

Population health profile of the Southern Queensland Rural 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 Southern Queensland Rural Division of General Practice: supplement

This profile is a supplement to the *Population health profile of the Southern Queensland Rural Division of General Practice*, dated November 2005, available from www.publichealth.gov.au. This supplement includes an update of the population of the Southern Queensland Rural 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:

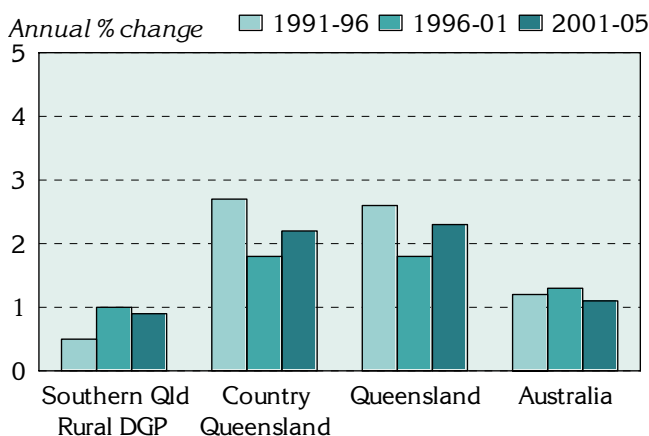
- Population [updated to June 2005]
- Additional socio-demographic indicators
- Unreferred attendances – patient flow/ GP catchment
- Additional prevalence estimates: chronic diseases and risk factors combined
- Avoidable hospitalisations: hospital admissions resulting from ambulatory care sensitive 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 Southern Queensland Rural Division had an Estimated Resident Population of 174,222 at 30 June 2005.

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



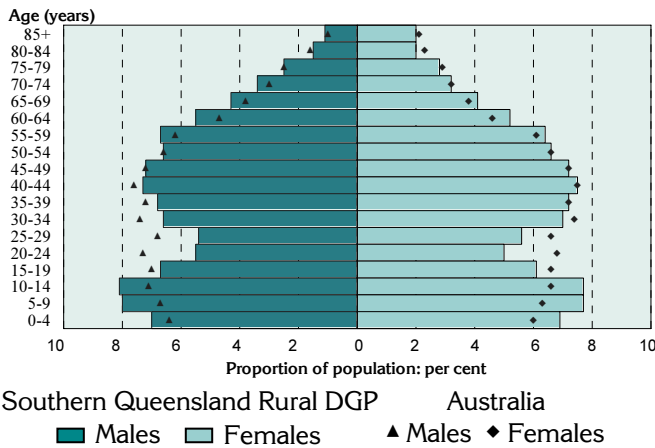
Over the five years from 1991 to 1996, the Division's population increased by 0.5% on average each year, substantially lower than in country Queensland (2.7%) and Queensland (2.6%). From 1996 to 2001, the annual percentage growth rate in the Division increased to 1.0%, again lower than in country Queensland and Queensland (1.8%). The growth rate of 0.9% per year from 2001 to 2005 remained below the annual increases for country Queensland (2.2%) and Queensland (2.3%).

Table 1: Population by age, Southern Queensland Rural DGP and Australia, 2005

Age group (years)	Southern Queensland Rural DGP		Australia	
	No.	%	No.	%
0-14	39,645	22.8	3,978,221	19.6
15-24	20,267	11.6	2,819,834	13.9
25-44	46,382	26.6	5,878,107	28.9
45-64	44,686	25.6	4,984,446	24.5
65-74	13,059	7.5	1,398,831	6.9
75-84	7,573	4.3	954,143	4.7
85+	2,609	1.5	315,027	1.5
Total	174,222	100.0	20,328,609	100.0

As shown in the accompanying table and the age-sex pyramid below, Southern Queensland Rural DGP had relatively more people aged 0 to 14 (22.8%), 45 to 64 (25.6%) and 65 to 74 years (7.5%), compared with Australia as a whole (19.6%, 24.5% and 6.9%). (Table 1). Conversely, the proportions of the Division's population aged 15 to 44 years and 75 to 84 years were lower than those for Australia.

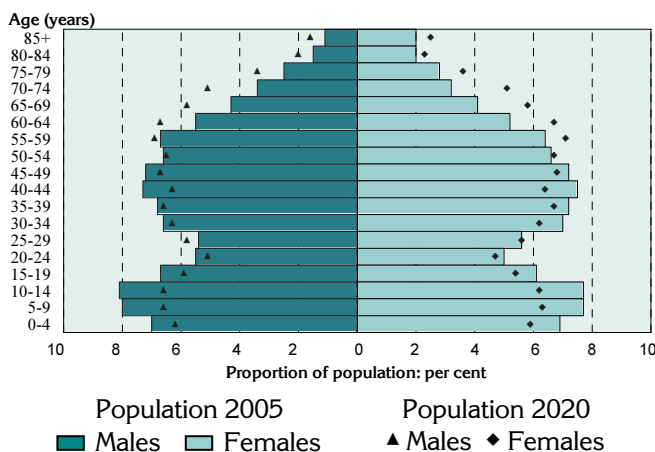
Figure 2: Population in Southern Queensland Rural DGP and Australia, by age and sex, 2005



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

- at younger ages – relatively more males and females aged 0 to 14 years;
- from 15 to 44 years – relatively fewer males and, from 15 to 34 years, females; and
- from 55 to 74 years, relatively more males and females.

