
E Health preface

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Attachment tables

Attachment tables are identified in references throughout this preface by an 'EA' suffix (for example, table EA.3). A full list of attachment tables is provided at the end of this preface, and the attachment tables are available from the Review website at www.pc.gov.au/gsp.

Health services are concerned with promoting, restoring and maintaining a healthy society. They involve illness prevention, health promotion, the detection and treatment of illness and injury, and the rehabilitation and palliative care of individuals who experience illness and injury. Broadly defined, the health system also includes a range of activities that raise awareness of health issues, thereby reducing the risk and onset of illness and injury.

Health services in Australia are delivered by a variety of government and non-government providers in a range of service settings (box E.1). This Report primarily concentrates on the performance of public hospitals (chapter 10), primary and community health services (including general practice) (chapter 11) and

the interactions among different service mechanisms for dealing with two health management issues: mental health and breast cancer (chapter 12). These services are selected for reporting as they:

- make an important contribution to the health of the community
- reflect government priorities, for example, they fall within the National Health Priority Areas
- represent significant components of government recurrent expenditure on health care
- have common objectives across jurisdictions.

Major improvements in reporting in the Health preface this year include:

- inclusion of the following measures to align this Report with National Healthcare Agreement (NHA) and National Indigenous Reform Agreement (NIRA) indicators
 - reporting data for the net growth in the health workforce for selected professions
 - reporting data for the proportion of people who accessed health services by health status
 - reporting data on health risk factors, such as rates of risky alcohol consumption, smoking and obesity, for states and territories (previously only national data were reported)
 - reporting data on the incidence of selected cancers
 - reporting infant (0–1 year), child (1–4 year) and total infant and child (0–4 year) mortality (previously only infant mortality was reported)
 - reporting data for potentially avoidable deaths
 - reporting data for low birth weight babies by Indigenous status of mother
- expansion of time series data reporting in some attachment tables.

Other major improvements in reporting on health this year are identified in each of the service-specific health chapters.

The Australian, State, Territory and local governments spent \$63.1 billion (expressed in 2008-09 dollars) on selected health services, including public hospitals, medical services (including payments to general practitioners [GPs] and other specialist practitioners), community and public health, medications and public dental services in 2008-09. These areas of health care activity accounted for 83.8 per cent of government recurrent health expenditure in 2008-09 (table EA.4).

Total public health expenditure by Australian, State and Territory governments on breast cancer screening was \$175 million in 2008-09 (table 12A.6). This includes funding by the Australian Government to states and territories through the Public Health Outcome Funding Agreements (PHOFAs). This funding mechanism will change for future years with funding under the NHA from 2009-10. Government recurrent expenditure on specialist mental health services was estimated to be around \$5.6 billion in 2008-09 (tables 12A.28 and 12A.29). Some of this expenditure was on psychiatric care provided by public (non-psychiatric) hospitals (chapters 10 and 12).

Estimates of government expenditure on health care provision exclude high level residential aged care services and patient transport services (ambulance services including pre-hospital care, treatment and transport services). These services are not covered in the health chapters in this Report, but are reported separately in chapter 9 ('Emergency management') and chapter 13 ('Aged care services').

Box E.1 Some common health terms

Community health services: health services for individuals and groups delivered in a community setting, rather than via hospitals or private facilities.

General practitioners: medical practitioners who, for the purposes of Medicare, are vocationally registered under s.3F of the *Health Insurance Act 1973* (Cwlth), hold fellowship of the Royal Australian College of General Practitioners or equivalent, or hold a recognised training placement.

Medicare: covers Australian Government funding of private medical and optometric services (the Medicare Benefits Schedule [MBS]); selected medications (under the Pharmaceutical Benefits Scheme [PBS]); and public hospital funding (NHA), aimed at providing public hospital services free of charge to public patients.

Primary health care: services that:

- provide the first point of contact with the health system
- have a particular focus on prevention of illness and/or early intervention
- are intended to maintain people's independence and maximise their quality of life through care and support at home or in local community settings.

Public health: an organised social response to protect and promote health, and to prevent illness, injury and disability. The starting point for identifying public health issues, problems and priorities, and for designing and implementing medical interventions, is the population (or subgroups). Public health is characterised by a focus on the health of the population (and particular at-risk groups) and complements clinical provision of health care services.

Public hospital: a hospital that provides treatment free of charge and accommodation to eligible admitted people who elect to be treated as public patients. It also provides services free of charge to eligible non-admitted patients and may provide (and charge for) treatment and accommodation services to private patients. Charges to non-admitted patients and admitted patients on discharge may be levied in accordance with the NHA (for example, charges for aids and appliances).

Other major areas of government involvement in health provision not covered in the health chapters, or elsewhere in the Report, include:

- public health programs, other than those for breast cancer and mental health
- funding for specialist medical practitioners.

Other government services — such as education, public housing, sanitation and water supply — also influence health outcomes. These are not formally part of Australia's health system and are not the subject of the health chapters. Education (chapters 4 and 5) and public and community housing (chapter 16) are included in other chapters of the Report.

There is a complex relationship between health behaviours, health outcomes, and the socioeconomic and physical environment in which they occur. It has been well documented that Indigenous people are at higher risk of experiencing social and economic disadvantage, which may impact negatively on health behaviours and outcomes. It is a priority of the Steering Committee to improve reporting on the performance of government provided health care services for Indigenous people and for residents in regional and remote Australia.

The Council of Australian Governments (COAG) has agreed six National Agreements (NAs) to enhance accountability to the public for the outcomes achieved or outputs delivered by a range of government services, (see chapter 1 for more detail on reforms to federal financial relations). The NHA covers the area of Health, and health indicators in the NIRA establish specific outcomes for reducing the level of disadvantage experienced by Indigenous Australians. The agreements include sets of performance indicators, for which the Steering Committee collates annual performance information for analysis by the COAG Reform Council (CRC). Revisions have been made to the performance indicators reported in this preface to align with the performance indicators in the NAs.

COAG, with the exception of WA, agreed to establish the National Health and Hospitals Network (NHHN) in April 2010. Under the NHHN, from July 2011 the Australian Government becomes the majority funder of the health and hospitals system, including 60 per cent of the efficient price of public hospital services, capital, research and training, and 100 per cent of primary care equivalent outpatient services. The Australian Government will also assume full policy and funding responsibility for primary health care and aged care, including the Home and Community Care Program (except in Victoria and WA).

As part of the NHHN, the Australian Government and states/territories (except WA) have also agreed to a National Partnership Agreement on Improving Public Hospital Services, that will provide additional funding for capital, facilitation and reward funding for elective surgery and emergency departments, funding for a subacute beds guarantee and a flexible funding pool that can be utilised across all three areas.

The NHHN will establish an Independent Hospital Pricing Authority to set the national efficient price of all public hospital services, a National Performance Authority to report on public health sector performance, and the expansion of the Australian Commission on Safety and Quality in Health Care to set and monitor national quality and safety standards.

Profile of health services

This section provides a brief overview of Australian health services as a whole. More detailed descriptions of public hospitals, primary and community health services, and mental health and breast cancer services are provided in chapters 10, 11 and 12 respectively.

Roles and responsibilities

The Australian Government's health services activities include:

- through the NHA and NHHN, to fund a large part of public hospital services
- providing rebates to patients for medical services provided by GPs and specialists and delivering public health programs
- funding the PBS
- funding high level residential aged care services
- funding private health insurance rebates
- funding improved access to primary health care, specialist services and infrastructure for rural and remote communities
- funding Indigenous-specific primary health
- promulgating and coordinating health regulations
- undertaking health policy research and policy coordination across the Australian, State and Territory governments
- funding hospital services and the provision of other services through the Department of Veterans' Affairs
- funding hearing services for eligible Australians through the Australian Government Hearing Services Program
- funding the Medicare Safety Net.

State and Territory governments contribute funding for, and deliver, a range of health care services (including services specifically for Indigenous people) such as:

- public hospital services
- public health programs (such as health promotion programs and disease prevention)
- community health services
- public dental services

-
- mental health programs
 - patient transport
 - the regulation, inspection, licensing and monitoring of premises, institutions and personnel
 - health policy research and policy development
 - specialist palliative care
 - the Home and Community Care (HACC) program
 - aged care.

Local governments are generally involved in environmental control and a range of community-based and home care services, although the exact nature of their involvement varies across jurisdictions. The non-government sector plays a significant role in the health system, delivering general practice and specialist medical and surgical services, dental services, a range of other allied health services (such as optometry and physiotherapy), private hospitals and high level residential aged care services.

Funding

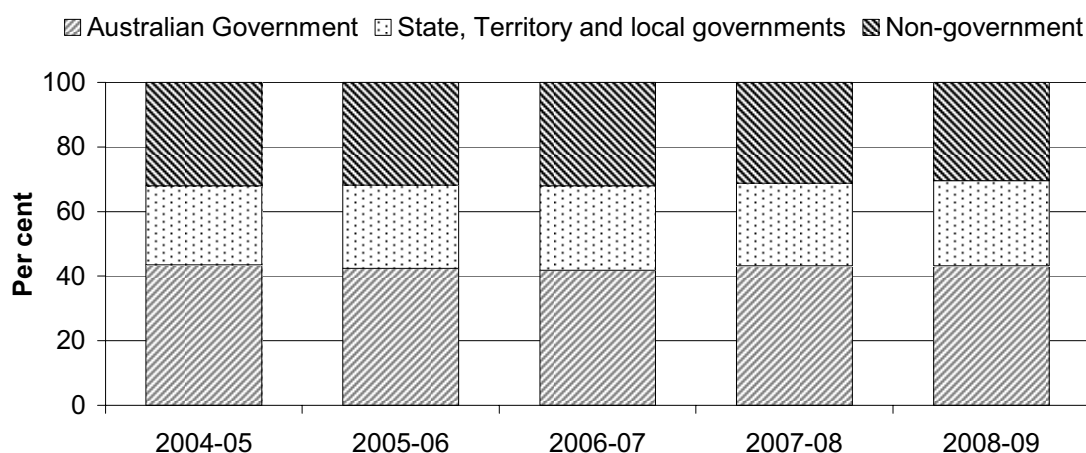
Funding the components of Australia's health care system is a complicated process. The Australian Government subsidises many of the services provided by the non-government sector (mostly through the MBS, the PBS, the private health insurance rebate and the Medicare Safety Net) and contributes funding to a number of nationally coordinated public health programs. It also provides funding under the NHA (formerly the Australian Health Care Agreements [AHCAs]) and the NHHN to the states and territories (except WA) for public hospital services.

State and Territory governments, through income raised by taxes and from both general and specific purpose payments received from the Australian Government, contribute funds to public health, community health services and public hospitals (through casemix and other payments), which in turn fund specialists (through limited fee-for-service or sessional arrangements). Private individuals, health insurance funds and other non-government institutions also contribute funding to a range of health care providers, both government and non-government.

In 2008-09, the Australian, State, Territory and local governments spent \$78.5 billion on total health services, which represents 69.6 per cent of total health expenditure. The Australian Government accounted for the largest proportion of health care expenditure — \$48.7 billion or 43.2 per cent of the total in 2008-09. State, Territory and local governments contributed \$29.8 billion or 26.4 per cent of

total health expenditure in that year (AIHW unpublished). These shares have remained relatively constant over the past 10 years. The remainder was paid by individuals, health insurance funds, workers compensation and compulsory motor vehicle third party insurance providers (figure E.1 and tables EA.1 and EA.7).

Figure E.1 Total health expenditure, by source of funds (2008-09 dollars)^{a, b, c, d}



^a Includes recurrent and capital expenditure. ^b Includes expenditure on high level residential aged care (reported in chapter 13) and ambulance services (reported in chapter 9). ^c Expenditure by Australian Government and non-government sources has been adjusted for tax expenditure in relation to private health incentives claimed through the taxation system. ^d 'Non-government' includes expenditure by individuals, health insurance funds, workers compensation and compulsory motor vehicle third party insurers.

Source: AIHW (unpublished) Health expenditure database; table EA.1.

Size and scope of sector

Total expenditure (recurrent and capital) on health care services in Australia was estimated to be \$112.8 billion in 2008-09 (table EA.1). This total was estimated to account for 9.0 per cent of gross domestic product in 2008-09, a slight increase from the previous year (8.8 per cent) and an increase of 1.2 per cent from the 7.8 per cent of GDP in 1998-99 (AIHW 2010d). This indicates that health expenditure grew faster than the economy as a whole over the decade to 2008-09.

