

Population health profile of the Central Australian Division of General Practice: supplement

Population Profile Series: No. 118a

PHIDU

March 2007



PHIDU



Australian Government
Australian Institute of
Health and Welfare



THE UNIVERSITY
OF ADELAIDE
AUSTRALIA

© Commonwealth of Australia 2007

This work may be reproduced and used subject to acknowledgement of the source of any material so reproduced.

National Library of Australia Cataloguing in Publication entry

Population health profile of the Central Australian Division of General Practice: supplement.

ISBN 9 78073089 7125 (web).

1. Public health - Australia, Central - Statistics. 2. Health status indicators - Australia, Central - Statistics. 3. Health service areas - Australia, Central. 4. Australia, Central - Statistics, Medical. I. Public Health Information Development Unit (Australia). (Series : Population profile series; no. 118a).

362.109942

ISSN 1833-0452 Population Profile Series

Public Health Information Development Unit, The University of Adelaide
A Collaborating Unit of the Australian Institute of Health and Welfare

This profile was produced by PHIDU, the Public Health Information Development Unit at The University of Adelaide, South Australia. The work was funded under a grant from the Australian Government Department of Health and Ageing. The views expressed in this profile are solely those of the authors and should not be attributed to the Department of Health and Ageing or the Minister for Health and Ageing.

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.

Suggested citation:

PHIDU. (2007) *Population health profile of the Central Australian Division of General Practice: supplement*. Population Profile Series: No. 118a. Public Health Information Development Unit (PHIDU), Adelaide.

Enquiries about or comments on this publication should be addressed to:

PHIDU, The University of Adelaide, South Australia 5005
Phone: 08-8303 6236 or e-mail: PHIDU@publichealth.gov.au

This publication, the maps and supporting data, together with other publications on population health, are available from the PHIDU website (www.publichealth.gov.au).

Published by Public Health Information Development Unit, The University of Adelaide

Contributors: Anthea Page, Sarah Ambrose, Kristin Leahy and John Glover

Population health profile of the Central Australian Division of General Practice: supplement

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

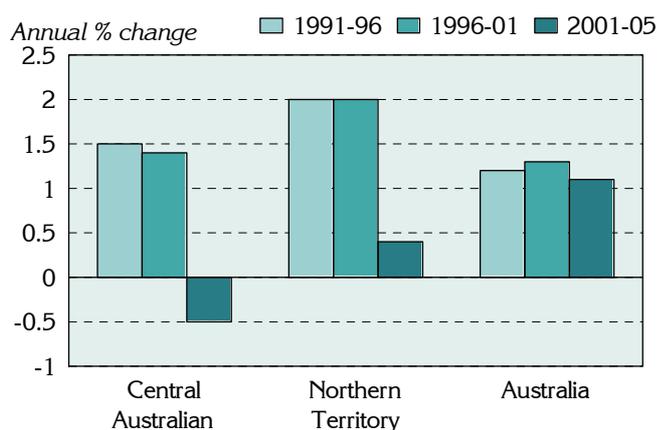
- Population [updated to June 2005]
- Additional socio-demographic indicators
- Unreferred attendances – patient flow/ GP catchment
- Avoidable hospitalisations: hospital admissions resulting from ambulatory care sensitive conditions
- Avoidable mortality

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 Central Australian Division had an Estimated Resident Population of 47,051 at 30 June 2005.

Figure 1: Annual population change, Central Australian DGP, Northern Territory and Australia, 1991 to 1996, 1996 to 2001 and 2001 to 2005



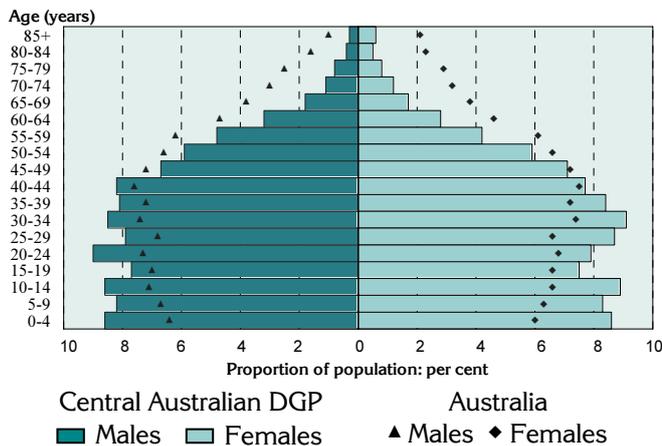
Over the five years from 1991 to 1996, the Division's population increased by 1.5% on average each year, below the level in the Northern Territory (2.0%) but higher than for Australia (1.2%). From 1996 to 2001, the annual percentage increase in the Division was 1.4%, again lower than for the Northern Territory (2.0%) and marginally higher than for Australia (1.3%). The population fell by 0.5% per year from 2001 to 2005, compared with annual increases in the Northern Territory (0.4%) and Australia (1.1%).