Figure 3: Population projections for Southern Queensland Rural DGP, by age and sex, 2005 and



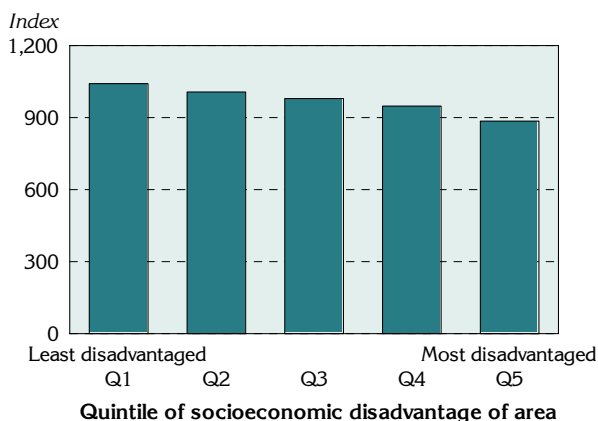
The population projections for the Division show a number of changes in age distribution, with the 2020 population projected to have:

- below 50 years of age – relatively fewer males and females aged 0 to 49 years (except for males aged 25 to 29 years); and
- from age 55 years onwards – 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 Southern Queensland Rural, 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, Southern Queensland Rural DGP, 2001



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

The Southern Queensland Rural DGP has an index score of 972, below the score for Australia of 1000: this score varies across the Division, from a low of 885 in the most disadvantaged areas to 1041 in the least disadvantaged areas.

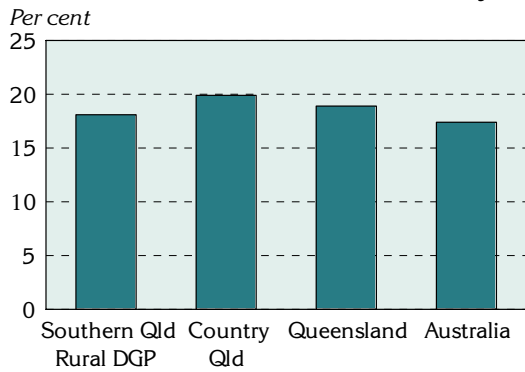
Note: each ‘quintile’ comprises approximately 20% of the population of the Division.

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 Southern Queensland Rural DGP (18.1%), 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, there was a similar level of private health insurance in the Division (40.5%), compared to country Queensland (40.3%) (Figure 5, Table 2).

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

Jobless families with children under 15 years old



Private health insurance, 30 June

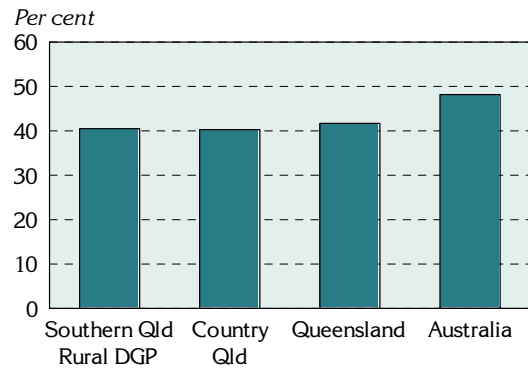
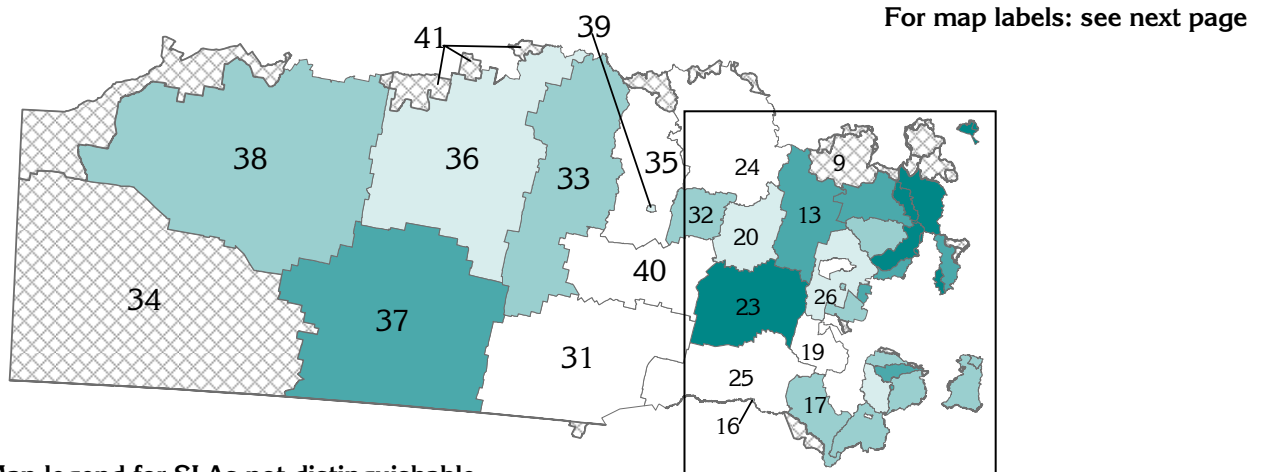