The growth of total health expenditure over the past decade was largely the result of increased expenditure by Australian, State, Territory and local governments, which grew proportionally faster than expenditure by non-government sources. Between 1998-99 and 2008-09, the average annual rate of growth in real expenditure was 5.3 per cent for the Australian Government, 6.7 per cent for State,

Territory and local governments, and 4.6 per cent for non-government sources (table EA.1).¹

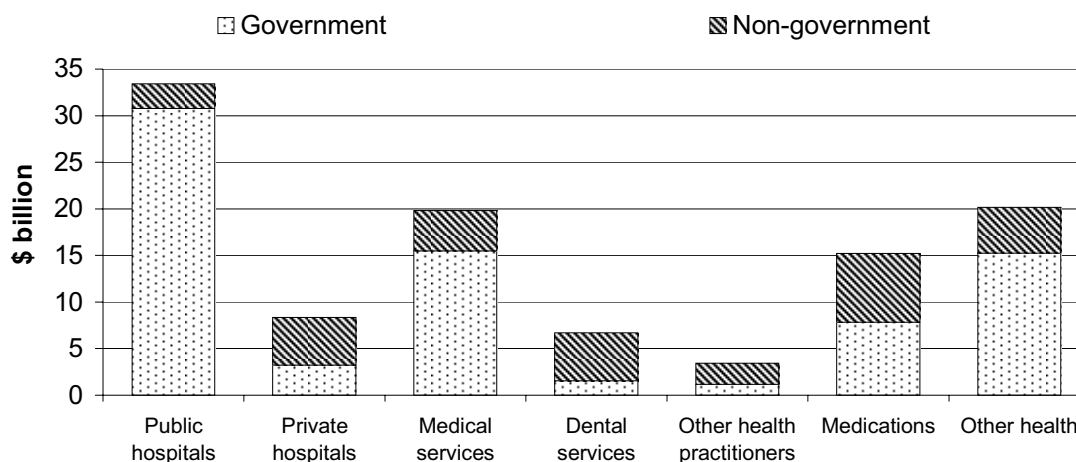
The introduction of programs supporting private health insurance was a significant factor in the increase in expenditure by the Australian Government in the late 1990s. On 1 January 1999, the Australian Government replaced the Private Health Insurance Incentive Scheme with a 30 per cent rebate on private health insurance premiums. Australian Government expenditure on the rebate has increased each year from \$2.6 billion in 2004-05 to \$3.6 billion in 2008-09 in current prices (that is, not adjusted for inflation) (AIHW unpublished).

The Extended Medicare Safety Net, introduced in March 2004, has also contributed to increased Australian Government expenditure. Under the Medicare Safety Net, patients are reimbursed for 80 per cent of their out-of-pocket costs for medical treatment received in a non-hospital setting, once a certain threshold is reached in a calendar year. Total Medicare Benefits Schedule Extended Medicare Safety Net expenditure was \$414.1 million in the year ending 31 December 2008 (DoHA unpublished).

Public hospitals were the single largest item of recurrent health care expenditure by government and non-government sources in 2008-09. Total real expenditure on public hospitals (which excludes expenditure on community and public health services, dental and ambulance services and health research undertaken by public hospitals) was \$33.4 billion, of which governments paid \$30.8 billion (figure E.2). Public hospitals accounted for 40.9 per cent of government recurrent expenditure on health care services in 2008-09. Medical services accounted for \$15.5 billion of government expenditure (20.6 per cent of total recurrent health expenditure) and medications accounted for \$7.8 billion (10.4 per cent) (table EA.2).

¹ There was a break in series due to differences in definitions of public hospital and public hospital services between 2002-03 and 2003-04.

Figure E.2 Recurrent health expenditure, by area of expenditure, 2008-09^{a, b, c, d, e, f}



^a Government funding of recurrent health expenditure has been adjusted for non-specific tax expenditure. ^b Almost all expenditure on medical services relates to services provided by practitioners on a fee-for-service basis, including those provided to private patients in hospitals. Excluded are the medical component of care provided to public hospital inpatients and outpatient medical services provided at public hospitals. ^c Medications include (but are not limited to) those provided under the PBS. ^d High level residential aged care services cover services to those residents requiring and receiving a level of care that falls within one of the four highest levels of care. These services are commonly classified as health services expenditure, but are discussed separately in this Report (chapter 13). ^e Government funding on other health practitioners includes DVA funding and DoHA hearing services (audiology component) which was previously included in 'other health'. ^f Other health comprises patient transport services, community health, public health, aids and appliances, other non-institutional health nec., administration and research.

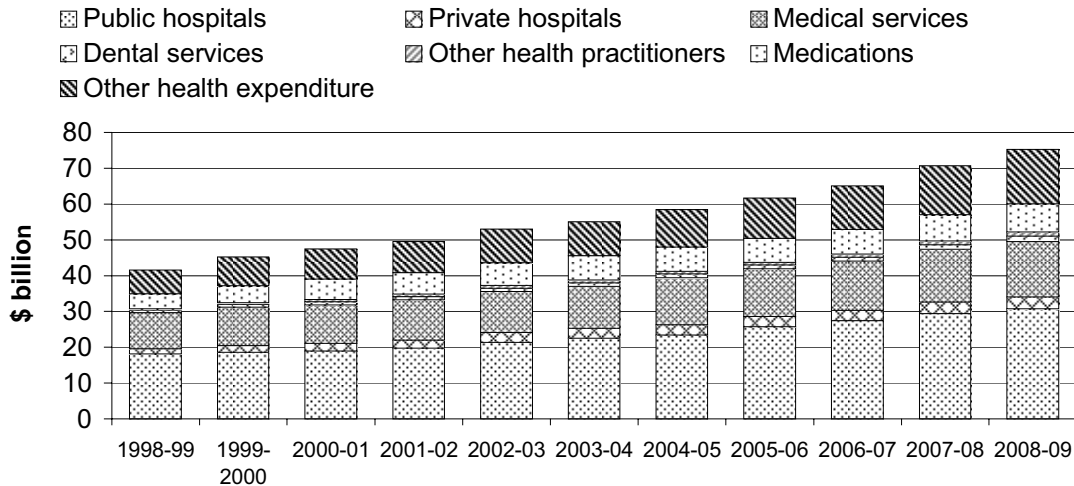
Source: AIHW (unpublished) Health expenditure database; tables EA.2 and EA.3.

The relative share of government recurrent health expenditure allocated to public hospitals has fallen from 43.7 per cent in 1998-99 to 40.9 per cent in 2008-09. This decline reflects the more rapid growth over the decade of government expenditure on private hospitals and medications (figure E.3 and table EA.2). The average annual growth rate of government real recurrent expenditure on private hospitals was 8.9 per cent between 1998-99 and 2008-09 (albeit from a relatively low base), compared with 6.3 per cent for medications and 5.4 per cent for public hospitals (table EA.2). Policy measures introduced over the decade that were aimed at restraining growth in government health expenditure included the restriction of Medicare provider numbers, initiatives to encourage the use of generic medication brands, and increases in co-payments for medications.

The high annual growth in expenditure on private hospitals meant it also grew as a proportion of government health care expenditure over the period 1998-99 to 2008-09. Government expenditure on private hospitals increased from 3.3 per cent of government health expenditure in 1998-99 to 4.3 per cent in 2008-09, and the

proportion of expenditure on medication also increased slightly, from 10.2 per cent to 10.4 per cent over the same period (table EA.2).

Figure E.3 Government recurrent expenditure, by area of expenditure (2008-09 dollars)^{a, b, c, d, e}



^a Medications include (but are not limited to) those provided under the PBS. ^b Almost all expenditure on medical services relates to services provided by practitioners on a fee-for-service basis, including those provided to private patients in hospitals. Excluded are the medical component of hospital care provided to public hospital inpatients, and outpatient medical services provided at public hospitals. ^c High level residential aged care is reported in chapter 13. ^d Other health comprises patient transport services, community health, public health, aids and appliances, other non-institutional health nec., administration and research. ^e Real (constant price) estimates have been calculated by applying the AIHW total health price index (table EA.7).

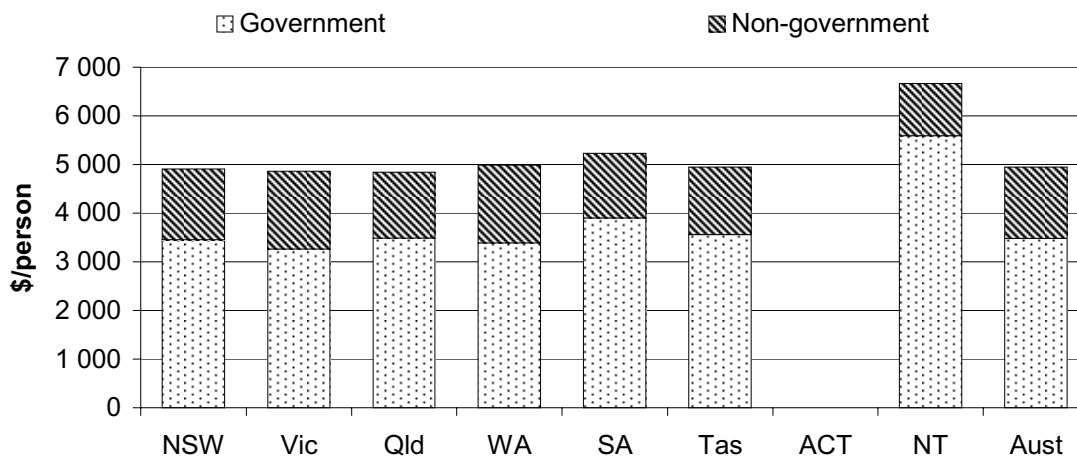
Source: AIHW (unpublished) Health expenditure database; table EA.2.

Health expenditure per person

Health expenditure per person in each jurisdiction is affected by different policy initiatives and socioeconomic and demographic characteristics. Nationally, total health expenditure (recurrent and capital) per person in 2008-09 (expressed in 2008-09 dollars) was \$5212 (table EA.5). Total health expenditure per person in Australia increased from \$4528 in 2004-05 to \$5212 in 2008-09 (expressed in 2008-09 dollars) (table EA.5). The average annual growth rate in average health expenditure per person (expressed in 2008-09 dollars) from 2004-05 to 2008-09 was 3.6 per cent (table EA.5).

Government real recurrent health expenditure per person in Australia increased from \$2887 in 2004-05 to \$3477 in 2008-09 (expressed in 2008-09 dollars). Non-government recurrent expenditure per person in Australia rose from \$1325 in 2004-05 to \$1471 in 2008-09 (expressed in 2008-09 dollars) (figure E.4 and table EA.6).

Figure E.4 Recurrent health expenditure per person, by source of funds, excluding high level residential aged care, 2008-09
a, b, c



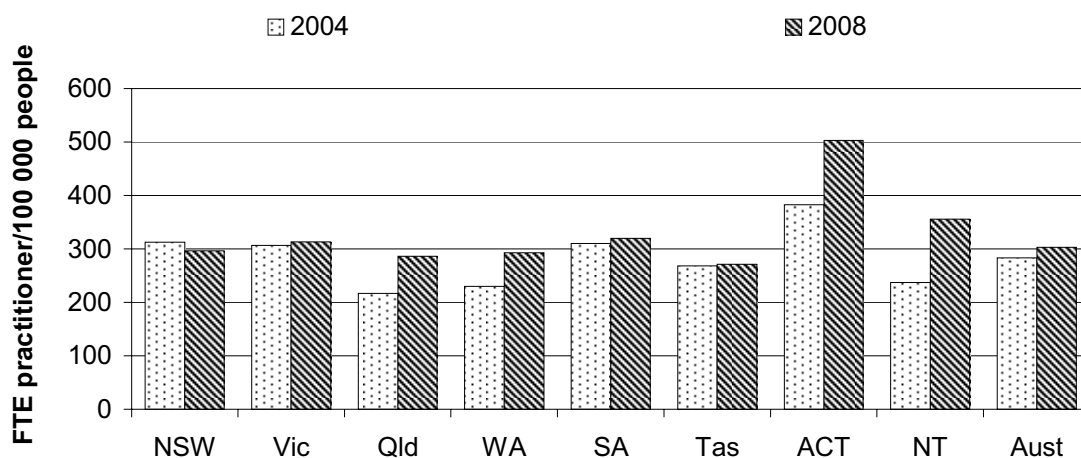
a Includes expenditure on ambulance services (reported in chapter 9). **b** Government expenditure includes expenditure by the Australian, State, Territory and local governments. **c** ACT per person figures are not calculated, as the expenditure numbers for the ACT include substantial expenditure for NSW residents, and the ACT population is not the appropriate denominator.

Source: AIHW (unpublished) Health expenditure database; table EA.6.

Health workforce

In 2008, there were 68 689 registered medical practitioners in Australia working in medicine. A further 1742 were in the medical labour force but on extended leave or looking for work. The majority of employed practitioners working in medicine were clinicians (93.3 per cent), of whom 37.5 per cent were primary care practitioners (mainly general practitioners), 35.0 per cent were specialists, 13.8 per cent were specialists-in-training, 12.3 per cent were hospital non-specialists and 1.4 per cent were other clinicians (AIHW 2010b). The number of full time equivalent (FTE) practitioners per 100 000 people by jurisdiction is illustrated in figure E.5.