Table 1: Population by age, Central Australian DGP and Australia, 2005

Age group (years)	Central Australian DGP		Australia	
	No.	%	No.	%
0-14	12,057	25.6	3,978,221	19.6
15-24	7,566	16.1	2,819,834	13.9
25-44	15,686	33.3	5,878,107	28.9
45-64	9,573	20.3	4,984,446	24.5
65-74	1,361	2.9	1,398,831	6.9
75-84	605	1.3	954,143	4.7
85+	204	0.4	315,027	1.5
Total	47,051	100.0	20,328,609	100.0

As shown in the accompanying table and the age-sex pyramid below (Figure 2), Central Australian DGP had a notably higher proportion of children at ages 0 to 14 years (25.6%) and young people aged 15 to 24 years (16.1%) compared to Australia as a whole (19.6% and 13.9%). The Division also had a notably higher proportion of its population aged 25 to 44 years (33.3%, compared with 28.9% for Australia). However, there were relatively fewer people in the 45 to 84 year age groups in the Division, when compared to Australia.

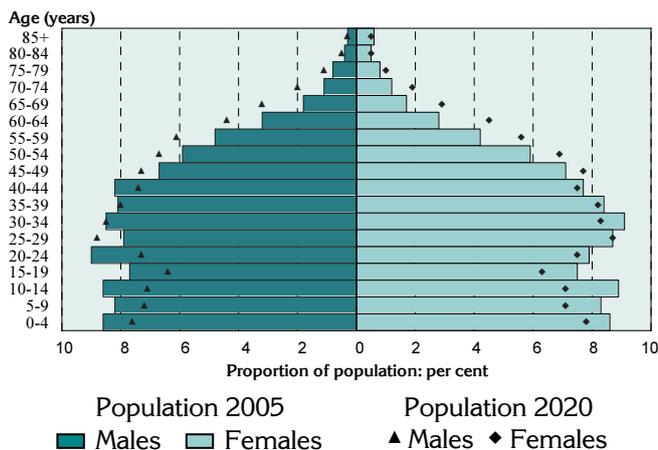
Figure 2: Population in Central Australian DGP and Australia, by age and sex, 2005



The age distribution of the Division's population is distinctly different from that for Australia overall. The differences are:

- at ages below 45 years – relatively more males and females (more evident for females and most pronounced at ages 0 to 14 years and 25 to 39 years); and
- at ages 45 years and over – relatively fewer males and females.

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



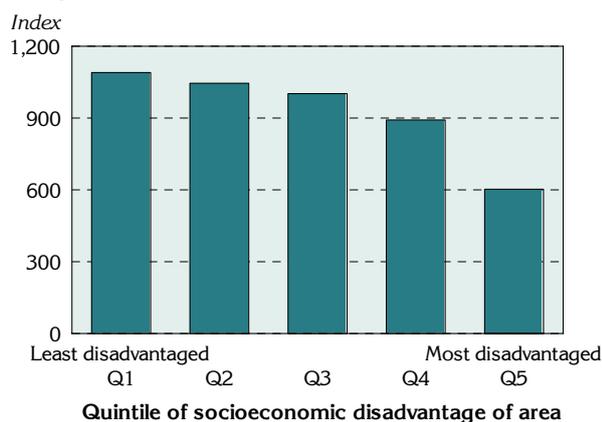
The population projections for the Division show the age distribution in 2020 is projected to be somewhat more similar to that for Australia, with:

- at ages below 45 years – relatively fewer males and females, with the exception of ages 25 to 29 years (more males and the same proportion of females);
- at ages 45 to 79 years – relatively more males and females; and
- marginally fewer females aged 85 years and over.

Additional socio-demographic indicators

Please refer to the earlier *Population health profile of the Central Australian 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, Central Australian DGP, 2001



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

The Central Australian DGP has an index score of 925, below the score for Australia of 1000: this score varies across the Division, from an extremely low 603 in the most disadvantaged areas to 1090 in the least disadvantaged areas.

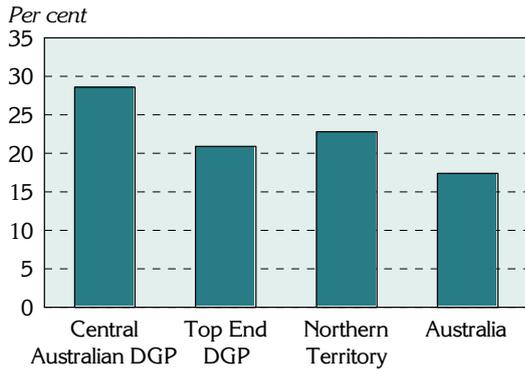
Note: each 'quintile' comprises approximately 20% of the population of the Division.

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 markedly more jobless families in the Central Australian DGP (28.6%), compared to the Northern Territory as a whole (22.8%) (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 (19.3%), compared to the Northern Territory (28.7%) (Figure 5, Table 2).