Table 2: Socio-demographic indicators, Southern Queensland Rural DGP, country Queensland, Queensland and Australia, 2001

Indicator	Southern Queensland Rural DGP		Country Queensland		Queensland		Australia	
	No.	%	No.	%	No.	%	No.	%
Jobless families with children under 15 years old	3,439	18.1	42,801	19.9	74,942	18.9	357,563	17.4
Private health insurance (30 June)	66,289	40.5	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.

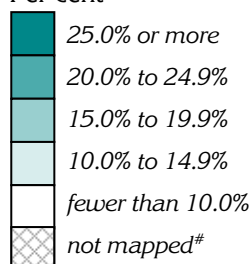
Map 1: Jobless families with children under 15 years of age by SLA, Southern Queensland Rural DGP, 2001



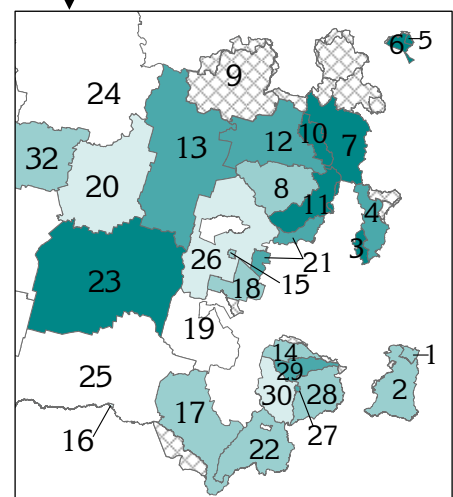
Map legend for SLAs not distinguishable

- Dalby
- Goondiwindi
- Warwick - Central

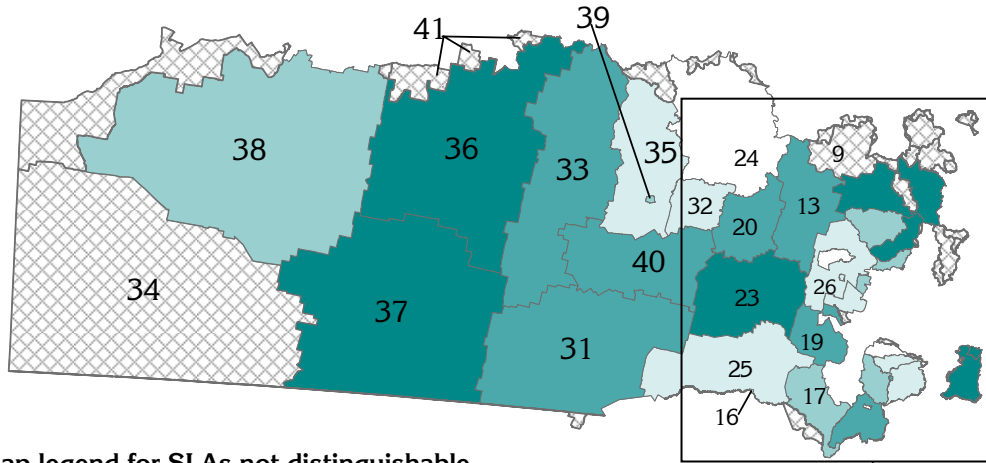
Per cent



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



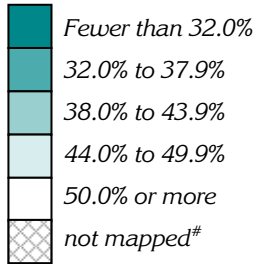
Map 2: People covered by private health insurance by SLA, Southern Queensland Rural DGP, 30 June 2001