Figure E.5 **Employed medical practitioners**^{a, b}

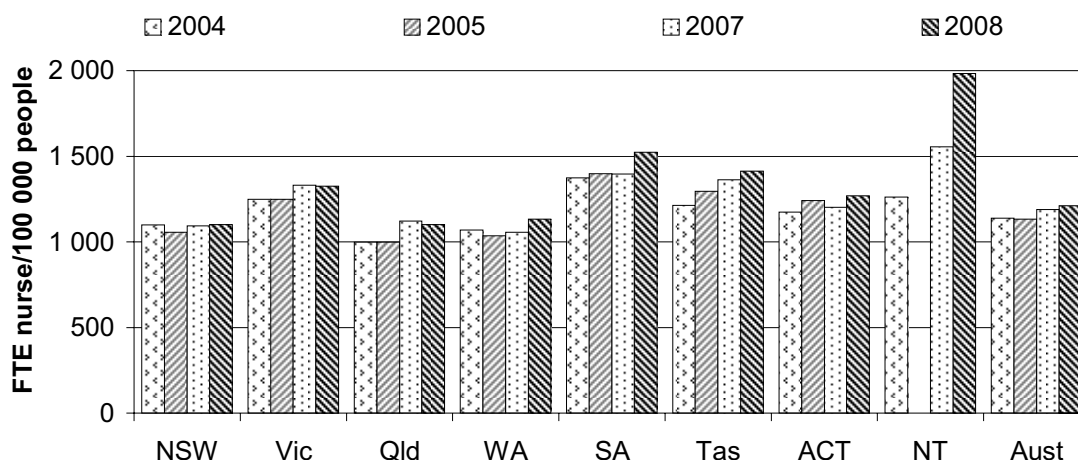


^a FTE rate (FTE per 100 000 people) is based on standard full-time working week of 45 hours. ^b Number of 'employed medical practitioners' does not include medical practitioners on extended leave.

Source: AIHW (2010) *Medical Labour Force 2008*, AIHW Bulletin no. 82, AIHW Cat. no. AUS 131; AIHW (2006) *Medical Labour Force 2004*, AIHW Cat. no. HWL 39, National Health Labour Force Series no. 38; table EA.8.

The number of FTE nurses per 100 000 people by jurisdiction is illustrated in figure E.6. The national increase in the FTE nurse rate in Australia between 2004 and 2008 arose from both an increase in the number of nurses employed and an increase in average hours worked (AIHW 2010c).

Figure E.6 **Employed nurses**^{a, b, c}

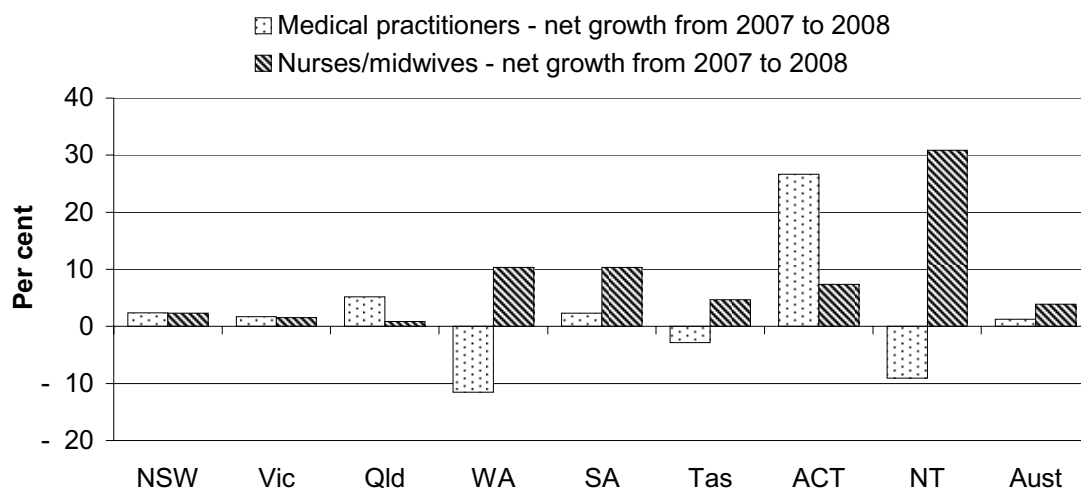


^a FTE nurse rate (per 100 000 people) based on a 35-hour week. ^b Number of 'employed nurses' does not include nurses on extended leave. ^c Data for 2006 are not available.

Source: AIHW (2010) *Nursing and Midwifery Labour Force 2008*, AIHW Bulletin no. 81, AIHW Cat. no. AUS 130; AIHW (2009) *Nursing and Midwifery Labour Force 2007*, AIHW Cat. no. HWL 44, National Health Labour Force Series no. 43; AIHW (2008) *Nursing and midwifery labour force 2005*, AIHW Cat. no. HWL 40, National Health Labour Force Series no. 39; AIHW (2006) *Nursing and Midwifery Labour Force 2005*, AIHW Cat. no. HWL 38, National Health Labour Force Series no. 37; table EA.9.

The net growth of the health workforce can give an indication of the sustainability of the health system and its ability to respond and adapt to future needs. At the national level, the medical practitioners and nurse/midwife FTE health workforces grew from 2007 to 2008, although growth varied across states and territories. At the national level, the nursing workforce grew at a faster rate than the medical workforce (figure E.7). Health workforce growth from 2007 to 2008 by selected professions by clinical/non-clinical status are reported in table EA.11.

Figure E.7 **Net growth in health workforce, selected professions, 2007 to 2008^{a, b}**



^a Net growth measures the change in the FTE number in the workforce in the reference year compared to the year prior to the reference year. ^b FTEs calculated based on a 40-hour standard working week for medical practitioners and a 38-hour week for nurses/midwives.

Source: AIHW (unpublished) *Health Labour Force Surveys* (Medical (2007 and 2008)), AIHW (unpublished) *Nursing and Midwifery Labour Force Survey* (2007 and 2008); State and Territory registration board data; table EA.10.

Overview of Indigenous health

The Steering Committee has placed a high priority on reporting on government services to Indigenous people. Data on health outcomes and the provision of health services for Indigenous people are included, where possible, in this Report. This overview is designed to assist interpretation of these data and provide a broader understanding of Indigenous health issues.

There is a complex relationship between health behaviours, health outcomes, and the socioeconomic and physical environment in which they occur. It has been well documented that Indigenous people are at higher risk of experiencing social and economic disadvantage, which may negatively affect health behaviours and outcomes. These patterns are reflected in Australian data on: mortality, life expectancy and birthweight (later in this preface); hospital separation rates; fetal, neonatal and perinatal death rates (chapter 10); and suicide (chapter 12).

A number of recent publications include more comprehensive data on the health status of Indigenous Australians, including health determinants and health care access, which significantly affect health outcomes. These include the *Aboriginal and Torres Strait Islander Health Performance Framework — 2008 Report*

(DoHA 2008), *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples* (Australian Bureau of Statistics [ABS] and AIHW 2008), *Overcoming Indigenous Disadvantage: Key Indicators 2009* (SCRGSP 2009), *National Aboriginal and Torres Strait Islander Social Survey, 2008* (ABS 2009d), *Expenditure on health for Aboriginal and Torres Strait Islander people 2006-07* (AIHW 2009), and *Australia's Health 2010* (AIHW 2010a).

Contributing factors

Many Indigenous Australians live today in conditions of clear social and economic disadvantage, which, along with other geographic, environmental and cultural factors, may contribute to poor health.

Educational attainment levels are relatively low for the Indigenous population compared with all Australians. School retention rates for Indigenous school students remain considerably lower than those for non-Indigenous school students, although the disparity between the two groups is slowly lessening (ABS and AIHW 2008). In 2009, apparent retention rates for Indigenous full-time students were 90.9 per cent from years 7 or 8 to year 10 and 50.1 per cent to year 12. This compares with apparent retention rates for non-Indigenous students of 100.0 per cent to year 10 and 77.7 per cent to year 12. Apparent retention rates for Indigenous students from the beginning of secondary school to year 12 increased from 45.3 per cent in 2005 to 50.1 per cent in 2009, while the rate for non-Indigenous Australians remained steady at around 77 per cent (see chapter 4, table 4A.127).

Indigenous people have relatively low employment and income levels that may create financial barriers to accessing health services. Average weekly income for Indigenous people was \$549 in 2006, while the weekly income for non-Indigenous people was \$769 (see Statistical appendix tables AA.2, AA.7, AA.16 and AA.17). Between 2001 and 2006, for those aged 15–64 years the employment to population ratio increased for Indigenous people from 43 per cent to 48 per cent, and for non-Indigenous people from 68 per cent to 72 per cent. The gap remained around 25 percentage points. In the same time period, the unemployment rate for Indigenous people aged 15–64 years decreased from 20 per cent to 16 per cent. However, this was still three times the rate for non-Indigenous Australians of 5 per cent. This is similar to the rate ratios from the 2001 Census (20 per cent compared with 7 per cent) (SCRGSP 2009).

There are high imprisonment rates among Indigenous people. Indigenous prisoners represented 26 per cent of the total prisoner population in 2009-10 (see chapter 8, table 8A.1). After adjusting for age differences, Indigenous adults were 14 times as likely as non-Indigenous adults to be imprisoned in 2009-10 (see chapter 8,

table 8A.4), compared to 10 times as likely in 2000 (SCRGSP 2009). The Indigenous juvenile detention rate increased by 27 per cent between 2001 and 2007. As at 30 June 2007, Indigenous juveniles were 28 times as likely as non-Indigenous juveniles to have been detained. High imprisonment rates may contribute to the poorer health status of Indigenous people (SCRGSP 2009).

There are close associations between socioeconomic factors and exposure to health risk factors. Indigenous Australians have relatively high rates for some health risk factors such as obesity, substance abuse and violence. In 2007-08, the age standardised rate of Indigenous people aged 18 years and over who were daily cigarette smokers was 45 per cent, compared to 18.9 per cent for non-Indigenous people aged 18 years and over (ABS unpublished). Indigenous adults were less likely than non-Indigenous adults to have consumed alcohol in the week prior to interview in 2004-05 (53 per cent compared with 36 per cent). Among those who drank alcohol, rates of long-term risky/high risk alcohol consumption were similar for Indigenous and non-Indigenous Australians after adjusting for age. However, Indigenous adults were twice as likely to consume alcohol at short-term risky/high risk levels at least once a week over the previous 12 month period. Hospitalisation rates for all alcohol-related conditions were higher for Indigenous people than non-Indigenous people in 2006-07 (SCRGSP 2009).²

Geographic distance to health services, particularly in remote and very remote areas, contributes to the health disadvantage of Indigenous people. In 2006, 417 (35 per cent) discrete Indigenous communities³, with a combined population of 25 486, were located 100 kilometres or more from the nearest Aboriginal Primary Health Care Centre and, of these, 92 (22 per cent) were larger communities with a population of 50 or more people. A total of 372 discrete Indigenous communities (31 per cent) were located 100 kilometres or more from the nearest other (State-funded) health centre and, of these, 90 (24 per cent) were larger communities. A total of 755 (64 per cent) discrete Indigenous communities were located 100 kilometres or more from the nearest hospital. On a population basis, 25 per cent of Indigenous people living in communities were 100 kilometres or more from the nearest hospital (ABS 2007).

Many Indigenous people live in inadequate and overcrowded housing, particularly in remote and very remote areas. Indigenous people were around five times as likely

² Short term risk is the risk of harm associated with given levels of alcohol consumption on any one occasion. Long term risk is associated with regular daily patterns of alcohol consumption and defined by the average daily intake of alcohol over 7 days of the reference week.

³ A geographic location, bounded by physical or cadastral (legal) boundaries, and inhabited or intended to be inhabited predominantly (that is, greater than 50 per cent of usual residents) by Indigenous people, with housing or infrastructure that is managed on a community basis.

as non-Indigenous people to live in overcrowded housing in 2006. Overcrowding was highest in very remote areas (65.1 per cent) and lowest in major cities (15.1 per cent) (SCRGSP 2009). There were around 20 700 overcrowded Indigenous households (14 per cent), and 102 400 Indigenous people (27 per cent) living in overcrowded conditions in 2006 (ABS and AIHW 2008). There has been some improvement in housing overcrowding, with the proportion of Indigenous people living in overcrowded housing falling from 31 per cent to 27 per cent between 2001 and 2006 (SCRGSP 2009).

Expenditure

It is not always possible to make accurate estimates of health expenditure for Indigenous people, and their corresponding service use. For example, Indigenous status is not always clearly stated or recorded. For many publicly funded health services there is incomplete information available about service users and, in particular, their Indigenous status.

For privately funded services, this information is frequently unavailable. For those services that do collect information on Indigenous status the data are not always accurate. This may be because Indigenous identification is voluntary and not all Indigenous patients choose to identify as Indigenous and some providers may not optimise collection of data on Indigenous status.

The scope and definition of health expenditure also have some limitations. For the Indigenous health expenditure data presented below, health covers those services that are directed mainly towards improving health and/or reducing the effects of illness or injury. This is a relatively narrow definition which excludes a number of supportive ‘welfare’ services and the impact of living conditions on health, for example, housing, sanitation and nutrition. There are also other (non-health) agency contributions to health expenditure (such as those incurred within education departments and prisons) that are not included.

Indigenous health expenditure can also be difficult to identify, as the majority of health expenditure on Indigenous people is allocated through mainstream health programs — admitted and non-admitted patient services, community health services, medical and medications health services, and public health services. The definition of health expenditure has changed and no longer includes expenditure on high care residential aged care, which is now classified as welfare expenditure.

The most recent estimates of health services expenditure for Indigenous people are for 2006-07 (AIHW 2009). The ratio of Indigenous to non-Indigenous health and high care residential aged care expenditure per person in 2006-07 was 1.25. This

means that \$1.25 was spent per person on health for Indigenous people for every dollar spent for non-Indigenous people.

