4</sup>	3,426	18.3	59,451	15.9	100,235	15.7	283,176	15.2

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

<sup>2</sup> Rate is the indirectly age-standardised rate per 1,000 population

<sup>3</sup> Population aged 18 years and over

<sup>4</sup> 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](http://www.publichealth.gov.au).

In 2001 to 2002, the 4,435 admissions from ambulatory care sensitive (ACS) conditions accounted for 8.3% of all admissions in the Fairfield DGP (Table 6, Figure 7), marginally below the levels for both New South Wales (8.6%) and Australia (8.7%).

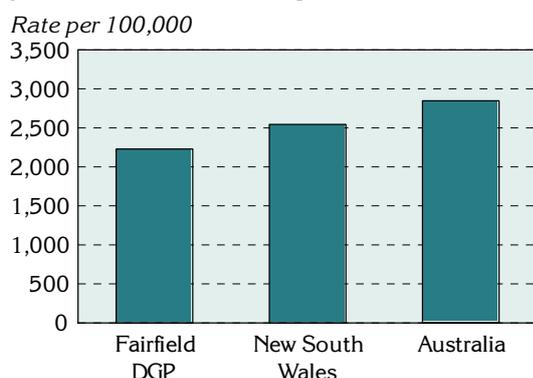
**Table 6: Avoidable<sup>1</sup> and unavoidable hospitalisations, Fairfield DGP, New South Wales, and Australia, 2001/02**

Category	Fairfield DGP			New South Wales			Australia		
	No.	Rate <sup>2</sup>	%	No.	Rate <sup>2</sup>	%	No.	Rate <sup>2</sup>	%
Avoidable <sup>1</sup>	4,435	2,230.1	8.3	170,066	2,543.8	8.6	552,786	2,847.5	8.7
Unavoidable	48,708	23,671.7	91.7	1,810,901	27,255.3	91.4	5,818,199	29,970.7	91.3
<b>Total</b>	<b>53,143</b>	<b>25,902.4</b>	<b>100.0</b>	<b>1,980,967</b>	<b>29,798.8</b>	<b>100.0</b>	<b>6,370,985</b>	<b>32,818.2</b>	<b>100.0</b>

<sup>1</sup> Admissions resulting from ACS conditions

<sup>2</sup> Rate is the indirectly age-standardised rate per 100,000 population

**Figure 7: Avoidable hospitalisations<sup>1</sup>, Fairfield DGP, New South Wales and Australia, 2001/02**



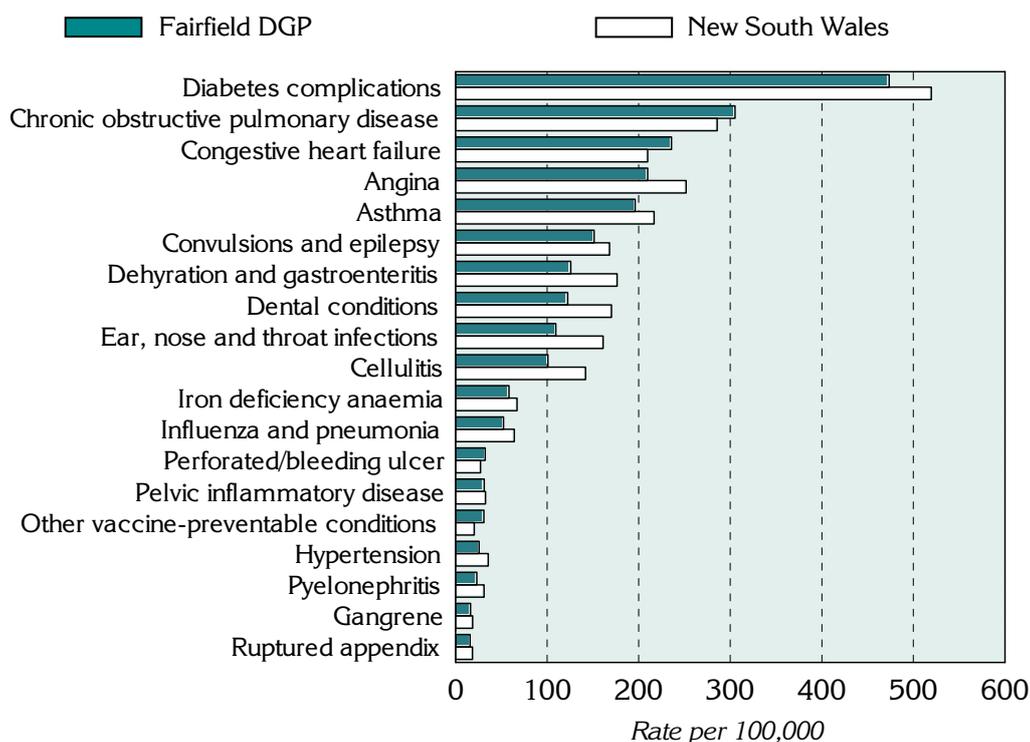
The rate of avoidable hospitalisations in Fairfield DGP is 2,230.1 admissions per 100,000 population, notably lower than in New South Wales (a rate of 2,543.8), and markedly so than for Australia (2,847.5).