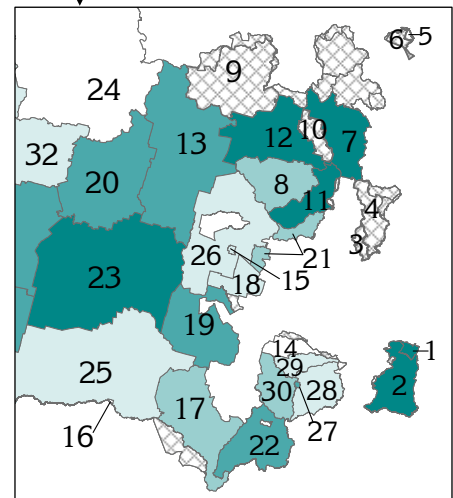
Map legend for SLAs not distinguishable

- Dalby
- Goondiwindi
- Warwick - Central

Per cent



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



Alphabetical key to SLAs/SLA groups, Southern Qld Rural DGP, 2001

Balonne	31	Inglewood	17	Rosalie - Part B	21
Beaudesert - Part B	2	Jondaryan - Part B	18	Stanthorpe	22
Bendemere	32	Kilcoy	4	Tambo	41
Booringa	33	Kilkivan	7	Tara	23
Bulloo	34	Kingaroy	8	Taroom	24
Bungil	35	Millmerran	19	Waggamba	25
Chinchilla	13	Mundubbera	9	Wambo	26
Clifton	14	Murgon	10	Warroo	40
Dalby	15	Murilla	20	Warwick - Central	27
Esk	3	Murweh	36	Warwick - East	28
Goondiwindi	16	Nanango	11	Warwick - North	29
Greenbank/Beaudesert	1	Paroo	37	Warwick - West	30
Hervey Bay - Part A	5	Quilpie	38	Wondai	12
Hervey Bay - Part B	6	Roma	39		

GP services to residents of the Southern Queensland Rural 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 unreferral attendances recorded under Medicare: unreferral 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.

Over four fifths (83.1%) of GP unreferral attendances to residents of Southern Queensland Rural DGP were provided in the Division (ie. by a GP with a provider number in the Division): this represented 661,383 GP unreferral attendances (Table 3).

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

Division		Unreferral attendances	
Number	Name	No.	% ³
414	Southern Queensland Rural DGP	661,383	83.1
404	Townsville DGP	29,377	3.7
409	GP Connections DGP	26,217	3.3
420	Wide Bay DGP	14,956	1.9
405	GPpartners DGP	10,435	1.3
418	Sunshine Coast DGP	7,512	0.9
402	Brisbane South DGP	6,426	0.8
406	Gold Coast DGP	5,006	0.6
407	Redcliffe Bribie Caboolture DGP	4,653	0.6
Other	..	29,848	3.8
Total	..	795,813	100.0

¹ Based on address in Medicare records

² Division of GP based on provider number

³ Proportion of all unreferral attendances of patients with an address in Division 202 by Division in which attendance occurred

The majority (89.1%) of unreferral attendances provided by GPs with a provider number in Southern Queensland Rural DGP were also to people living in the Division (ie. their Medicare address was in the Division) (Table 4).

Table 4: GP catchment – Unreferral attendances provided by GPs¹ in Southern Queensland Rural DGP by Division of patient address², 2003/04

Division		Unreferral attendances	
Number	Name	No.	% ³
414	Southern Queensland Rural DGP	661,383	89.1
409	Toowoomba & District DGP	11,869	1.6
404	Logan Area DGP	9,350	1.3
408	Ipswich & West Moreton DGP	8,730	1.2
231	Barwon DGP	8,034	1.1
406	Gold Coast DGP	6,266	0.8
420	Wide Bay DGP	3,874	0.5
407	Redcliffe Bribie Caboolture DGP	3,748	0.5
405	GPpartners DGP	3,395	0.5
Other	..	25,807	3.5
Total	..	742,456	100.0

¹ Division of GP based on provider number

² Based on address in Medicare records

³ Proportion of all unreferral attendances to GPs with a provider number in Division 202 by Division of patient address

Additional prevalence estimates: chronic diseases and risk factors combined

Please refer to the earlier *Population health profile of the Southern Queensland 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 Southern Queensland Rural DGP who had asthma and were smokers, compared to country Queensland and Australia as a whole (Figure 6, Table 5): that is, the prevalence rates per 1,000 population were higher. However, there were marginally fewer people in Southern Queensland Rural DGP with type 2 diabetes who were overweight/ obese, compared to Australia.

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



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

Variable	Southern Queensland Rural 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	3,471	25.6	46,582	24.8	83,759	23.2	397,734	20.8
Had type 2 diabetes & were overweight/obese ⁴	2,143	13.8	29,819	14.6	52,952	15.0	283,176	15.2

¹ No. is a weighted estimate of the number of people in Southern Queensland Rural 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 6,430 admissions from ambulatory care sensitive (ACS) conditions accounted for 10.8% of all admissions in the Southern Queensland Rural DGP (Table 6, Figure 7), markedly above the levels in Queensland (8.5%) and Australia (8.7%).