Figure 5: Socio-demographic indicators, Central Australian DGP, Top End DGP and Australia, 2001

Jobless families with children under 15 years old



Private health insurance, 30 June

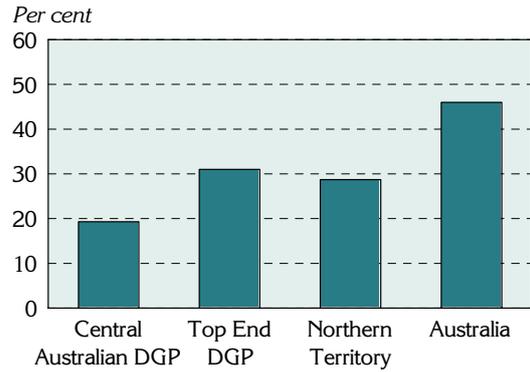
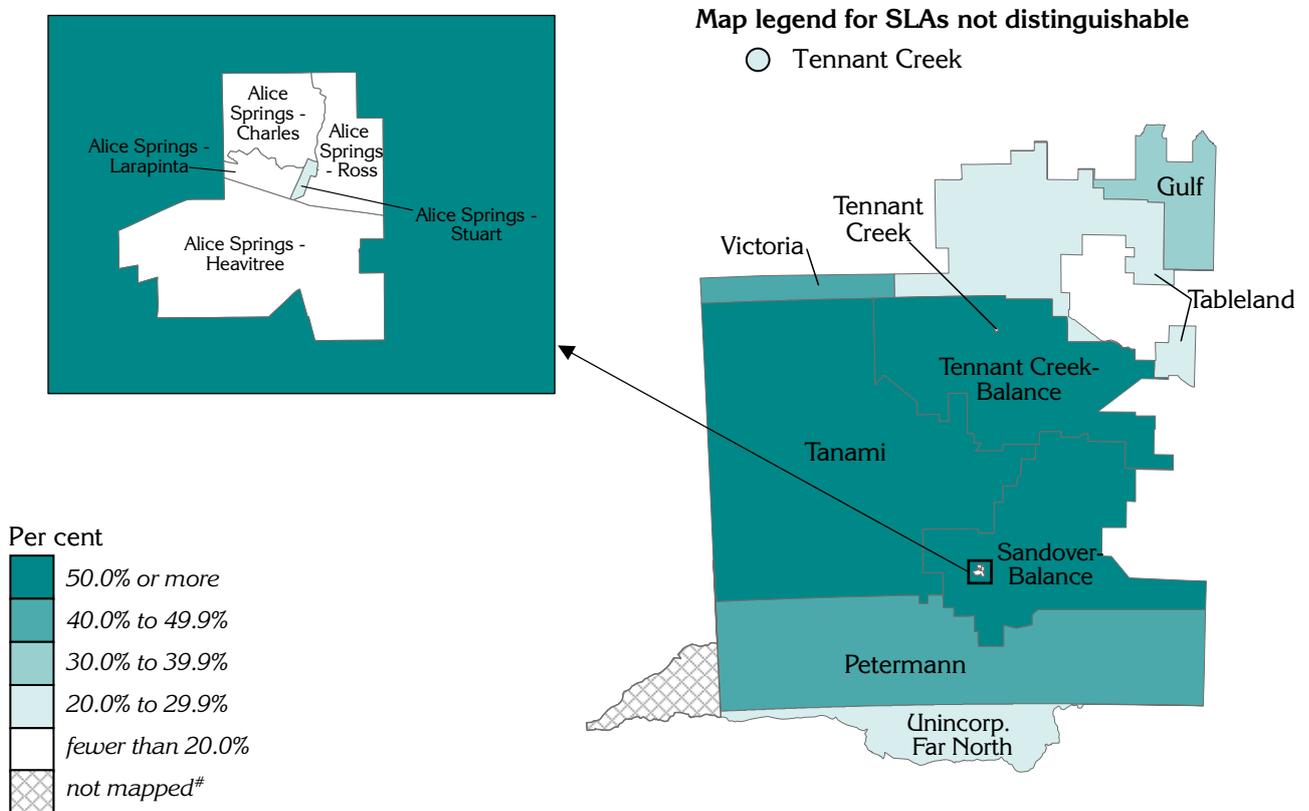


Table 2: Socio-demographic indicators, Central Australian and Top End DGP, Northern Territory and Australia, 2001

Indicator	Central Australian DGP		Top End DGP		Northern Territory		Australia	
	No.	%	No.	%	No.	%	No.	%
Jobless families with children under 15 years old	1,547	28.6	3,694	20.9	5,218	22.8	357,563	17.4
Private health insurance (30 June)	10,017	19.3	48,907	31.0	58,755	28.7	8,671,106	46.0

Although the overall level in the Division of jobless families is relatively high, there are substantial variations at the SLA level, with some areas having very low, and some very high, rates (Map 1) private health insurance (Map 2) are shown by Statistical Local Area (SLA) in Maps 1 and 2, respectively.