<sup>1</sup> Admissions resulting from ACS conditions

Diabetes complications, chronic obstructive pulmonary disease, congestive heart failure and angina were the four conditions with the highest rates of avoidable hospitalisations in the Fairfield 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. Convulsions and epilepsy; and dehydration and gastroenteritis have the highest rates of avoidable hospitalisations for the acute conditions.

**Figure 8: Avoidable hospitalisations<sup>1</sup> by condition, Fairfield DGP and New South Wales, 2001/02**



<sup>1</sup> Admissions resulting from ACS conditions: excludes nutritional deficiencies as less than ten admissions

**Table 7: Avoidable hospitalisations<sup>1</sup> by condition, Fairfield DGP, New South Wales and Australia, 2001/02**

Sub-category/ condition	Fairfield DGP		New South Wales		Australia	
	No.	Rate <sup>2</sup>	No.	Rate <sup>2</sup>	No.	Rate <sup>2</sup>
<b>Vaccine-preventable</b>	<b>173</b>	<b>83.3</b>	<b>5,630</b>	<b>84.5</b>	<b>16,573</b>	<b>85.4</b>
Influenza and pneumonia	105	52.4	4,280	64.1	13,021	67.1
Other vaccine preventable	68	30.9	1,350	20.4	3,552	18.3
<b>Chronic<sup>3</sup></b>	<b>2,828</b>	<b>1,504.4</b>	<b>106,803</b>	<b>1,587.0</b>	<b>352,545</b>	<b>1,816</b>
Diabetes complications	899	473.5	34,975	519.5	141,345	728.1
Iron deficiency anaemia	111	58.4	4,494	67.0	16,451	84.7
Hypertension	49	25.7	2,398	35.7	6,354	32.7
Congestive heart failure	393	235.8	14,270	209.7	42,447	218.6
Angina	385	209.8	16,987	251.8	49,963	257.4
Chronic obstructive pulmonary disease	553	305.2	19,359	285.6	54,853	282.6
Asthma	438	196.0	14,289	216.8	41,009	211.3
<b>Acute</b>	<b>1,559</b>	<b>728.3</b>	<b>62,543</b>	<b>946.0</b>	<b>200,913</b>	<b>1,035</b>
Dehydration and gastroenteritis	255	125.7	11,725	176.4	37,766	194.5
Convulsions and epilepsy	333	151.3	11,093	168.1	31,137	160.4
Ear, nose and throat infections	250	109.4	10,615	161.1	32,075	165.2
Dental conditions	274	122.4	11,196	170.3	43,667	224.9
Perforated/bleeding ulcer	59	32.4	1,830	27.1	5,795	29.9
Ruptured appendix	35	15.8	1,212	18.5	3,866	19.9
Pyelonephritis	50	23.1	2,038	31.0	7,386	38.0
Pelvic inflammatory disease	70	31.2	2,134	32.7	6,547	33.7
Cellulitis	203	100.8	9,451	142.0	28,204	145.3
Gangrene	30	16.2	1,249	18.6	4,470	23.0
<b>Total avoidable hospitalisations<sup>4</sup></b>	<b>4,435</b>	<b>2,230.1</b>	<b>170,066</b>	<b>2,543.8</b>	<b>552,786</b>	<b>2,847.5</b>

<sup>1</sup> Admissions resulting from ACS conditions

<sup>2</sup> Rate is the indirectly age-standardised rate per 100,000 population

<sup>3</sup> Excludes nutritional deficiencies as less than ten admissions

<sup>4</sup> 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](http://www.publichealth.gov.au).