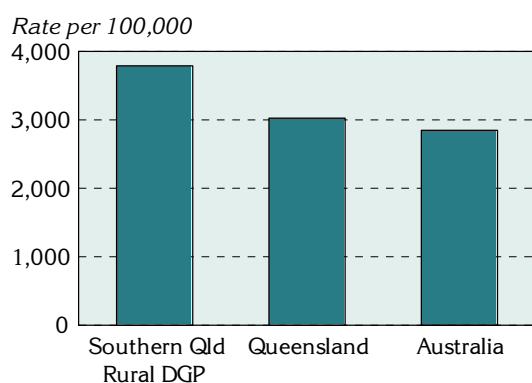
Table 6: Avoidable¹ and unavoidable hospitalisations, Southern Queensland Rural DGP, Queensland, and Australia, 2001/02

Category	Southern Queensland Rural DGP			Queensland			Australia		
	No.	Rate ²	%	No.	Rate ²	%	No.	Rate ²	%
Avoidable ¹	6,430	3,790.1	10.8	106,884	3,025.0	8.5	552,786	2,847.5	8.7
Unavoidable	52,936	31,756.1	89.2	1,153,519	32,410.1	91.5	5,818,199	29,970.7	91.3
Total	59,367	35,558.7	100.0	1,260,403	35,435.5	100.0	6,370,985	32,818.2	100.0

¹ Admissions resulting from ACS conditions

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

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



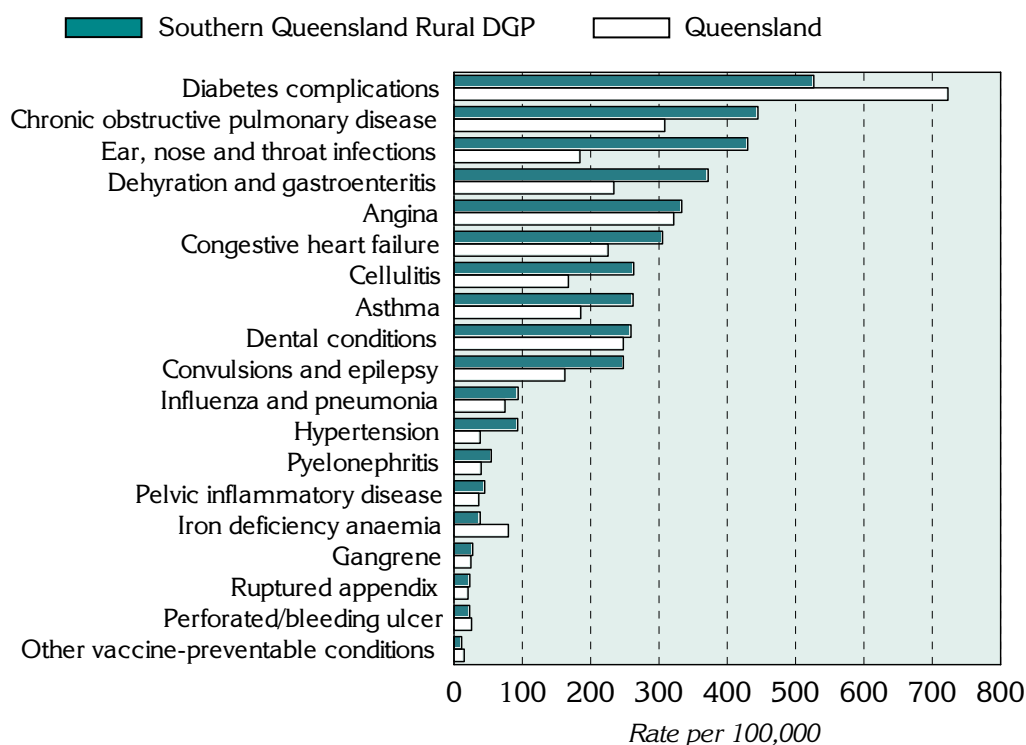
The rate of avoidable hospitalisations in Southern Queensland Rural DGP is markedly higher, a rate of 3,790.1 admissions per 100,000 population, compared to Queensland (a rate of 3,025.0), and Australia (2,847.5).

¹ Admissions resulting from ACS conditions

Diabetes complications; chronic obstructive pulmonary disease; ear, nose and throat; and dehydration and gastroenteritis were the four conditions with the highest rates of avoidable hospitalisations in the Southern Queensland Rural 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. Ear, nose and throat infections; and dehydration and gastroenteritis have the highest rates of avoidable hospitalisations for the acute conditions.