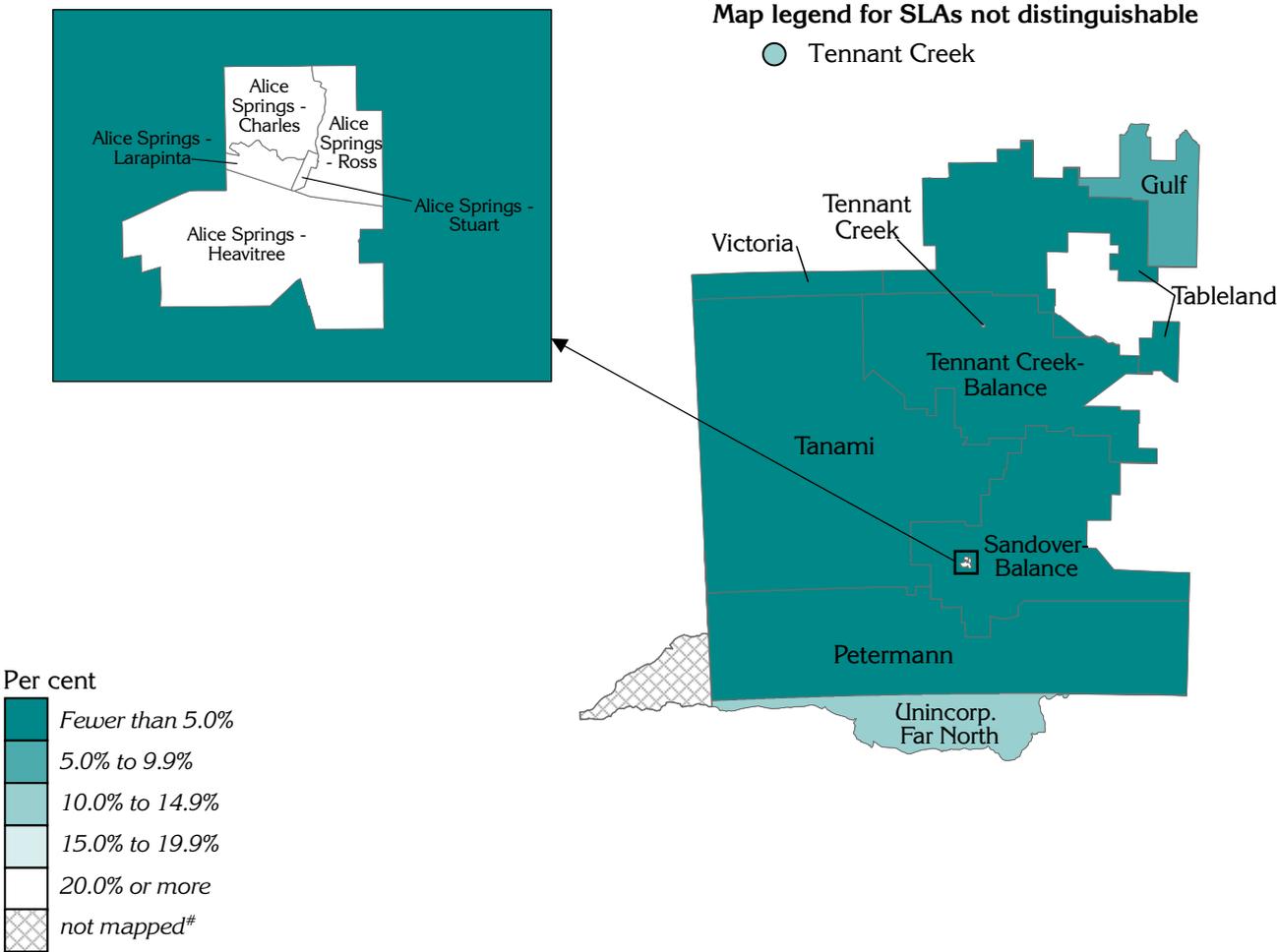
Map 1: Jobless families with children under 15 years of age by SLA, Central Australian DGP, 2001



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

Similarly, there are substantial variations at the SLA level in the proportion of the population covered by private health insurance (Map 2).

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



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

GP services to residents of the Central Australian 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 (85.6%) of all unreferral attendances for residents of Central Australian DGP were provided in the Division (ie. by a GP with a provider number in the Division): this represented 90,710 unreferral attendances, out of a total of 106,031. The remaining unreferral attendances (15,321) were provided in a number of other Divisions, with the largest number in Top End DGP (2.5%) and Kimberley DGP (2.1%).

A similar proportion of (87.6%) of all unreferral attendances to GPs with a provider number in Central Australian DGP were also of people living in the Central Australian DGP Division (ie. their Medicare address was in the Division): this represented 90,710 unreferral attendances. The remaining 12,856 unreferral attendances were provided to people living in a number of other Divisions, with the largest number in Top End DGP (1.8%) and a number of others, none of more than 0.7%.

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 2,354 admissions from ambulatory care sensitive (ACS) conditions accounted for 10.1% of all admissions in the Central Australian DGP (Table 6, Figure 7), above the levels for the Northern Territory (9.5%) and Australia (8.7%).