Almost three quarters (73.8%) of all deaths in Fairfield DGP at ages 0 to 74 years over the period 1997 to 2001 are considered to be avoidable, slightly higher than the proportion for Sydney (71.3%) (Table 8). Deaths amenable to health care (amenable mortality, a subset of avoidable mortality) accounted for 28.1% of all deaths at ages 0 to 74 years in Fairfield DGP, compared to 28.6% in Sydney.

**Table 8: Avoidable and unavoidable mortality (0 to 74 years) by area, Fairfield DGP, Sydney, New South Wales and Australia, 1997 to 2001**

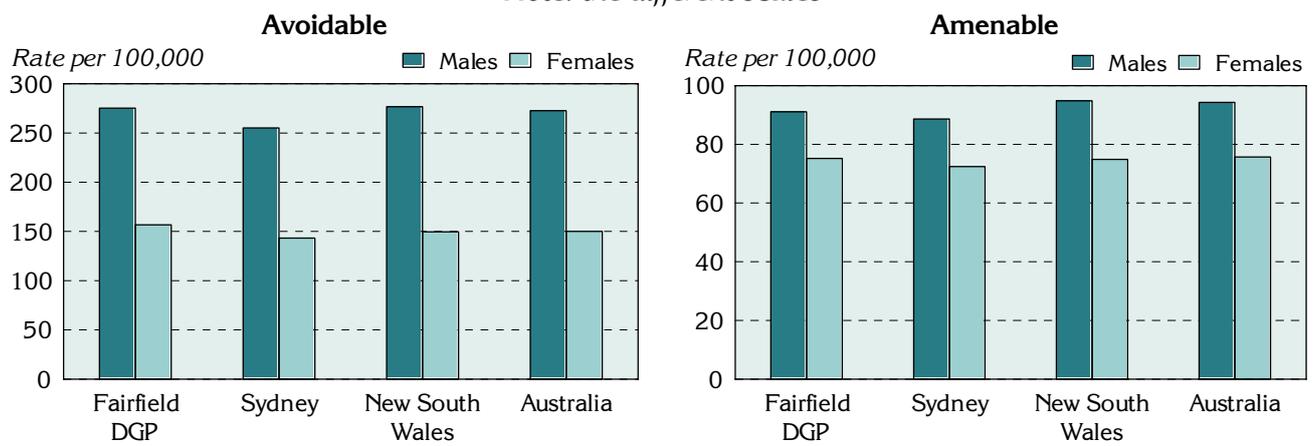
Mortality category	Fairfield DGP		Sydney		New South Wales		Australia	
	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>
Avoidable	2,023	216.4	36,709	199.5	66,151	213.6	189,845	211.8
% of total	<b>73.8</b>	..	<b>71.3</b>	..	<b>71.4</b>	..	<b>71.5</b>	..
(Amenable)	(771)	(83.2)	(14,736)	(80.6)	(26,374)	(85.0)	(76,249)	(85.1)
(% of total)	<b>(28.1)</b>	(..)	<b>(28.6)</b>	(..)	<b>(28.5)</b>	(..)	<b>(28.7)</b>	(..)
Unavoidable	716	77.0	14,768	80.6	26,468	85.3	75,582	84.3
% of total	<b>26.1</b>	..	<b>28.7</b>	..	<b>28.6</b>	..	<b>28.5</b>	..
<b>Total mortality</b>	<b>2,740</b>	<b>293.4</b>	<b>51,477</b>	<b>280.1</b>	<b>92,619</b>	<b>299.0</b>	<b>265,427</b>	<b>296.1</b>
%	<b>100.0</b>	..	<b>100.0</b>	..	<b>100.0</b>	..	<b>100.0</b>	..

<sup>1</sup> 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. Fairfield DGP's rate of avoidable mortality for males was 275.2 deaths per 100,000 males, more than twice the rate of 156.7 for females. Similarly, the rate of amenable mortality for males (91.1) in the Division was higher than for females (75.2), a rate ratio of 1.21 (Figure 9, Table 9).