Figure 8: Avoidable hospitalisations¹ by condition, Southern Queensland Rural 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, Southern Queensland Rural DGP, Queensland and Australia, 2001/02

Sub-category/ condition	Southern Queensland Rural DGP		Queensland		Australia	
	No.	Rate ²	No.	Rate ²	No.	Rate ²
Vaccine-preventable	179	105.1	3,188	89.6	16,573	85.4
Influenza and pneumonia	160	94.0	2,646	74.6	13,021	67.1
Other vaccine preventable	19	11.1	542	15.0	3,552	18.3
Chronic³	3,387	2,004.1	65,455	1,882.0	352,545	1,816
Diabetes complications	893	526.7	25,175	722.9	141,345	728.1
Iron deficiency anaemia	63	38.3	2,772	79.7	16,451	84.7
Hypertension	153	93.2	1,324	38.3	6,354	32.7
Congestive heart failure	498	305.3	7,617	225.5	42,447	218.6
Angina	564	333.4	11,134	321.5	49,963	257.4
Chronic obstructive pulmonary disease	751	445.0	10,619	308.5	54,853	282.6
Asthma	465	262.2	6,814	185.6	41,009	211.3
Acute	2,983	1,744.8	41,300	1,143.3	200,913	1,035
Dehydration and gastroenteritis	603	372.0	8,278	234.1	37,766	194.5
Convulsions and epilepsy	427	247.9	5,902	162.3	31,137	160.4
Ear, nose and throat infections	776	429.9	6,829	184.4	32,075	165.2
Dental conditions	456	259.1	9,101	247.8	43,667	224.9
Perforated/bleeding ulcer	38	22.8	892	25.8	5,795	29.9
Ruptured appendix	39	23.2	754	20.7	3,866	19.9
Pyelonephritis	87	54.6	1,437	39.8	7,386	38.0
Pelvic inflammatory disease	70	45.0	1,315	36.2	6,547	33.7
Cellulitis	441	263.0	5,930	167.4	28,204	145.3
Gangrene	46	27.3	862	24.8	4,470	23.0
Total avoidable hospitalisations⁴	6,430	3,790.1	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 (72.5%) of all deaths in Southern Queensland Rural 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). However, the rate in the Division is notably higher than that in Brisbane, a differential of 0.89.

Deaths amenable to health care (amenable mortality, a subset of avoidable mortality) accounted for 29.7% of all deaths at ages 0 to 74 years in Southern Queensland Rural DGP, compared to 29.3% in country Queensland.

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

Mortality category	Southern Queensland Rural DGP		Country Queensland		Queensland		Australia	
	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹
Avoidable	2,049	257.0	20,859	227.8	35,515	220.6	189,845	211.8
% of total	72.5	..	72.8	..	72.8	..	71.5	..
(Amenable)	(839)	(104.5)	(8,383)	(91.5)	(14,323)	(89.3)	(76,249)	(85.1)
(% of total)	(29.7)	(..)	(29.3)	(..)	(29.3)	(..)	(28.7)	(..)
Unavoidable	779	97.2	7,793	85.0	13,291	82.7	75,582	84.3
% of total	27.5	..	27.2	..	27.2	..	28.5	..
Total mortality	2,828	354.2	28,652	312.8	48,806	303.4	265,427	296.1
%	100.0	..	100.0	..	100.0	..	100.0	..

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. Southern Queensland Rural DGP's rate of avoidable mortality for males was 338.2 deaths per 100,000 males, notably higher than the rate of 173.9 for females. Similarly, the rate of amenable mortality for males in the Division was higher, 120.8, compared to 87.3 for females, a rate ratio of 1.38 (Figure 9, Table 9).

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

Note: the different scales



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

Mortality category and sex	Southern Queensland Rural DGP		Country Queensland		Queensland		Australia	
	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹
Avoidable								
Males	1,410	338.2	9,362	269.5	23,316	285.3	123,026	272.6
Females	639	173.9	5,294	152.0	12,199	155.1	66,819	150.1
Total	2,049	257.0	14,656	211.2	35,515	220.6	189,845	211.8
Rate ratio–M:F²	..	1.94**	..	1.77**	..	1.84**	..	1.82**
Amenable								
Males	515	120.8	3,249	95.2	8,181	100.4	42,568	94.3
Females	324	87.3	2,691	77.4	6,142	78.0	33,681	75.7
Total	839	104.5	5,940	86.4	14,323	89.3	76,249	85.1
Rate ratio–M:F²	..	1.38**	..	1.23**	..	1.29**	..	1.25**

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

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

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 Southern Queensland Rural 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 72.7% of total YLL (0 to 74 years) for Southern Queensland Rural DGP, consistent with the 72.9% for country Queensland: the proportion of YLL from amenable mortality for Southern Queensland Rural DGP (29.4%) was higher than that for country Queensland (28.5%).