The average Indigenous/non-Indigenous total health expenditure per person ratio increased between 2004–05 and 2006–07 from 1.17 to 1.25. The increase can be explained by growth in expenditure for Indigenous people in areas such as public hospital services and Medicare funded medical services (AIHW 2009).

The major feature of the difference in total health expenditure per person between Indigenous and non-Indigenous people is the reliance of Indigenous people on public hospitals and community health services. Although Indigenous people used few private hospital services, as their private insurance membership was low, overall hospital expenditure (public and private hospital) per Indigenous person was 72 per cent higher than for non-Indigenous people (AIHW 2009, table E.1). Spending on community health services was six and a half times that for non-Indigenous people. In contrast, per person expenditure on medical services, medications and dental services was half or less than that for non-Indigenous people (table E.1). This is partly because Indigenous people have much lower incomes compared to non-Indigenous people and, like many low income people, use more public hospital services and less private specialist medical services. Approximately 70 per cent of Indigenous households are in the lowest two household income quintiles (AIHW 2009).

The difference between average health expenditure on Indigenous and non-Indigenous people reflects, among other things, the differences in the average costs of providing goods and services to the two populations. For example, a higher proportion of Indigenous people live in remote and very remote regions in Australia where the costs of providing health goods and services are higher than for those people who live in capital cities or inner regional areas.

Table E.1 Expenditure on health and high care residential aged care services for Indigenous and non-Indigenous people, 2006-07

Area of expenditure	Expenditure (\$ million)			Indigenous share (%)	Expenditure per person (\$)		Ratio
	Indigenous	Non-Indigenous	Total		Indigenous	Non-Indigenous	
Total hospital services	1 483.1	33 687.6	35 170.7	4.2	2 838.3	1 654.6	1.72
Public hospital services ^a	1 450.9	26 565.3	28 016.2	5.2	2 776.6	1 304.8	2.13
Admitted patient services ^b	1 123.5	20 817.0	21 940.5	5.1	2 150.0	1 022.4	2.10
Non-admitted patient services	327.4	5 748.3	6 075.7	5.4	626.5	282.3	2.22
Private hospitals ^c	32.3	7 122.3	7 154.5	0.5	61.7	349.8	0.18
Patient transport services	115.9	1 672.4	1 788.3	6.5	221.8	82.1	2.70
Medial services	220.8	16 544.5	16 765.3	1.3	422.6	812.6	0.52
Medicare services	193.2	13 441.1	13 634.3	1.4	369.7	660.2	0.56
Other	27.6	3 103.4	3 131.0	0.9	52.9	152.4	0.35
Dental services	72.9	5 676.2	5 749.1	1.3	139.5	278.8	0.50
Community health services	620.1	3 706.2	4 326.4	14.3	1 186.7	182.0	6.52
Other professional services	22.3	3 250.8	3 273.1	0.7	42.8	159.7	0.27
Public health	110.9	1 700.2	1 811.0	6.1	212.2	83.5	2.54
Medications	129.4	12 481.0	12 610.3	1.0	247.5	613.0	0.40
Aids and appliances	21.0	3 004.6	3 025.6	0.7	40.3	147.6	0.27
Research	32.1	2 317.0	2 349.1	1.4	61.5	113.8	0.54
Health administration	75.7	2 294.0	2 269.7	3.2	144.8	112.7	1.29
Other health services (nec) ^d	5.5	141.9	147.4	3.7	10.5	7.0	1.51
Total health	2 909.7	86 476.4	89 386.1	3.3	5 568.5	4 247.3	1.31

(Continued on next page)

Table E.1 (Continued)

Area of expenditure	Expenditure (\$ million)			Expenditure per person (\$)			Ratio
	Indigenous	Non-Indigenous	Total	Indigenous share (%)	Indigenous	Non-Indigenous	
High care residential aged care	66.7	6 305.1	6 371.8	1.0	127.6	309.7	0.41
Total health and high care residential aged care	2 976.4	92 781.5	95 757.9	3.1	5 696.1	4 557.0	1.25

^a Public hospital services exclude dental services, community health services, patient transport services, public health and health research undertaken by the hospital. ^b Admitted patient expenditure estimates allow for Indigenous under-identification, except for Tasmania. ^c Include State/Territory government expenditure for services provided for public patients in private hospitals (\$249.5 million). ^d Other health services (not elsewhere classified) include expenditure on health services such as family planning.

Source: AIHW (2009) *Expenditure on Health for Aboriginal and Torres Strait Islander Peoples 2006-07*, Cat. no. HWE 48, Health and Welfare Expenditure Series no. 39, Canberra.

In 2006-07, governments provided 93.4 per cent of the total funding for Indigenous health care spending and 68.2 per cent of the health care funding for non-Indigenous people. For Indigenous health spending, the states and territories contributed around \$1.5 billion or 51.4 per cent of total funding, and around \$1.2 billion or 42.0 per cent of total funding came from the Australian Government. Non-government sources contributed around \$193 million, or 6.6 per cent of total funding (table E.2).

Table E.2 Total funding for health and high care residential aged care for Indigenous and non-Indigenous people, 2006-07

Source of funding	Amount (\$ million)			
	Indigenous	Non-Indigenous	Total	Indigenous share (%)
State and Territory governments	1 495.8	20 861.6	22 357.4	6.7
Australian Government	1 220.7	38 107.3	39 328.1	3.1
Direct Australian Government	720.5	24 869.4	25 589.9	2.8
Indirect through Australian State/Territory governments	487.4	9 406.4	9 893.8	4.9
Indirect through non-government ^a	12.8	3 831.5	3 844.3	0.3
<i>All governments</i>	<i>2 716.5</i>	<i>58 968.9</i>	<i>61 685.4</i>	<i>4.4</i>
Non-government	193.2	27 507.5	27 700.7	0.7
Total health	2 909.7	86 476.4	89 386.1	3.3
Australian Government funded high care residential aged care	43.8	4 769.3	4 813.1	0.9
Non-government funded high care residential aged care	22.9	1 535.7	1 558.6	1.5
<i>Government funded health and high care residential aged care</i>	<i>2 760.3</i>	<i>63 738.2</i>	<i>66 498.5</i>	<i>4.2</i>
Total health and high care residential aged care	2 976.4	92 781.4	95 757.9	3.1

^a 'Indirect through non-government' data include private health insurance rebates of \$3073 million for all Australians, Special Purpose Payments (SPPs) covering high specialised drugs in private hospitals and other payments.

Source: AIHW (2009) *Expenditure on Health for Aboriginal and Torres Strait Islander Peoples 2006-07*, Cat. no. HWE 48, Health and Welfare Expenditure Series no. 39, Canberra.

On a per person basis, the level of funding from Australian State and Territory governments, was much higher for Indigenous people than for non-Indigenous people (table E.3). The average amount of funding was \$5199 per Indigenous person and \$2896 per non-Indigenous person.

In 2006–07, Australian Government funding for health services was around 25 per cent more per person for Indigenous people than for non-Indigenous people. State and Territory governments funding was almost three times as much per person for Indigenous people as for non-Indigenous people (table E.3).

Table E.3 Funding per person for health and high care residential aged care for Indigenous and non-Indigenous people, 2006–07

<i>Source of funding</i>	<i>Funding per person (\$)</i>		
	<i>Indigenous</i>	<i>Non-Indigenous</i>	<i>Ratio</i>
State and Territory governments	2 862.5	1 024.6	2.79
Australian Government	2 336.2	1 871.7	1.25
Direct Australian Government	1 378.8	1 221.5	1.13
Indirect through Australian State/Territory governments	932.8	462.0	2.02
Indirect through non-government ^a	24.5	188.2	0.13
<i>All governments</i>	<i>5 198.7</i>	<i>2 896.3</i>	<i>1.79</i>
Non-government	369.8	1 351.0	0.27
Total health	5 568.5	4 247.3	1.31
Australian Government funded high care residential aged care	83.9	234.2	0.36
Non-government funded high care residential aged care	43.7	75.4	0.58
<i>Government funded health and high care residential aged care</i>	<i>5 282.6</i>	<i>3 130.5</i>	<i>1.69</i>
Total health and high care residential aged care	5 696.1	4 557.0	1.25

^a 'Indirect through non-government' data include private health insurance rebates (\$147.1 per Australian in 2006-07). This category also includes SPPs which cover highly specialised drugs provided in private hospitals, along with other payments.

Source: AIHW (2009) *Expenditure on Health for Aboriginal and Torres Strait Islander Peoples 2006-07*, Cat. no. HWE 48, Health and Welfare Expenditure Series no. 39, Canberra.

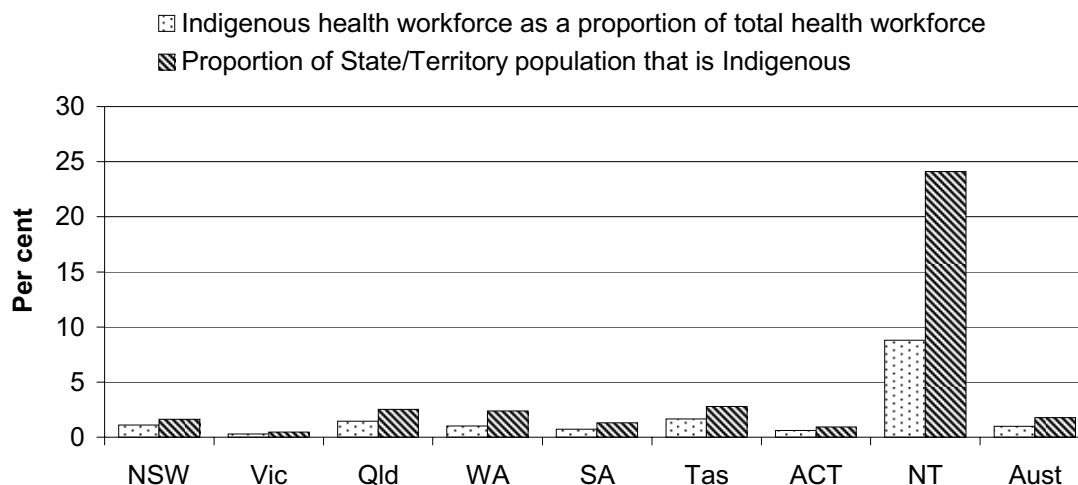
Indigenous health workforce

Indigenous people aged 15 years and over were under-represented in almost all health-related occupations in 2006 (ABS and AIHW 2008). This can potentially contribute to Indigenous peoples' reduced access to health services. One patient satisfaction survey found that the presence of an Indigenous doctor at a community health centre was one of the main reasons for Indigenous people attending the clinic. In addition, the number of Indigenous patients attending the clinic increased markedly following the arrival of the Indigenous doctor and other changes in the service designed to make it more welcoming. Patients reported that an Indigenous doctor was 'more understanding of their needs' (DoHA 2008).

In 2006, Indigenous people accounted for 1.0 per cent of the health workforce, but comprised 1.8 per cent of the total population (aged 15 years and over). Indigenous health workers are under-represented in each State and Territory (figure E.8). There have, however, been some improvements over time with increases in the number of

Indigenous Australians in the health workforce as a proportion of the total health workforce (DoHA 2008).

Figure E.8 Indigenous health workforce as a proportion of total health workforce, by jurisdiction, 2006^{a, b}

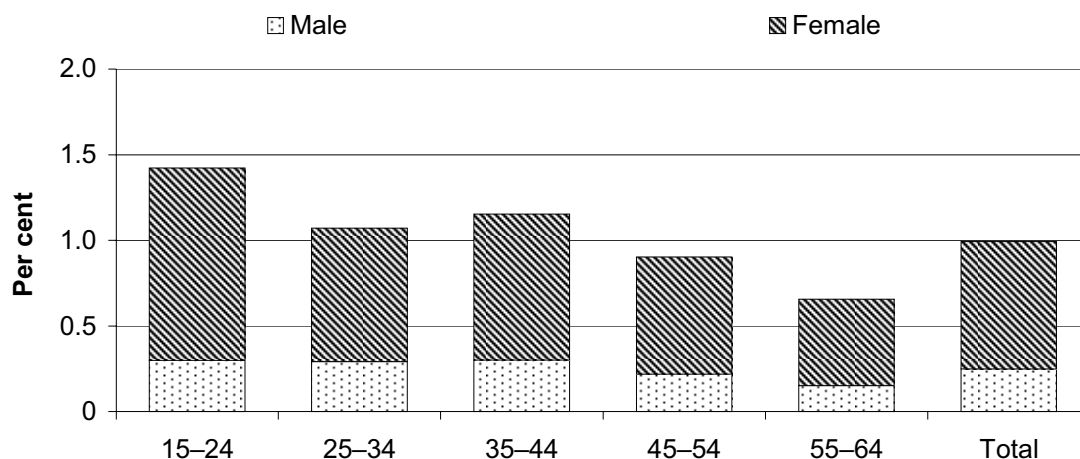


^a Aged 15 years and over. ^b Australian total data include other territories.

Source: ABS (unpublished), ABS (2007) *2006 Census of Population and Housing*, Canberra; table EA.12.