**Figure 9: Avoidable and amenable mortality by sex (0 to 74 years), Fairfield DGP, Sydney, New South Wales and Australia, 1997 to 2001**

*Note: the different scales*



**Table 9: Avoidable and amenable mortality (0 to 74 years) by sex, Fairfield DGP, Sydney, New South Wales and Australia, 1997 to 2001**

Mortality category and sex	Fairfield DGP		Sydney		New South Wales		Australia	
	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>
<b>Avoidable</b>								
Males	1,298	275.2	23,505	255.1	43,074	276.8	123,026	272.6
Females	725	156.7	13,204	143.2	23,077	149.6	66,819	150.1
<b>Total</b>	<b>2,023</b>	<b>216.4</b>	<b>36,709</b>	<b>199.5</b>	<b>66,151</b>	<b>213.6</b>	<b>189,845</b>	<b>211.8</b>
<b>Rate ratio-M:F<sup>2</sup></b>	<b>..</b>	<b>1.76**</b>	<b>..</b>	<b>1.78**</b>	<b>..</b>	<b>1.85**</b>	<b>..</b>	<b>1.82**</b>
<b>Amenable</b>								
Males	424	91.1	8,068	88.6	14,811	94.8	42,568	94.3
Females	348	75.2	6,667	72.4	11,562	74.9	33,681	75.7
<b>Total</b>	<b>771</b>	<b>83.2</b>	<b>14,736</b>	<b>80.6</b>	<b>26,374</b>	<b>85.0</b>	<b>76,249</b>	<b>85.1</b>
<b>Rate ratio-M:F<sup>2</sup></b>	<b>..</b>	<b>1.21**</b>	<b>..</b>	<b>1.22**</b>	<b>..</b>	<b>1.27**</b>	<b>..</b>	<b>1.25**</b>

<sup>1</sup> Rate is the indirectly age-standardised rate per 100,000 population

<sup>2</sup> 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

Another way of measuring premature mortality is to calculate the number of years of life lost (YLL)<sup>1</sup>, 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 Fairfield DGP, Sydney, New South Wales 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 73.9% of total YLL (0 to 74 years) for Fairfield DGP, higher than the 71.7% for Sydney. At the same time, the proportion of YLL from amenable mortality for Fairfield DGP (27.2%) was lower than that for Sydney (28.0%).

**Table 10: Years of life lost from avoidable mortality (0 to 74 years), Fairfield DGP, Sydney, New South Wales and Australia, 1997 to 2001**

Mortality category	Fairfield DGP		Sydney		New South Wales		Australia	
	No.	% of total	No.	% of total	No.	% of total	No.	% of total
Avoidable	35,620	73.9	644,323	71.7	1,147,183	71.8	3,327,375	71.9
(Amenable)	(13,101)	(27.2)	(251,183)	(28.0)	(444,143)	(27.8)	(1,298,430)	(28.0)
Unavoidable	12,562	26.1	254,314	28.3	451,496	28.2	1,303,289	28.1
<b>Total</b>	<b>48,182</b>	<b>100.0</b>	<b>898,637</b>	<b>100.0</b>	<b>1,598,679</b>	<b>100.0</b>	<b>4,630,664</b>	<b>100.0</b>

<sup>1</sup> 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 1,446.9 deaths per 100,000 population in Fairfield 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 313.3 in Fairfield Division.

**Table 11: Avoidable and amenable mortality by age, Fairfield DGP, Sydney, New South Wales and Australia, 1997 to 2001**

Mortality category and age (years)	Fairfield DGP		Sydney		New South Wales		Australia	
	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>
<b>Avoidable</b>								
0-14	60	25.3	1,098	26.6	1,836	27.5	5,669	28.8
15-24	84	50.9	1,303	44.9	2,241	50.9	7,045	52.8
25-44	260	77.7	4,802	74.3	8,119	82.9	24,356	83.9
45-64	702	313.3	12,603	289.9	22,358	311.1	64,282	304.9
65-74	918	1,446.9	16,903	1,307.3	31,597	1,375.8	88,493	1,358.1
<b>Total</b>	<b>2,023</b>	<b>216.4</b>	<b>36,709</b>	<b>199.5</b>	<b>66,151</b>	<b>213.6</b>	<b>189,845</b>	<b>211.8</b>
<b>Amenable</b>								
0-24	54	13.6	1,013	14.5	1,658	14.8	5,083	15.4
25-44	55	16.4	1,093	17.2	1,878	19.2	5,946	20.5
45-64	278	124.3	5,384	123.9	9,444	131.4	27,464	130.3
65-74	385	606.1	7,245	559.0	13,394	582.9	37,756	579.4
<b>Total</b>	<b>771</b>	<b>83.2</b>	<b>14,736</b>	<b>80.6</b>	<b>26,374</b>	<b>85.0</b>	<b>76,249</b>	<b>85.1</b>

<sup>1</sup> 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 Fairfield DGP were for cardiovascular diseases, with a rate of 74.0 deaths per 100,000 population, and cancer, 72.7 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 49.5 per 100,000 population and 25.4 per 100,000, respectively.