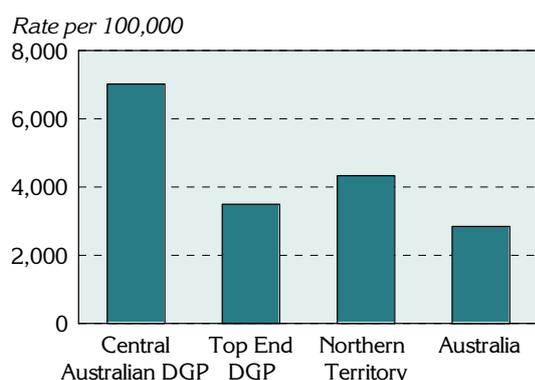
Table 3: Avoidable¹ and unavoidable hospitalisations, Central Australian DGP, Northern Territory and Australia, 2001/02

Category	Central Australian DGP			Northern Territory			Australia		
	No.	Rate ²	%	No.	Rate ²	%	No.	Rate ²	%
Avoidable ¹	2,354	7,020.3	10.1	6,057	4,335.2	9.5	552,786	2,847.5	8.7
Unavoidable	20,855	55,897.1	89.9	58,024	36,965.5	90.5	5,818,199	29,970.7	91.3
Total	23,209	62,758.0	100.0	64,081	41,217.3	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 6: Avoidable hospitalisations¹, Central Australian and Top End DGP, Northern Territory and Australia, 2001/02



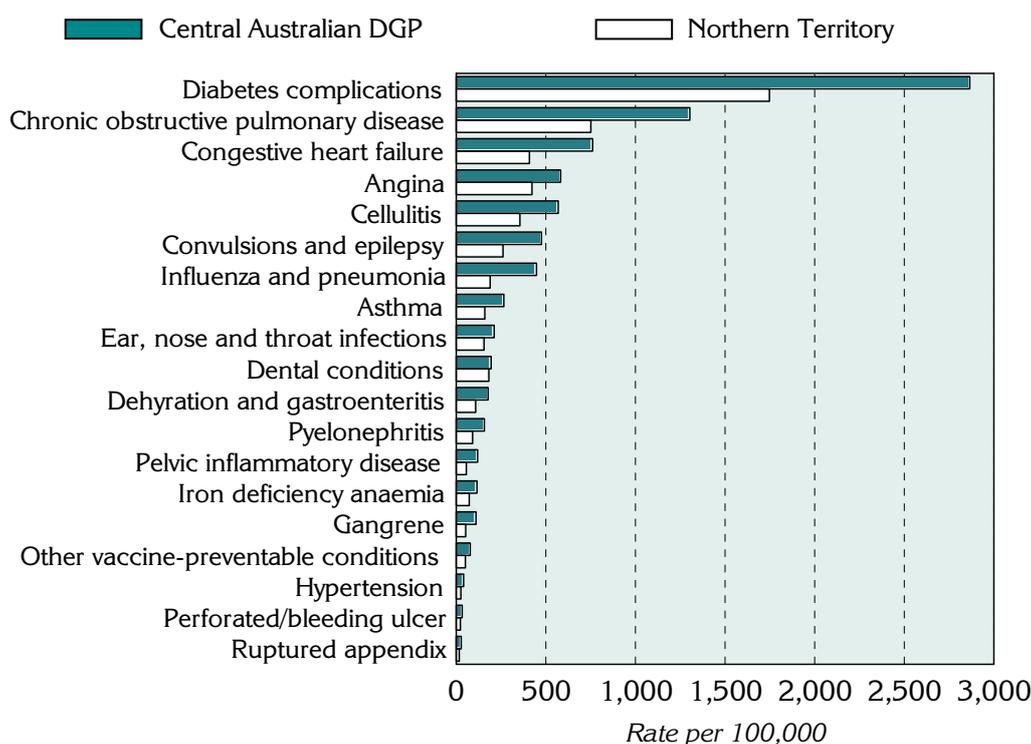
The rate of avoidable hospitalisations in Central Australian DGP is substantially higher, a rate of 7,020.3 admissions per 100,000 population, compared to the Northern Territory (a rate of 4,335.2), and Australia (2,847.5).

¹ 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 Central Australian DGP (Figure 8, Table 7). Rates for the first two of these conditions were over twice the rates for the Northern Territory.

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. Over 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. Cellulitis; and convulsions and epilepsy have the highest rates of avoidable hospitalisations for the acute conditions.

Figure 7: Avoidable hospitalisations¹ by condition, Central Australian DGP and Northern Territory, 2001/02



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

Table 4: Avoidable hospitalisations¹ by condition, Central Australian DGP, Northern Territory and Australia, 2001/02