For younger age-groups, Indigenous people make up a higher proportion of the health workforce — 1.4 per cent of the workforce aged 15–24 years and 1.1 per cent of the workforce aged 25–34 years. Indigenous females represented a higher proportion of the health workforce than Indigenous males across all age-groups (figure E.9).

Figure E.9 **Indigenous health workforce as a proportion of total health workforce, by age-group and sex, 2006^a**



^a Total includes data for the 65 plus age group.

Source: ABS (unpublished), 2006 Census of Population and Housing; table EA.13.

Indigenous health workforce by occupation

In 2006, there were 103 Indigenous people working as medical practitioners and 1446 Indigenous people working as nurses (table E.4). After nursing, Indigenous people in the health workforce were most commonly employed as Aboriginal and Torres Strait Islander health workers (965 people) (table EA.15). Aboriginal and Torres Strait Islander health workers may be employed as specialists in areas such as alcohol, mental health, diabetes, eye and ear health, sexual health, or generalist members of primary care teams, or hospital liaison officers (table EA.15). These data are from the 2006 Census of Population and Housing. Data for 2007 on the proportion of medical practitioners and nurses/midwives that were Indigenous are available from the AIHW Health Labour Force Surveys and are reported in table EA.16.

Table E.4 Proportion of the health workforce that is Indigenous, by occupation groupings, 2006^a

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust ^b	
	%	%	%	%	%	%	%	%	%	no.
Occupation groupings ^c										
Medical practitioners	0.2	0.1	0.2	0.1	0.2	0.5	0.3	0.6	0.2	103
Medical imaging workers	0.2	0.1	0.3	–	0.4	–	–	–	0.2	19
Dental workers	0.8	0.2	1.2	0.4	0.4	0.9	0.8	1.9	0.7	203
Nursing workers	0.9	0.3	0.9	0.5	0.4	1.3	0.4	1.9	0.7	1 446
Pharmacists	–	0.1	0.2	0.2	–	–	–	–	0.1	13
Allied health workers	0.8	0.2	0.9	0.7	0.8	1.1	0.6	4.2	0.7	454
Complementary therapists	0.5	0.3	0.8	0.8	0.3	3.1	–	–	0.5	87
Other health workers	2.3	0.7	3.4	2.8	2.0	3.7	1.3	27.2	2.4	3 145
Total Indigenous health workforce as proportion of total health workforce	1.1	0.3	1.4	1.1	0.8	1.7	0.6	8.8	1.0	..
	no.	no.	no.	no.	no.	no.	no.	no.	no.	no.
Total Indigenous health workforce	1 933	456	1 472	563	354	216	51	422	5 470	5 470

^a Proportions exclude persons who did not state their Indigenous status. ^b Includes Other Territories (Christmas Island, Cocos (Keeling) Islands, and Jervis Bay Territory). ^c Occupation groupings are based on those used in AIHW Health and Community Services Labour Force, 2006. .. Not applicable. – Nil or rounded to zero.

Source: ABS (unpublished), 2006 Census of Population and Housing, Cat. no. 2068.0; table EA.14.

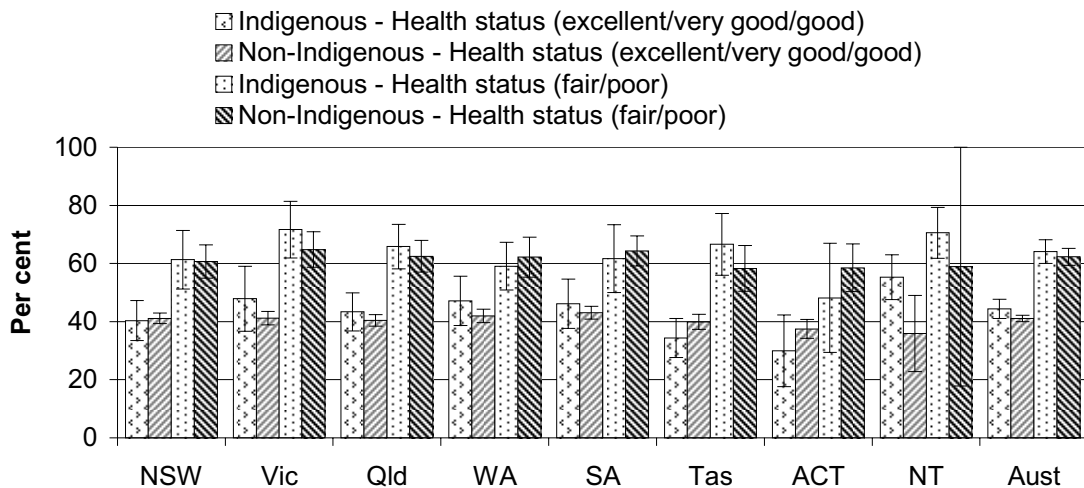
Self-assessed health

Results from the 2007-08 National Health Survey indicate that the majority of Australians (85 per cent) aged 15 years or over reported their health as either good, very good or excellent (ABS 2009b). In the 2008 National Aboriginal and Torres Strait Islander Social Survey, 78 per cent of Indigenous people reported their health as either good, very good or excellent (ABS 2009d). There was a significant decline in Indigenous people reporting their health as fair or poor from 2001 (down from 26 per cent in 2001 to 22 per cent in 2008) (ABS 2009b).

Indigenous people were less likely than non-Indigenous people to report very good or excellent health and the difference between the two populations was greatest in the older age groups (DoHA 2008). Taking into account differences in age structure between the Indigenous and non-Indigenous populations, Indigenous people overall were almost twice as likely to report their health as fair or poor than non-Indigenous Australians in 2004-05 (ABS 2006). Indigenous females were more likely to report their health as fair or poor than Indigenous males (24 per cent compared with 19 per cent) (DoHA 2008).

Data from the National Health Survey show that 41.8 per cent of Australians who reported their health status as being excellent/very good/good accessed health services in 2004-05, while health services were accessed by 62.6 per cent of people who reported their health status as being fair/poor (tables EA.17 and EA.18). There was little difference between the percentages of Indigenous and non-Indigenous people reporting excellent/very good/good health status who accessed health services or between Indigenous and non-Indigenous people reporting fair/poor health status who accessed health services in 2004-05 (figure E.10). The proportion of people who accessed health services by health status, remoteness and SEIFA are reported in tables EA.21–EA.24.

Figure E.10 Proportion of people who accessed health services by health status and Indigenous status, 2004-05^{a, b, c, d, e}



^a Rates are age standardised by State/Territory to the 2001 estimated resident population (5 year ranges from 15+). ^b Persons who accessed at least one of the health services noted in tables EA.19 and EA.20 in the last two weeks or were admitted to hospital in the last 12 months. ^c Limited to people aged 15 years or over. ^d Total persons accessing any of the selected health services. Components may not add to total because persons may have accessed more than one type of health service. ^e Estimates with RSEs between 25 per cent and 50 per cent should be used with caution. Estimates with RSEs greater than 50 per cent are considered too unreliable for general use.

Source: ABS (unpublished) *National Health Survey, 2004-05*; ABS (unpublished) *National Aboriginal and Torres Strait Islander Health Survey, 2004-05*; tables EA.19 and EA.20.

Data quality

Good quality data are needed to assess the effectiveness of programs and to evaluate policies designed to improve health services and outcomes for Indigenous people. Despite recent improvements, the quality of estimates of Indigenous health information is limited by problems with the underlying data. Some of the problems associated with Indigenous health data are outlined in (ABS 2009a), and (ABS and AIHW 2008) including:

- Indigenous people are not always accurately or consistently identified in administrative health data collections (such as hospital records and birth and death registrations) because of variation in definitions, different data collection methods and inaccurate or incomplete recording of Indigenous status. Data on hospital separations, mortality and disease notifications are therefore likely to be underestimated for the Indigenous population.
- Inconsistent data definitions and differences in the accuracy of identifying Indigenous people have led to problems making comparisons between jurisdictions, and over time.
- Problems in accurately estimating the Indigenous population; there is an undercount of the Indigenous population in the Census, particularly in remote areas, and there are data quality problems with the births and deaths statistics used to adjust Census data to produce population estimates and projections.

As part of the development of the Aboriginal and Torres Strait Islander Health Performance Framework, key priorities for data development have been identified to support an ongoing work program of data improvements.

The ABS has implemented a program of three yearly Indigenous household surveys with sample sizes designed to support the production of reliable State and Territory level data, so every three years, some health status and health risk factors are measured. Every six years, and in parallel with the National Health Survey, more detailed Indigenous health status information is collected, together with health service use, health actions, health-related aspects of lifestyle and other health risks. This also enables Indigenous to non-Indigenous comparisons for relevant variables. Other health-related surveys, which may include an Indigenous identifier, do not necessarily provide reliable data on Indigenous people because of small sample size, limited geographic coverage or survey design.

Experimental estimates of the Indigenous population are re-based by the ABS every five years following availability of new Census data. Therefore, revisions may be required to various rates and rate ratios used in previous editions of the report where

those rates data are to be carried forward in new reports. The Indigenous population estimates and projections are re-based for this Report.

In July 2009, COAG endorsed a \$46.4 million package of Indigenous data development over 4 years as part of *the Integrated Strategy for Closing the Gap in Indigenous Disadvantage*.

Health risk factors

There are a number of behaviours that are risks to health outcomes, for example, dietary habits and exercise, or other factors such as high body mass, smoking, and alcohol consumption. The National Health Survey 2007-08 collected data on these risk factors (ABS 2009b), which are presented in this section. Selected health outcomes such as life expectancy and mortality are presented in the next section. Health services are concerned with promoting, restoring and maintaining a healthy society. An important part of this activity is reducing health risk factors through activities that raise awareness of health issues to reduce the risk and onset of illness and injury. Smoking has been identified as a cause of lung cancer and a range of other chronic diseases. Nationally, the age standardised rate of lung cancer was 43.3 new cases per 100 000 people in 2007. Bowel cancer, which has been linked to diet, occurred at a rate of 62.4 new cases per 100 000 people in 2007 (tables EA.37 and EA.38). Other cancers such as melanoma are also preventable. The incidence of these cancers for 2007, along with breast and cervical cancer, are reported in tables EA.37–39.

Body mass

Being overweight or obese increases the risk of an individual developing, among other things, heart disease, stroke and Type 2 diabetes. The National Health Survey 2007-08 reported measured Body Mass Index (BMI). BMI is calculated as weight (kg) divided by the square of height (m). BMI values are grouped according to World Health Organization (WHO) and National Health and Medical Research Council (NHMRC) guidelines. Among adults, a BMI of less than 18.5 is considered underweight, a BMI of 18.5 to less than 25 is considered normal weight, a BMI of 25 to less than 30 is considered overweight and a BMI of 30 and over is considered to be obese (WHO 2000; NHMRC 2003).

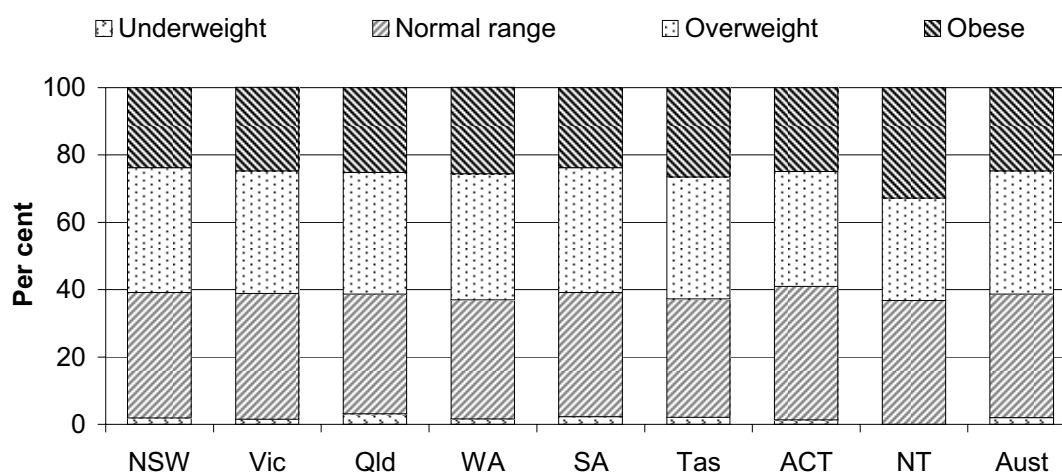
Over a third of Australians' measured BMI was in the overweight range and almost a quarter were obese in 2007-08 (figure E.11). The percentage of people who were obese tended to be higher in remote (35.0 per cent) and outer regional areas (31.3 per cent), than in major cities (22.5 per cent) and inner regional areas

(27.6 per cent) (table EA.25). RSEs and 95 per cent confidence intervals for rates of obesity for adults and children, by remoteness, in 2007-08 are presented in table EA.26.

The percentage of people who were obese tended to be higher in older age groups, peaking at age 70–74 for males (34.2 per cent) and at age 55–64 for females (33.4 per cent). There was a slightly higher percentage of obese males (25.6 per cent) than females (24.0 per cent) (table EA.27). RSEs and 95 per cent confidence intervals for rates of obesity for adults and children, by sex and age, in 2007-08 are presented in table EA.28.