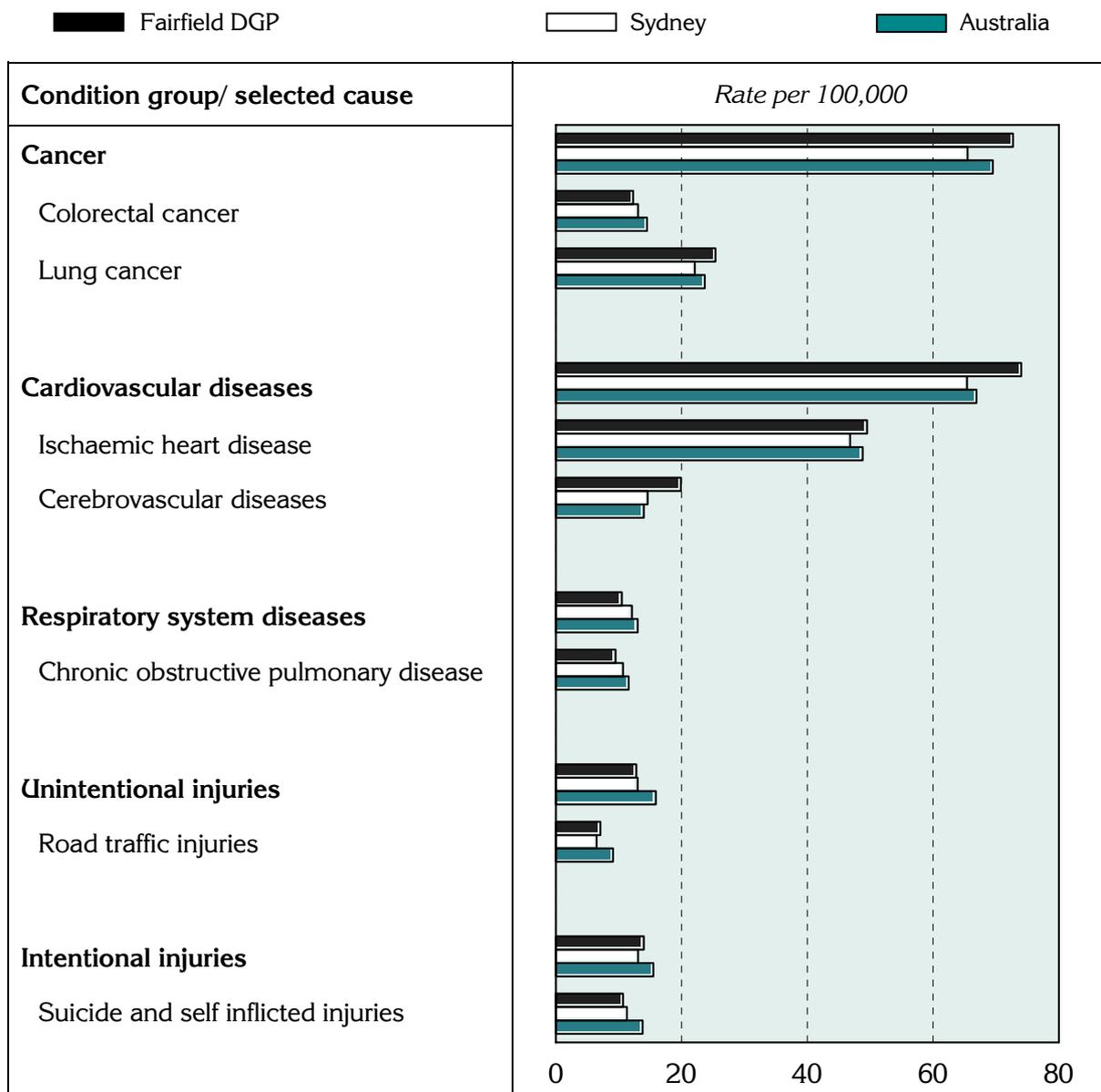
**Table 12: Avoidable mortality (0 to 74 years) by major condition group and selected cause, Fairfield DGP, Sydney, New South Wales and Australia, 1997 to 2001**