Sub-category/ condition	Central Australian DGP		Northern Territory		Australia	
	No.	Rate ²	No.	Rate ²	No.	Rate ²
Vaccine-preventable	197	525.0	385	238.4	16,573	85.4
Influenza and pneumonia	161	447.6	272	181.9	13,021	67.1
Other vaccine preventable	36	77.4	113	56.5	3,552	18.3
Chronic³	1,404	5,935.6	3,639	3,637.8	352,545	1,816
Diabetes complications	714	2,865.8	1,839	1,748.2	141,345	728.1
Iron deficiency anaemia	31	115.4	104	91.7	16,451	84.7
Hypertension	11	41.3	28	26.2	6,354	32.7
Congestive heart failure	123	761.7	266	422.9	42,447	218.6
Angina	132	582.6	388	408.3	49,963	257.4
Chronic obstructive pulmonary disease	255	1,303.5	606	751.4	54,853	282.6
Asthma	138	265.3	408	189.1	41,009	211.3
Acute	907	2,076.0	2,313	1,256.9	200,913	1,035
Dehydration and gastroenteritis	64	178.1	165	109.2	37,766	194.5
Convulsions and epilepsy	235	476.0	539	260.9	31,137	160.4
Ear, nose and throat infections	120	211.2	374	159.3	32,075	165.2
Dental conditions	102	194.9	337	155.0	43,667	224.9
Perforated/bleeding ulcer	8	32.9	23	23.6	5,795	29.9
Ruptured appendix	14	27.8	35	17.0	3,866	19.9
Pyelonephritis	69	156.7	133	72.6	7,386	38.0
Pelvic inflammatory disease	59	119.4	106	51.2	6,547	33.7
Cellulitis	208	568.8	544	354.8	28,204	145.3
Gangrene	28	110.2	57	53.3	4,470	23.0
Total avoidable hospitalisations⁴	2,354	7,020.3	6,057	4,335.2	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 (73.3%) of all deaths in Central Australian DGP at ages 0 to 74 years over the period 1997 to 2001 are considered to be avoidable, lower than the proportion for the Northern Territory (75.5%) (Table 8). However, the rate in the Division is markedly higher than that in the Northern Territory, a differential of 1.24.

Deaths amenable to health care (amenable mortality, a subset of avoidable mortality) accounted for 29.9% of all deaths at ages 0 to 74 years in Central Australian DGP, compared to 28.8% in the Northern Territory.

Table 5: Avoidable and unavoidable mortality (0 to 74 years) by area, Central Australian DGP, Northern Territory and Australia, 1997 to 2001

Mortality category	Central Australian DGP		Northern Territory		Australia	
	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹
Avoidable	749	536.1	2,576	433.2	189,845	211.8
% of total	73.3	..	74.5	..	71.5	..
(Amenable)	(306)	(233.4)	(997)	(179.3)	(76,249)	(85.1)
(% of total)	(29.9)	(..)	(28.8)	(..)	(28.7)	(..)
Unavoidable	273	203.0	882	154.4	75,582	84.3
% of total	26.7	..	28.5	..	28.5	..
Total mortality	1,022	739.4	3,458	588.1	265,427	296.1
%	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 both of the Divisions and the comparator areas. Central Australian DGP's rate of avoidable mortality for males was 644.9 deaths per 100,000 males, notably higher than the rate of 434.5 for females. Similarly, the rate of amenable mortality for males in the Division was higher, 245.3, compared to 222.5 for females, a rate ratio of 1.10 (Figure 9, Table 9).

Figure 8: Avoidable and amenable mortality by sex (0 to 74 years), Central Australian and Top End DGPs, Northern Territory and Australia, 1997 to 2001

Note: the different scales

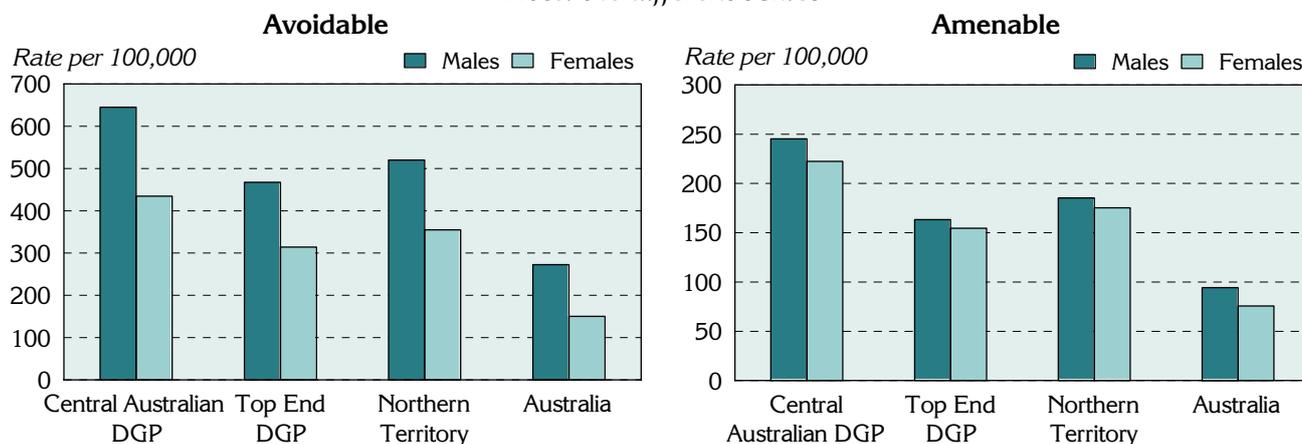


Table 6: Avoidable and amenable mortality (0 to 74 years) by sex, Central Australian DGP, Top End DGP, Northern Territory and Australia, 1997 to 2001

Mortality category and sex	Central Australian DGP		Top End DGP		Northern Territory		Australia	
	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹
Avoidable								
Males	481	644.9	1,175	467.3	1,678	520.1	123,026	272.6
Females	269	434.5	606	314.1	898	354.9	66,819	150.1
Total	749	536.1	1,781	386.8	2,576	433.2	189,845	211.8
Rate ratio–M:F²	..	1.48**	..	1.49**	..	1.47**	..	1.82**
Amenable								
Males	168	245.3	378	163.3	551	185.3	42,568	94.3
Females	138	222.5	300	154.5	446	175.3	33,681	75.7
Total	306	233.4	678	157.9	997	179.3	76,249	85.1
Rate ratio–M:F²	..	1.10	..	1.06	..	1.06	..	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 Central Australian DGP, Top End DGP, the Northern Territory 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 73.2% of total YLL (0 to 74 years) for the Central Australian DGP, marginally lower than the 74.1% for the Northern Territory: the proportion of YLL from amenable mortality for Central Australian DGP (29.3%) was marginally higher than for the Northern Territory (28.5%).