Nationally, there were almost twice as many obese Indigenous adults (33.6 per cent) as non-Indigenous adults (17.7 per cent) (table EA.29). RSEs and 95 per cent confidence intervals for the proportion of adults and children in BMI categories, in 2007-08 are presented in table EA.31.

Figure E.11 Proportion of adults in BMI categories, 2007-08^{a, b, c, d}



^a Adults are defined as persons aged 18 years and over. Children are defined as persons aged 5–17 years.
^b Obesity for adults is defined as BMI equal to or greater than 30. Obesity for children is defined as BMI (appropriate for age and sex) that is likely to be 30 or more at age 18 years. ^c Measured persons only.
^d Rates are age standardised by State and Territory, to the 2001 Estimated Resident Population (5 year ranges from 18 for adults, selected ranges from 5–17 for children).

Source: ABS (unpublished), *National Health Survey 2007-08*; table EA.30.

Diet and exercise are also important behaviours that can reduce health risks and improve health outcomes. The NHMRC Australian dietary guidelines recommend a minimum of two serves of fruit per day for adults and five serves of vegetables (NHMRC 2003). A serve of fruit is approximately 150 grams of fresh fruit or 50 grams of dried fruit while a serve of vegetables is approximately 75 grams. Around half of Australians surveyed in the National Health Survey were consuming

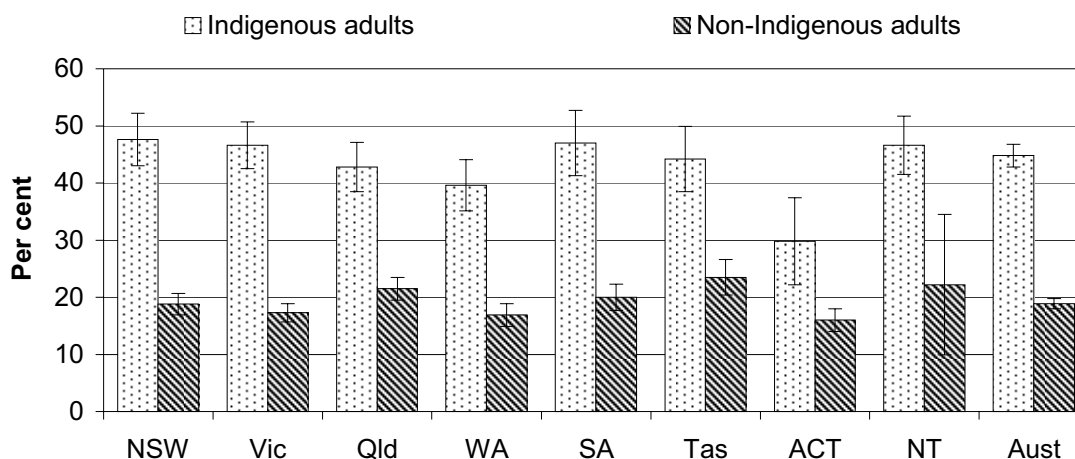
the recommended two or more serves of fruit per day in 2007-08 and only 8.8 per cent were consuming the recommended five or more serves of vegetables per day. Over a third of all Australians surveyed in the National Health Survey were sedentary in the two weeks prior to interview in 2007-08, with a further 36.9 per cent undertaking a low level of exercise, 21.6 per cent a moderate level of exercise and 6.2 per cent a high level of exercise (NHMRC 2003).

Smoking

Smoking is an important risk factor for heart disease, stroke and lung cancer. These were the three leading causes of death in Australia in 2007 (ABS 2010a). Smoking is responsible for around 80 per cent of all lung cancer deaths and 20 per cent of all cancer deaths (DoHA 2009).

Daily smokers accounted for 19.1 per cent of the population in 2007-08. Nationally, Indigenous people had higher age standardised rates of daily smoking (44.8 per cent) than non-Indigenous people (18.9 per cent). There were some variations in the age standardised rates of smoking among the jurisdictions (figure E.12 and table EA.33). Daily smokers accounted for 27.3 per cent of the population in remote geographical areas, gradually decreasing as remoteness of residence decreases, accounting for 25.7 per cent of the population in outer regional areas, 20.1 per cent in inner regional areas and 17.6 per cent in major cities (table EA.32).

Figure E.12 Proportion of adults who are daily smokers, by Indigenous status, 2007-08^{a, b, c, d}



^a Rates are age standardised by State and Territory, to the 2001 Estimated Resident Population (10 year ranges from 18–55 years and over). ^b Data for Indigenous people are based on the ABS *National Aboriginal and Torres Strait Islander Social Survey, 2008*. ^c Data for non-Indigenous people are based on the ABS *National Health Survey, 2007-08*. ^d Estimates with RSEs between 25 per cent and 50 per cent should be used with caution. Estimates with RSEs greater than 50 per cent are considered too unreliable for general use.

Source: ABS (unpublished), *National Health Survey 2007-08*; table EA.33.

Alcohol consumption

Excessive long term alcohol consumption increases the risk of heart disease, stroke, liver cirrhosis and some types of cancers. Further, it can contribute to injury and death through accidents, violence, suicide and homicide and also to financial problems, family breakdown, child abuse and neglect.

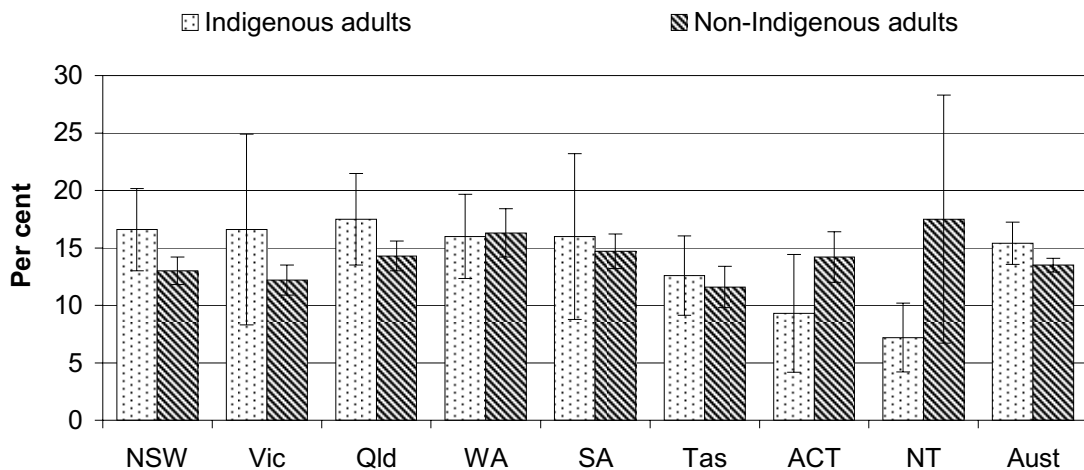
In the National Health Survey 2007-08 the ABS derived long term risk levels from the average daily alcohol consumption by people aged 15 years and over based on the most recent three drinking days in the week prior to interview (ABS 2009b). The ABS used the NHMRC Australian alcohol guidelines of 2001 which defined risky alcohol consumption as more than 50 millilitres and up to 75 millilitres per day for males and more than 25 millilitres and up to 50 millilitres per day for females. High risk consumption was defined as more than 75 millilitres per day for males and 50 millilitres per day for females (NHMRC 2001). The NHMRC has since developed new guidelines. These include, for healthy men and women, drinking no more than two standard drinks on any day. This reduces the lifetime risk of harm from alcohol-related disease or injury (NHMRC 2009).

Nationally, 13.1 per cent of Australian adults were at risk of long term harm from alcohol in 2007-08. The age standardised rates varied among jurisdictions

(table EA.34). Nationally, the age standardised proportion of adults at risk of long term harm from alcohol was higher for Indigenous people (15.4 per cent) than for non-Indigenous people (13.5 per cent) in 2004-05. There were some variations in the age standardised rates for proportion of Indigenous adults at risk of long term harm from alcohol among jurisdictions (figure E.13 and table EA.36).

Adults who are at risk of long term harm from alcohol accounted for 26.0 per cent of the population in remote geographical areas, and this percentage gradually decreased as remoteness of residence decreased in 2007-08. Adults who are at risk of long term harm from alcohol accounted for 15.8 per cent of the population in outer regional areas, 14.9 per cent of the population in inner regional areas and 11.8 per cent in major cities (table EA.35).

Figure E.13 Proportion of adults at risk of long term harm from alcohol, by Indigenous status, 2004-05^{a, b, c, d}



^a Rates are age standardised by State and Territory, to the 2001 Estimated Resident Population (10 year ranges from 0). ^b Risky/high risk alcohol consumption in the long term. ^c Estimates with RSEs between 25 per cent and 50 per cent should be used with caution. Estimates with RSEs greater than 50 per cent are considered too unreliable for general use. ^d The ACT Indigenous estimate should be treated with caution.

Source: ABS (unpublished) *National Aboriginal and Torres Strait Islander Social Survey*, 2008; ABS (unpublished) *National Health Survey*, 2007-08; table EA.36.

Framework for measuring the performance of the health system

Government involvement in health services is predicated on the desire to improve the health of all Australians and to ensure equity of access (box E.2). Governments provide a variety of services in different settings to fulfil these objectives.

Measuring the equity, effectiveness and efficiency of Australia's health system is a complex task. It must account for the performance of a range of services (such as prevention and medical intervention) and service providers (such as community health centres, GPs and public hospitals), and account for the overall outcomes generated by the health system. The appropriate mix of services — including the prevention of illness and injury, and medical treatment (prevention versus medical intervention) — and the appropriate mix of service delivery mechanisms (community-based versus hospital-based) play an important role in determining outcomes. Other relevant factors are external to the health system, such as the socioeconomic and demographic characteristics of the population, available infrastructure and the environment.

Box E.2 Overall objectives of the health system

Government involvement in the health system is aimed at efficiently and effectively protecting and restoring the health of the community by:

- preventing or detecting illness through the provision of services that can achieve improved health outcomes at relatively low cost
- caring for ill people through the use of appropriate health and medical intervention services
- providing appropriate health care services that recognise cultural differences among people
- providing equitable access to these services
- achieving equity in terms of health outcomes.

Primary prevention strategies are implemented before the diagnosis of an illness and generally aim to:

- reduce a person's risk of getting a disease or illness by increasing protective factors
- delay the onset of illness.

Medical intervention strategies are implemented after a diagnosis.

The former National Health Performance Committee developed the National Health Performance Framework to guide the reporting and measurement of health service performance in Australia. A number of groups involved in health performance indicator development have adopted this framework for use within specific project areas and in publications. The National Health Performance Framework was reviewed by the National Health Performance Committee and a revised framework was agreed by the National Health Information Standards and Status Committee in 2009.

In the 2004 Report, the Steering Committee sought to align the general Review framework with the National Health Performance Framework as far as possible, for application to government health services, and has again sought to align with the revised National Health Performance Framework for this Report. Complete alignment was not possible, given the different terms of reference of the two committees. The performance framework for health services in this Report thus reflects both the general Review framework and the National Health Performance Framework. It differs from the general Review framework (see chapter 1) in two respects. First, it includes three subdimensions of quality — safety, responsiveness and continuity — and, second, it includes an extra dimension of efficiency — sustainability (figure E.14). These additions are intended to address the following key performance dimensions of the health system in the National Health Performance Framework that were not explicitly covered in the general Review framework:

- *safety*: the avoidance, or reduction to acceptable levels, of actual or potential harm from health care services, management or environments, and the prevention or minimisation of adverse events associated with health care delivery
- *responsiveness*: the provision of services that are client oriented and respectful of clients' dignity, autonomy, confidentiality, amenity, choices, and social and cultural needs
- *continuity*: the provision of uninterrupted, timely, coordinated healthcare interventions and actions across programs, practitioners and organisations
- *sustainability*: the capacity to provide infrastructure (such as workforce, facilities and equipment), be innovative and respond to emerging needs (NHPC 2001).