Condition group/ selected cause	Fairfield DGP		Sydney		New South Wales		Australia	
	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>
<b>Cancer</b>	<b>667</b>	<b>72.7</b>	<b>11,919</b>	<b>65.5</b>	<b>21,158</b>	<b>68.1</b>	<b>62,338</b>	<b>69.5</b>
Colorectal cancer	113	12.3	2,382	13.1	4,318	13.9	13,008	14.5
Lung cancer	231	25.4	3,983	22.1	7,297	23.4	21,208	23.7
<b>Cardiovascular diseases</b>	<b>670</b>	<b>74.0</b>	<b>11,824</b>	<b>65.4</b>	<b>21,925</b>	<b>70.3</b>	<b>59,945</b>	<b>66.9</b>
Ischaemic heart disease	449	49.5	8,461	46.8	15,935	51.1	43,712	48.8
Cerebrovascular diseases	180	19.9	2,641	14.6	4,656	14.9	12,558	14.0
<b>Respiratory system diseases</b>	<b>94</b>	<b>10.5</b>	<b>2,177</b>	<b>12.1</b>	<b>4,313</b>	<b>13.8</b>	<b>11,612</b>	<b>13.0</b>
Chronic obstructive pulmonary disease	85	9.5	1,916	10.7	3,882	12.4	10,395	11.6
<b>Unintentional injuries</b>	<b>131</b>	<b>12.8</b>	<b>2,513</b>	<b>13.0</b>	<b>4,540</b>	<b>15.0</b>	<b>14,224</b>	<b>15.9</b>
Road traffic injuries	73	7.1	1,249	6.5	2,528	8.4	8,138	9.1
<b>Intentional injuries</b>	<b>143</b>	<b>14.0</b>	<b>2,558</b>	<b>13.1</b>	<b>4,497</b>	<b>14.9</b>	<b>13,891</b>	<b>15.5</b>
Suicide and self inflicted injuries	109	10.7	2,211	11.3	3,941	13.0	12,393	13.8

<sup>1</sup> Rate is the indirectly age-standardised rate per 100,000 population

Rates in the Division were generally above or consistent with those for Sydney, with the exception of respiratory system diseases and COPD; there was no consistent pattern in the rates in the Division when compared with Australia (Figure 10).

**Figure 10: Avoidable mortality (0 to 74 years) by major condition group and selected cause, Fairfield DGP, Sydney and Australia, 1997 to 2001**



# Notes on the data

## Data sources and limitations

### General

References to 'Sydney' relate to the Sydney Statistical Division.

### Data sources

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

**Table 13: Data sources**

Section	Source
<b>Population</b>	
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) <sup>1</sup>
<b>Additional socio-demographic indicators</b>	
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
<b>GP services – patient flow/ GP catchment</b>	
Tables 3 and 4	Medicare Australia, 2003/04
<b>Additional prevalence estimates: chronic diseases and risk factors combined</b>	
Figure 6; Table 5	Estimated from 2001 National Health Survey (NHS), ABS (unpublished)
<b>Avoidable hospitalisations: hospital admissions resulting from ambulatory care sensitive conditions</b>	
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)
<b>Avoidable mortality</b>	
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)

<sup>1</sup> 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](http://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 (i.e. jobless families, people with health insurance): these areas are mapped with a pattern.

## Statistical geography of the Fairfield 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](http://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 the Fairfield Division, the majority of Fairfield lies within the Division, and parts of Holroyd, Parramatta and Bankstown (Table 14).

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

SLA code	SLA name	Per cent of the SLA's population in the Division *	Estimate of the SLA's 2005 population in the Division
10350	Bankstown	3.1	5,491
12850	Fairfield	95.0	178,421
13950	Holroyd	23.3	21,459
16250	Parramatta	9.0	13,650

\* 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

## Acknowledgements

Funding for these profiles was provided by the Population Health Division of the Department of Health and Ageing (DoHA).

## 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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