Table 7: Years of life lost from avoidable mortality (0 to 74 years), Central Australian DGP, Top End DGP and Australia, 1997 to 2001

Mortality category	Central Australian DGP		Top End DGP		Northern Territory		Australia	
	No.	% of total	No.	% of total	No.	% of total	No.	% of total
Avoidable	16,045	73.2	37,131	74.3	54,186	74.1	3,327,375	71.9
(Amenable)	(6,431)	(29.3)	(14,136)	(28.3)	(20,833)	(28.5)	(1,298,430)	(28.0)
Unavoidable	5,880	26.8	12,813	25.7	18,895	25.9	1,303,289	28.1
Total	21,925	100.0	49,945	100.0	73,081	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 2,698.0 deaths per 100,000 population in Central Australian 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 729.3 in Central Australian Division.

Table 8: Avoidable and amenable mortality by age, Central Australian DGP, Top End DGP and Australia, 1997 to 2001

Mortality category And age (years)	Central Australian DGP		Top End DGP		Northern Territory		Australia	
	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹
Avoidable								
0-14	51	79.2	137	67.2	187	70.0	5,669	28.8
15-24	66	165.2	110	89.6	177	110.0	7,045	52.8
25-44	212	261.6	435	162.4	673	194.4	24,356	83.9
45-64	272	729.3	705	557.7	991	610.8	64,282	304.9
65-74	148	2,698.0	395	2,218.6	548	2384.3	88,493	1,358.1
Total	749	536.1	1,781	386.8	2,576	433.2	189,845	211.8
Amenable								
0-24	46	43.1	120	35.4	169	37.9	5,083	15.4
25-44	69	90.1	122	48.0	197	59.9	5,946	20.5
45-64	126	343.6	279	226.5	407	256.7	27,464	130.3
65-74	64	1,183.5	158	904.5	225	996.8	37,756	579.4
Total	306	233.4	678	157.9	997	179.3	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 Central Australian DGP were for cardiovascular diseases, with a rate of 170.2 deaths per 100,000 population, and cancer, 68.5 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 cerebrovascular disease, with rates of 114.9 per 100,000 population and 41.7 per 100,000, respectively.

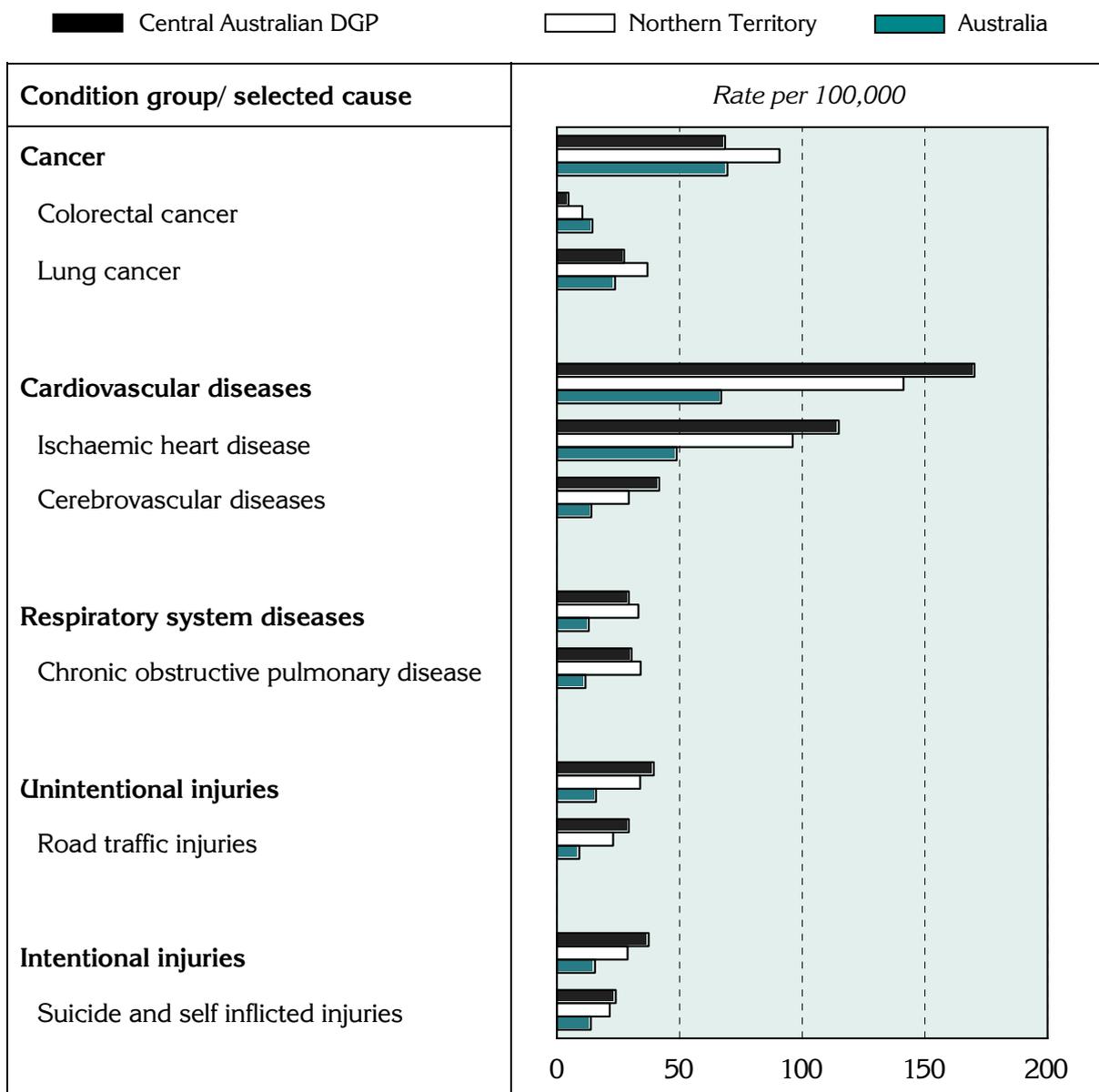
Table 9: Avoidable mortality (0 to 74 years) by major condition group and selected cause, Central Australian DGP, Top End DGP and Australia, 1997 to 2001