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

Mortality category	Southern Queensland Rural DGP		Country Queensland		Queensland		Australia	
	No.	% of total	No.	% of total	No.	% of total	No.	% of total
Avoidable	35,768	72.7	369,609	72.9	629,779	72.9	3,327,375	71.9
(Amenable)	(14,452)	(29.4)	(144,553)	(28.5)	(247,893)	(28.7)	(1,298,430)	(28.0)
Unavoidable	13,452	27.3	137,686	27.1	234,699	27.1	1,303,289	28.1
Total	49,220	100.0	507,294	100.0	864,478	100.0	4,630,664	100.0

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 1,618.3 deaths per 100,000 population in Southern Queensland Rural 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 391.7 in Southern Queensland Rural DGP.

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

Mortality category and age (years)	Southern Queensland Rural DGP		Country Queensland		Queensland		Australia	
	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹
Avoidable								
0-14	76	39.2	500	30.1	1,208	32.2	5,669	28.8
15-24	64	67.2	562	44.8	1,386	54.3	7,045	52.8
25-44	202	86.3	1,916	77.8	4,527	84.9	24,356	83.9
45-64	775	391.7	5,107	301.7	12,543	322.5	64,282	304.9
65-74	932	1,618.3	6,571	1410.9	15,851	1404.6	88,493	1,358.1
Total	2,049	257.0	14,656	211.2	35,515	220.6	189,845	211.8
Amenable								
0-24	58	18.5	451	15.9	1,059	16.8	5,083	15.4
25-44	59	24.8	491	20.1	1,165	21.8	5,946	20.5
45-64	322	164.0	2,236	132.2	5,352	137.9	27,464	130.3
65-74	400	701.8	2,762	591.5	6,748	599.1	37,756	579.4
Total	839	104.5	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 Southern Queensland Rural DGP were for cardiovascular diseases, with a rate of 85.2 deaths per 100,000 population, and cancer, 79.2 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 64.7 per 100,000 population and 26.9 per 100,000, respectively.

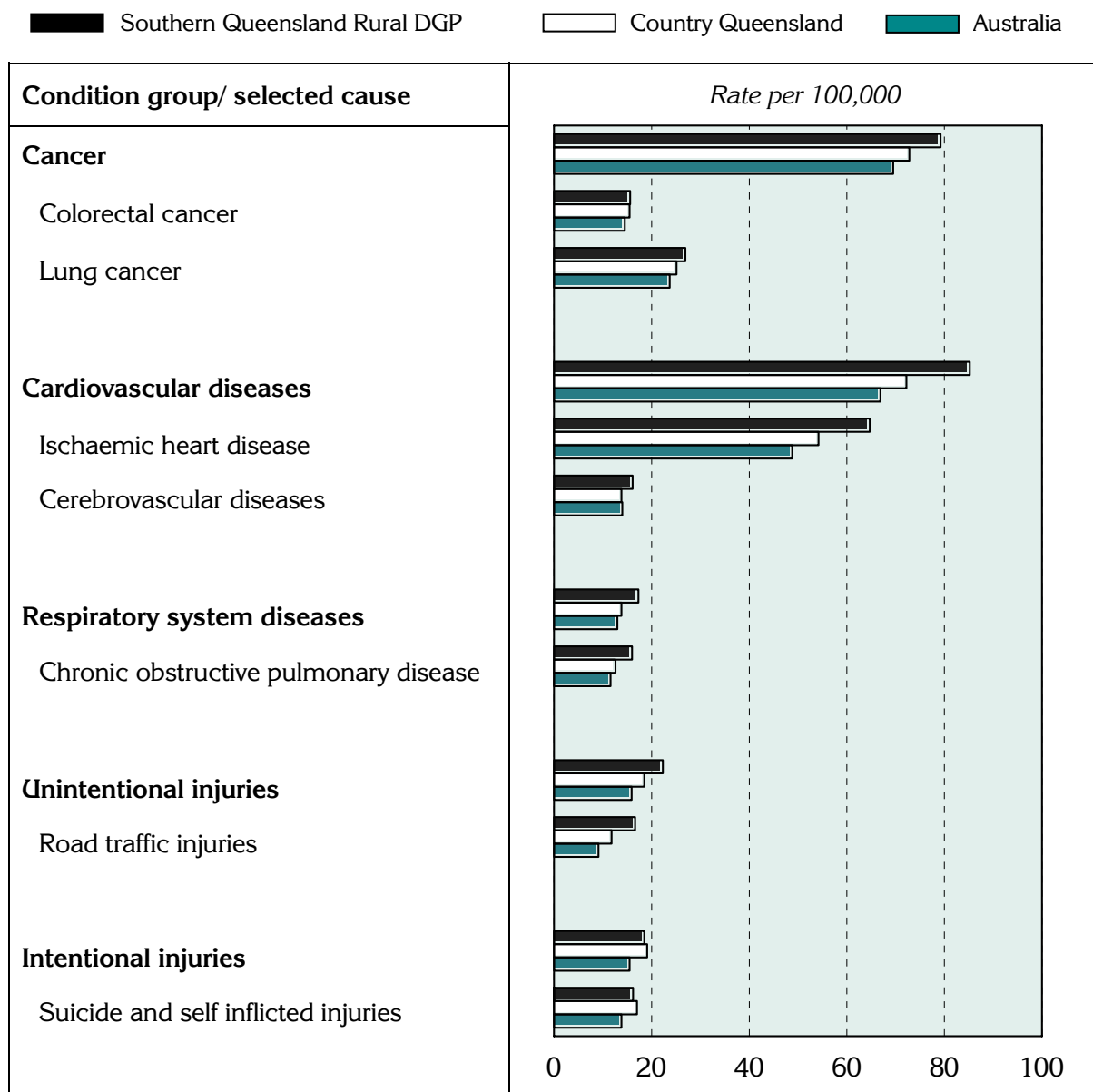
Table 12: Avoidable mortality (0 to 74 years) by major condition group and selected cause, Southern Queensland Rural DGP, country Queensland, Queensland and Australia, 1997 to 2001