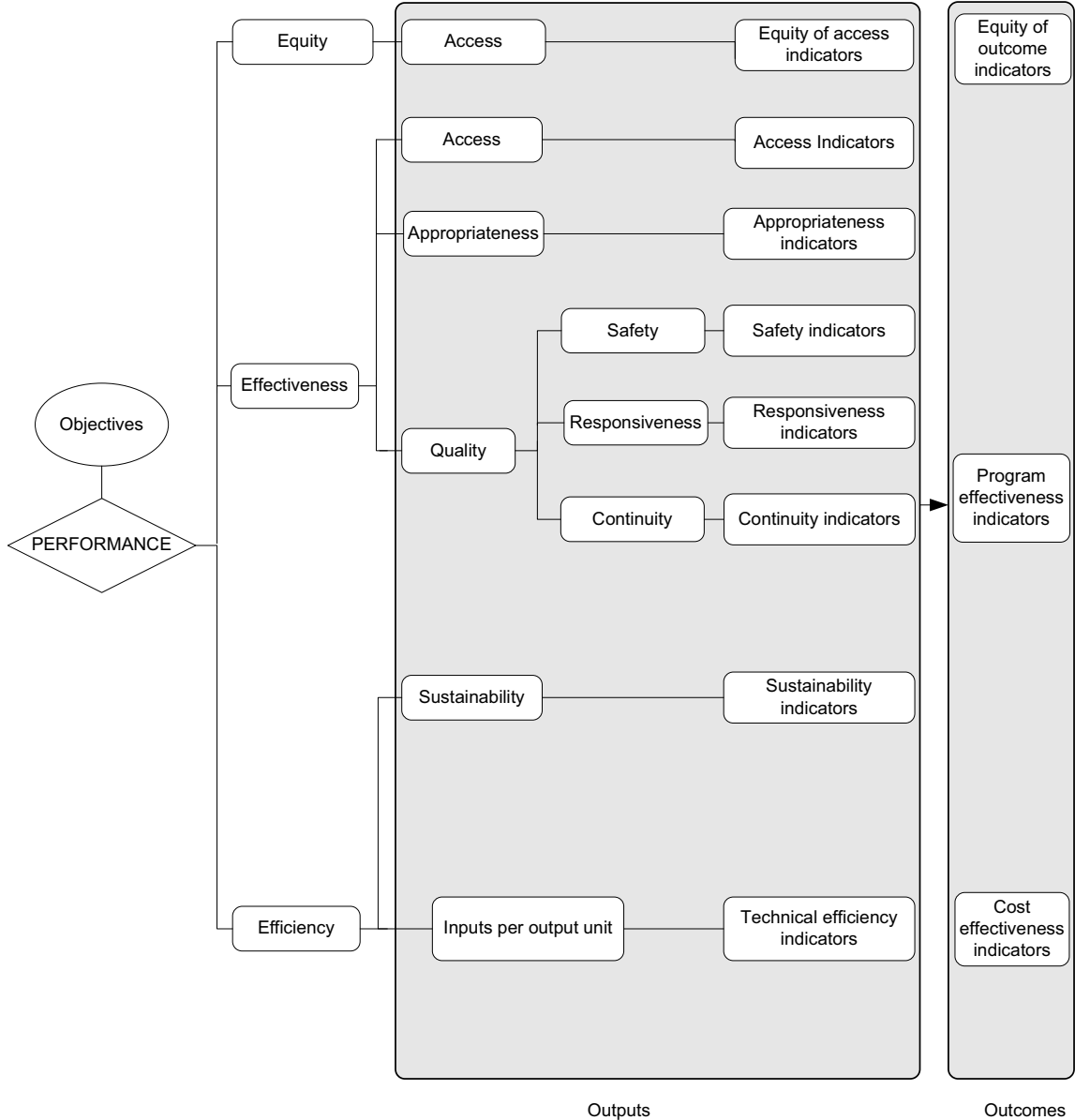
Alignment with the revised National Health Performance Framework this year has meant that when compared to previous reports, the capability dimension is no longer included in the framework and the sustainability dimension is now reported under efficiency rather than effectiveness.

Other aspects of the Steering Committee's framework of performance indicators are defined in chapter 1. The Steering Committee has applied this performance framework to health services in two ways.

- It has developed detailed performance indicator frameworks for public hospitals (chapter 10) and primary and community health services (chapter 11).
- It has developed specific frameworks to examine the appropriate mix of services and service delivery mechanisms for two health management issues: breast cancer and mental health (chapter 12).

The Report’s statistical appendix contains data that may assist in interpreting the performance indicators presented in this chapter. These data cover a range of demographic and geographic characteristics, including age profile, geographic distribution of the population, income levels, education levels, tenure of dwellings and cultural heritage (including Indigenous and ethnic status) (appendix A).

Figure E.14 Performance indicator framework for health services



Selected indicators of health outcomes

It is difficult to isolate the effect of health care services on the general health of the population. Socioeconomic factors (such as residential location, income levels and employment rates) and the provision of non-health care government services (such as clean water, sewerage, nutrition, education and public housing) each contribute to overall health outcomes. The outcomes and effectiveness of health services are also influenced by population factors external to governments' control, including geographic dispersion, age and ethnicity profiles, and socioeconomic status. Appendix A summarises some of the demographic and socioeconomic factors that can influence health outcomes and government expenditure.

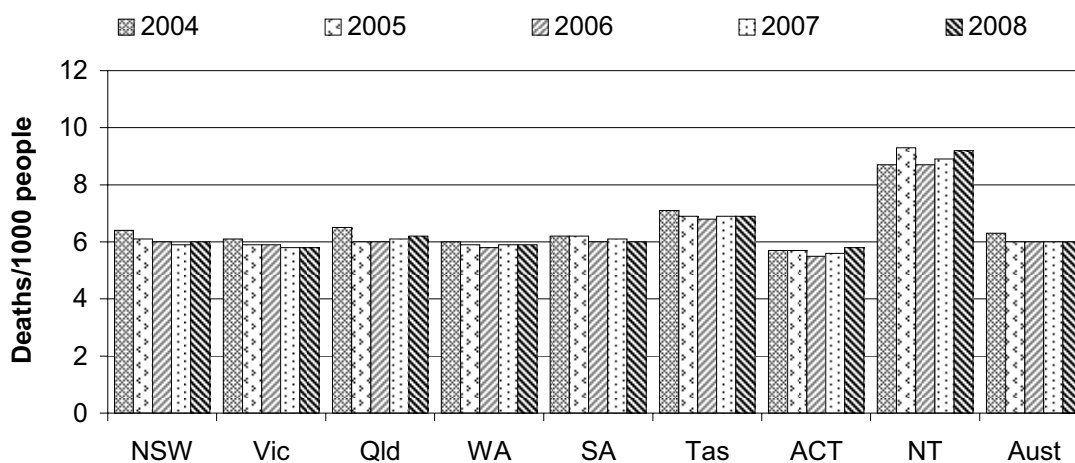
Data on health outcomes presented in this preface include mortality rates (for infants and all people), causes of death, life expectancy at birth, median age at death and birthweight. Where possible, data are presented for Indigenous people as well as the Australian population as a whole.

Mortality rates

Most components of the health system can influence mortality rates, although there may be a delay of decades between the action and the effect. A public health campaign to reduce smoking by young people, for example, may reduce premature deaths due to smoking-related conditions some years in the future. Factors external to the health system also have a strong influence on mortality rates.

There were 143 900 deaths in Australia in 2008 (ABS 2009a), which translated into an age standardised mortality rate of 6.0 deaths per 1000 people (figure E.15). Death rates over the last 20 years have declined for all states and territories (ABS 2009a).

Figure E.15 Mortality rates, age standardised^{a, b, c, d}



^a Deaths are based on year of registration of death. ^b Deaths per 1000 standard population. Standardised death rates use total persons in the 2001 Australian population as the standard population. ^c Death rates data for 2007 have been revised. ^d Australian totals includes all states and territories.

Source: ABS (2009) *Deaths 2008*, Australia, Cat. no. 3302.0, AusInfo, Canberra; table EA.40.

Indigenous mortality rates

Data on Indigenous mortality are collected through State and Territory death registrations. The completeness of identification of Indigenous Australians in these collections varies significantly across states and territories so care is required when making comparisons.

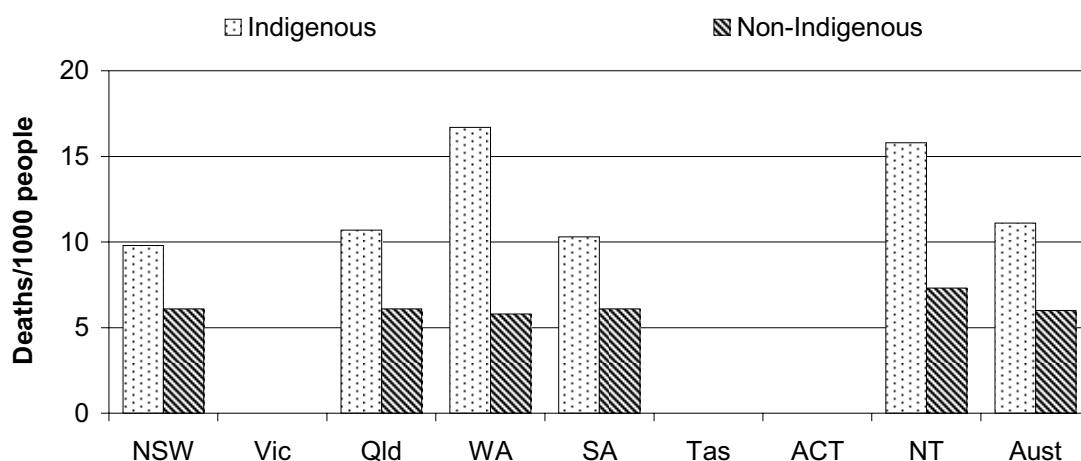
Due to the relatively small number of Indigenous deaths and the consequent volatility in annual mortality rates, data are presented for the five year period 2004–2008. To improve the comparability of age-related mortality rates, indirect age standardisation methods have been used for both the Indigenous and total population rates.

NSW, Queensland, WA, SA and the NT are currently generally considered to have the best coverage of death registrations for Indigenous people (ABS 2009c).⁴ For these five jurisdictions combined, the overall rates of mortality for Indigenous people were nearly twice as high as mortality rates for non-Indigenous people based on data for 2004–2008 (figure E.16 and table EA.40). Due to identification

⁴ The term ‘coverage’ refers to the number of Indigenous deaths registered as a percentage of the number of expected deaths based on experimental Indigenous population estimates and projections from the 2006 Census.

completeness issues, mortality rates presented here are likely to be under-estimates of the true mortality of Indigenous Australians (ABS and AIHW 2008).

Figure E.16 Mortality rates, age standardised, by Indigenous status, five year average, 2004–2008^{a, b, c, d}



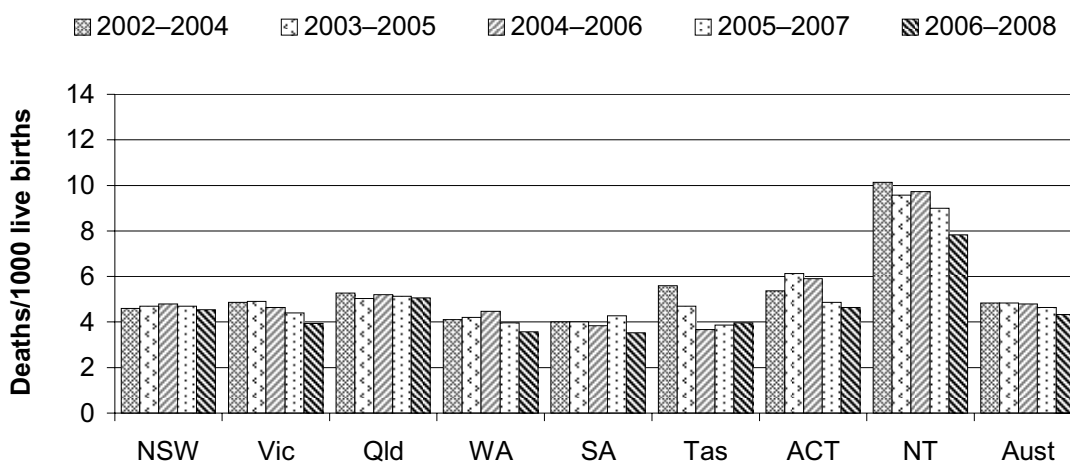
^a Deaths are based on year of registration of death. ^b Deaths per 1000 standard population. Standardised death rates use total persons in the 2001 Australian population as the standard population. ^c The unusually high Indigenous mortality rate for WA in 2008 is under investigation by the ABS. ^d Calculations of rates for the Indigenous population are based on *ABS Experimental Projections, Aboriginal and Torres Strait Islander Australians 1991 to 2009* (ABS Cat. no. 3238.0, low series, 2001 base). There are no comparable population data for the non-Indigenous population. Calculations of rates for comparison with the Indigenous population are derived by subtracting Indigenous population projections from total Estimated Resident Population and should be used with care, as these data include deaths and population units for which Indigenous status were not stated. ERP used in calculations are final ERP based on 2006 Census.

Source: ABS (unpublished) *Deaths Australia, 2008*; table EA.40.

Infant and child mortality rates

The infant mortality rate is defined as the number of deaths of children under 1 year of age in a calendar year per 1000 live births in the same year. Infant mortality rates are presented as an average over three years to reduce the volatility inherent in the annual rates due to small numbers of deaths and annual fluctuations. The infant mortality rate in Australia declined from an average of 4.8 deaths per 1000 live births over the period 2002–2004 to 4.3 deaths per 1000 live births over the period 2006–2008 (figure E.17). For the period 2007–2009, the infant mortality rate was an average of 4.2 deaths per 1000 live births (table EA.42).

Figure E.17 Infant mortality rate, three year average^{a, b}



^a Infant deaths per 1000 live births. ^b Data for Australia include all states and territories.

Source: ABS (2009) *Deaths Australia, 2008, Australia*, Cat. no. 3302.0, Canberra; table EA.41.

The child mortality rate is defined as the number of deaths of children between one and four years of age in a calendar year per 100 000 of the population. Child mortality rates are presented as an average over three years to reduce the volatility inherent in the annual rates due to small numbers and annual fluctuations. The Australian child mortality rate was 21.0 deaths per 100 000 of the population in 2007–2009. The mortality rate for infants and children combined (those aged 0 to 4 years) was 105.9 deaths per 100 000 of the population in 2007–2009 (table EA.42).