Condition group and selected cause	Central Australian DGP		Top End DGP		Northern Territory		Australia	
	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹
Cancer	83	68.5	378	94.7	467	90.7	62,338	69.5
Colorectal cancer	5	4.7	47	12.2	52	10.4	13,008	14.5
Lung cancer	31	27.4	141	38.1	176	36.9	21,208	23.7
Cardiovascular diseases	188	170.2	473	128.3	671	141.3	59,945	66.9
Ischaemic heart disease	129	114.9	331	88.4	463	96.1	43,712	48.8
Cerebrovascular diseases	45	41.7	88	25.1	133	29.3	12,558	14.0
Respiratory system diseases	29	29.3	108	33.2	140	33.2	11,612	13.0
Chronic obstructive pulmonary disease	28	30.4	101	33.7	132	34.1	10,395	11.6
Unintentional injuries	90	39.5	228	30.8	326	33.9	14,224	15.9
Road traffic injuries	68	29.3	152	20.4	222	22.9	8,138	9.1
Intentional injuries	85	37.4	189	25.2	280	28.8	13,891	15.5
Suicide and self inflicted injuries	55	24.0	153	20.4	209	21.5	12,393	13.8

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

Rates in the Division were generally above those for Australia: the exceptions were all cancers (consistent with the national rates) and colorectal and lung cancer (below the national rates) (Figure 10). Rates were lower, however, than those for the Northern Territory for some condition groups and selected causes.

Figure 9: Avoidable mortality (0 to 74 years) by major condition group and selected cause, Central Australian DGP, Northern Territory and Australia, 1997 to 2001



Notes on the data

Data sources and limitations

Data sources

Table 10 details the data sources for the material presented in this profile.

Table 10: 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
Avoidable hospitalisations: hospital admissions resulting from ambulatory care sensitive conditions	
Tables 5 and 6; Figures 6 and 7	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 7, 8, 9, 10 and 11; Figures 8 and 9	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 (i.e. jobless families, people with health insurance): these areas are mapped with a pattern.

Statistical geography of the Central Australian 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, Alice Springs is comprised of five SLAs - Charles, Heavitree, Larapinta, Ross and Stuart. All of these SLAs, and all or part of the other SLAs listed in Table 11 comprise the Division.

Table 11: SLAs and population in Central Australian 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
49589	Unincorp. Far North	36.1	1,882
70201	Alice Springs - Charles	100.0	5,101
70203	Alice Springs - Heavitree	100.0	2,311
70205	Alice Springs - Larapinta	100.0	9,190
70207	Alice Springs - Ross	100.0	7,620
70208	Alice Springs - Stuart	100.0	2,264
71209	East Arnhem - Balance	0.5	#
71409	Elsey - Balance	4.0	#
71809	Gulf	13.0	444
73009	Petermann	100.0	2,956
73209	Sandover - Balance	100.0	3,482
73409	Tableland	86.2	872
73609	Tanami	100.0	6,144
73800	Tennant Creek	100.0	3,009
74009	Tennant Creek - Balance	78.8	1,482
74409	Victoria	5.0	149
74809	West Arnhem	0.4	#

* 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

For general comments, data issues or enquiries re information on the web site, please contact PHIDU:

Phone: 08-8303 6236 or e-mail: PHIDU@publichealth.gov.au