Condition group/ selected cause	Southern Queensland Rural DGP		Country Queensland		Queensland		Australia	
	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹
Cancer	639	79.2	6,690	72.8	11,618	72.6	62,338	69.5
Colorectal cancer	126	15.6	1,425	15.5	2,392	15.0	13,008	14.5
Lung cancer	221	26.9	2,329	25.1	4,062	25.4	21,208	23.7
Cardiovascular diseases	691	85.2	6,646	72.2	11,294	71.0	59,945	66.9
Ischaemic heart disease	528	64.7	5,005	54.2	8,434	52.9	43,712	48.8
Cerebrovascular diseases	128	16.1	1,263	13.8	2,210	14.0	12,558	14.0
Respiratory system diseases	138	17.3	1,262	13.8	2,168	13.7	11,612	13.0
Chronic obstructive pulmonary disease	129	16.0	1,159	12.6	1,970	12.5	10,395	11.6
Unintentional injuries	165	22.3	1,662	18.5	2,630	15.8	14,224	15.9
Road traffic injuries	122	16.6	1,054	11.8	1,565	9.4	8,138	9.1
Intentional injuries	136	18.5	1,712	19.1	3,017	18.2	13,891	15.5
Suicide and self inflicted injuries	119	16.2	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 for the condition groups and selected causes were generally above those for country Queensland and Australia: the exceptions were the intentional injury categories, with higher rates in country Queensland (Figure 10).

Figure 10: Avoidable mortality (0 to 74 years) by major condition group and selected cause, Southern Queensland Rural 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 Southern Queensland Rural 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. A number of the Local Government Areas (LGAs) in this Division have been split into SLAs. For example, the LGA of Hervey Bay is comprised of two SLAs, Part A and Part B. Parts of these SLAs, and all or parts of the other SLAs listed in Table 14 comprise the Division.

Table 14: SLAs and population in Southern Queensland Rural 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
30300	Balonne	96.4	5,419
30557	Beaudesert - Part B	53.5	15,516
30650	Bendemere	100.0	985
30850	Booringa	100.0	1,834
31750	Bulloo	100.0	463
31850	Bungil	100.0	1,965
32350	Chinchilla	100.0	6,178
32400	Clifton	94.0	2,356
32650	Dalby	100.0	10,387
33050	Esk	1.0	148
33600	Goondiwindi	100.0	5,038
30552, 34608	Greenbank/Beaudesert	31.6	12,691
33751	Hervey Bay - Part A	2.2	1,039
33754	Hervey Bay - Part B	65.6	2,631
33900	Inglewood	90.1	2,380
34204	Jondaryan - Part B	11.2	842
34250	Kilcoy	88.6	3,151
34300	Kilkivan	62.5	2,092
34350	Kingaroy	100.0	12,545
35000	Millmerran	95.0	3,259
35450	Mundubberra	3.2	#
35500	Murgon	100.0	5,003
35550	Murilla	100.0	2,725
35600	Murweh	100.0	5,006
35650	Nanango	78.5	6,850
35800	Paroo	100.0	2,156
36150	Quilpie	100.0	1,057
36400	Roma	100.0	6,799
36454	Rosalie - Part B	44.5	2,108
36600	Stanthorpe	94.3	9,900
36650	Tambo	10.2	#
36700	Tara	100.0	3,962
36750	Taroom	100.0	2,539
37100	Waggamba	100.0	3,015
37150	Wambo	94.8	5,053
37200	Warroo	100.0	1,050
37262	Warwick - Central	100.0	11,541
37263	Warwick - East	100.0	4,276
37265	Warwick - North	100.0	2,618
37266	Warwick - West	83.1	2,809
37450	Wondai	100.0	4,434

* 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.

Not shown as the total population is less than 100

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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