Indigenous infant and child mortality rates

For WA, SA and the NT, longer-term trends suggest that the mortality rate for Indigenous infants decreased by 47 per cent between 1991 and 2006 (ABS 2009a). Despite this significant improvement, infant mortality rates for Indigenous children are still markedly higher than for non-Indigenous children in Australia.

For the period 2005–2009, the average infant mortality rate for Indigenous children was higher (8.9 deaths per 1000 live births) than for non-Indigenous children (4.2 deaths per 1000 live births) (table EA.43). For the same period, the average child mortality rate for Indigenous children was also higher (56.1 deaths per 100 000 of the population) than for non-Indigenous children (20.3 deaths per 100 000 of the population) (table EA.44). The combined infant and child average child mortality rate for Indigenous children was 234.7 deaths per 100 000

of the population compared to 103.7 deaths per 100 000 of the population for non-Indigenous children (table EA.45).

Major causes of death

The most common causes of death among Australians in 2008 were: diseases of the circulatory system (including heart disease, heart attack and stroke), cancers and diseases of the respiratory system (including influenza, pneumonia and chronic lower respiratory diseases) (tables E.5 and EA.46). In 2008, malignant neoplasms (cancers) were the underlying cause of death in 30 per cent of all registered deaths and ischaemic heart disease was the underlying cause in a further 16 per cent of deaths (ABS 2010a).

Table E.5 Age standardised mortality rates by major cause of death (deaths per 100 000 persons), 2008^{a, b}

	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Aust</i>
Certain infectious and parasitic diseases	10.3	6.3	6.8	6.5	8.7	6.1	8.2	28.2	8.2
Neoplasms	178.0	182.3	188.5	175.6	184.5	205.7	167.8	229.6	182.1
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	1.9	2.2	1.7	2.8	2.7	2.0	1.4	1.0	2.1
Endocrine, nutritional and metabolic diseases	21.4	25.9	26.4	26.2	24.4	32.4	22.4	83.5	24.7
Mental and behavioural disorders	25.4	26.6	22.4	25.0	25.9	32.8	29.5	42.9	25.5
Diseases of the nervous system	22.2	25.3	24.0	29.9	27.8	26.9	34.7	24.9	24.8
Diseases of the eye and adnexa	–	–	–	0.1	0.1	–	–	–	0.1
Diseases of the ear and mastoid process	–	–	–	–	–	–	–	–	–
Diseases of the circulatory system	205.2	185.3	207.2	183.7	190.3	221.5	186.9	214.9	197.6
Diseases of the respiratory system	48.0	45.1	47.5	43.0	45.1	57.5	35.5	88.4	46.8
Diseases of the digestive system	20.5	20.5	20.4	21.2	19.9	24.7	19.6	40.9	20.7
Diseases of the skin and subcutaneous tissue	2.1	1.3	1.3	1.6	1.3	1.3	1.1	2.9	1.6
Diseases of the musculoskeletal system and connective tissue	4.8	4.4	4.7	5.1	4.1	8.0	9.8	8.2	4.8

(Continued on next page)

Table E.5 (Continued)

	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Aust</i>
Diseases of the genitourinary system	13.8	12.6	13.4	11.8	14.9	12.3	14.4	38.2	13.5
Pregnancy, childbirth and the puerperium	–	–	0.1	–	–	–	–	–	–
Certain conditions originating in the perinatal period	3.2	2.3	3.1	1.4	2.0	2.1	5.6	4.4	2.7
Congenital malformations, deformations and chromosomal abnormalities	2.8	2.7	3.4	2.1	2.6	2.0	1.1	2.6	2.8
Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified	5.3	3.3	9.2	5.1	3.2	3.3	3.9	8.2	5.4
External causes of morbidity and mortality	34.9	37.3	41.0	47.0	39.5	49.3	37.3	100.1	39.2
Total	600.1	583.5	621.1	588.3	596.9	688.0	579.2	919.3	602.5

^a Age standardised to the Australian population as at 30 June 2001. ^b Australian total includes 'Other territories'. – Nil or rounded to zero.

Source: ABS (2010) *Causes of Death Australia, 2008*, Cat. no. 3303.0, Canberra; table EA.46.

Causes of death for Indigenous people

In the jurisdictions for which age standardised death rates are available by Indigenous status (NSW, Queensland, WA, SA and the NT), death rates were significantly higher for Indigenous Australians than for non-Indigenous Australians in 2004–08. In particular, Indigenous people died: from endocrine, metabolic and nutritional disorders at a rate of up to 6.3 times that for non-Indigenous people; from kidney diseases at a rate of up to 5.1 times that for non-Indigenous people; from digestive diseases at a rate of up to 4.7 times that for non-Indigenous people; and from infectious and parasitic diseases at a rate of 3.2 times that for non-Indigenous people (tables E.6 and EA.47).

Table E.6 Age standardised mortality rate ratios of Indigenous to non-Indigenous people by major cause of death, 2004–2008^{a, b, c, d, e, f}

	<i>NSW</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>NT</i>	<i>Total</i> ^g
Circulatory diseases	2.0	2.2	3.7	2.6	3.9	2.5
Neoplasms (cancer)	1.2	1.5	1.9	1.2	1.7	1.5
External causes of morbidity and mortality	1.6	2.0	3.7	3.1	2.7	2.6
Endocrine, metabolic and nutritional disorders	3.0	6.6	9.3	4.5	7.4	6.3
Respiratory diseases	2.2	2.2	4.7	2.7	4.2	3.0
Digestive diseases	3.3	3.8	7.1	4.0	5.9	4.7
Kidney Diseases	2.7	4.4	6.8	4.0	11.3	5.1
Conditions originating in the perinatal period	1.5	2.0	3.1	2.6	3.1	2.1
Infectious and parasitic diseases	1.9	3.3	5.1	2.4	4.4	3.2
Nervous system diseases	1.2	1.1	2.4	2.2	3.1	1.6
Other causes ^h	1.6	1.9	4.4	1.7	3.0	2.3
All causes	1.7	2.2	3.6	2.3	3.4	2.5

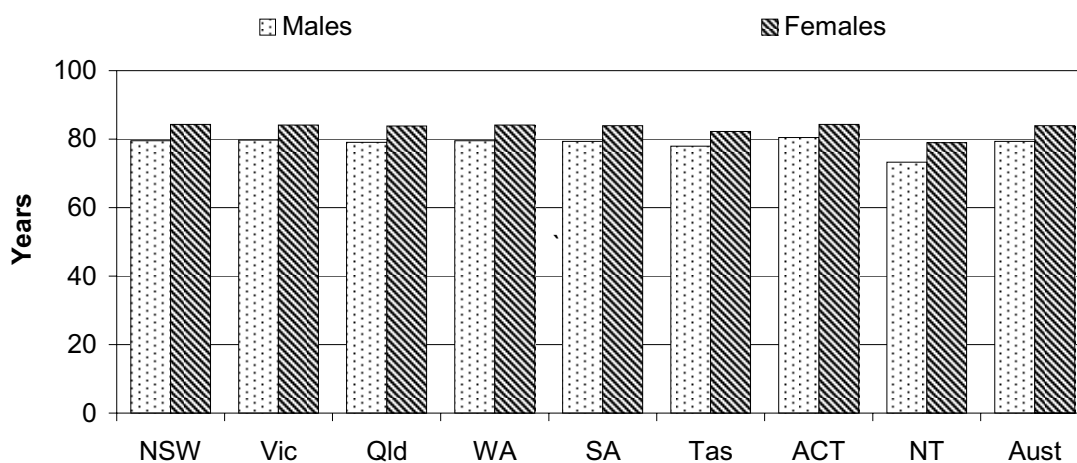
^a Age standardised to the Australian population as at 30 June 2001. ^b Rate ratio is the crude Indigenous rate divided by the non-Indigenous rate. ^c Although most deaths of Indigenous people are registered, it is likely that some are not accurately identified as Indigenous. Therefore, these data are likely to underestimate the Indigenous 'all causes' mortality rate. ^d Data are reported individually by jurisdiction of residence for NSW, Queensland, WA, SA and the NT only. These five states and territories are considered to have acceptable levels of Indigenous identification in mortality data. ^e Data are presented in five-year groupings due to the volatility of small numbers each year. ^f Non-Indigenous estimates are available for census years only. In the intervening years, Indigenous population figures are derived from assumptions about past and future levels of fertility, mortality and migration. In the absence of non-Indigenous population figures for these years, it is possible to derive denominators for calculating non-Indigenous rates by subtracting the Indigenous population from the total population. Such figures have a degree of uncertainty and should be used with caution, particularly as the time from the base year of the projection series increases. ^g Total includes only those five states and territories of residence that are considered to have acceptable levels of Indigenous identification in mortality data (NSW, Queensland, WA, SA and the NT). ^h 'Other causes' consist of all conditions excluding the selected causes displayed in the table.

Source: ABS (unpublished) *Causes of Death Australia, 2008*, Cat. No. 3301.0; table EA.47.

Life expectancy

The life expectancy of Australians improved dramatically during the twentieth century and so far during the twenty-first century. The average life expectancy at birth in the period 1901–1910 was 55.2 years for males and 58.8 years for females (ABS 2009a). It has risen steadily in each decade since, reaching 79.3 years for males and 83.9 years for females in 2007–2009 (figure E.18).

Figure E.18 All Australians average life expectancy at birth, 2007–2009^a



^a Figures for Australia include 'other territories'.

Source: ABS (unpublished) *Deaths, Australia*, 2009, Cat. no. 3302.0, Canberra; table EA.48.

Indigenous life expectancy

The life expectancies of Indigenous Australians are considerably lower than those of non-Indigenous Australians. ABS experimental estimates indicate a life expectancy at birth of 67.2 years for Indigenous males and 72.9 years for Indigenous females born from 2005 to 2007 (figure E.19 and table EA.49). In the same time period, life expectancy at birth for non-Indigenous males was 78.7 and for non-Indigenous females was 82.6 years (figure E.19 and table EA.49).

Figure E.19 **Estimated life expectancies at birth, by Indigenous status and sex, 2005–2007 (years)^{a, b, c}**



^a Indigenous estimates of life expectancy are not available for Victoria, SA, Tasmania or the ACT due to the small number of Indigenous deaths in these jurisdictions. ^b Life tables are constructed separately for Males and Females. Life tables were not constructed for Persons, therefore life expectancy estimates for Persons are a weighted combination of Male and Female life expectancies. ^c Australian total includes all states and territories.

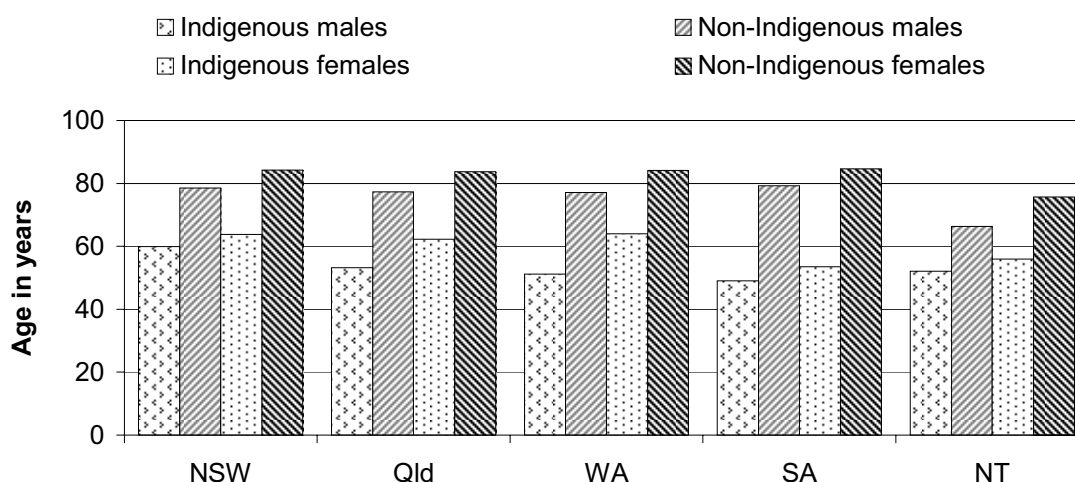
Source: ABS (2009), *Experimental Life Tables for Aboriginal and Torres Strait Islander Australians 2005–2007*, Australia, Cat. no. 3302, Canberra; table EA.49.

Median age at death

The median age at death represents the age at which exactly half the deaths registered (or occurring) in a given time period were deaths of people above that age and half were deaths below that age. Comparisons of the median age at death for Indigenous and non-Indigenous people are affected by different age structures in the populations and by differences in the extent of identification of Indigenous deaths across jurisdictions and across age groups. Identification of Indigenous status for infant deaths is high, but it falls significantly in older age groups. The median age of death for Indigenous people is, therefore, likely to be an underestimate.

For all Australian males and females in 2008, the median age at death was 78.1 and 84.0 years of age, respectively (figure E.20 and table EA.50). In the jurisdictions for which data were available for Indigenous people the median age at death for male Indigenous Australians was between 49.0 and 59.9 years of age. The median age at death for female Indigenous Australians was between 53.5 and 64.0 years of age (figure E.20 and table EA.50).

Figure E.20 Median age at death, by sex and Indigenous status, 2008^{a, b}



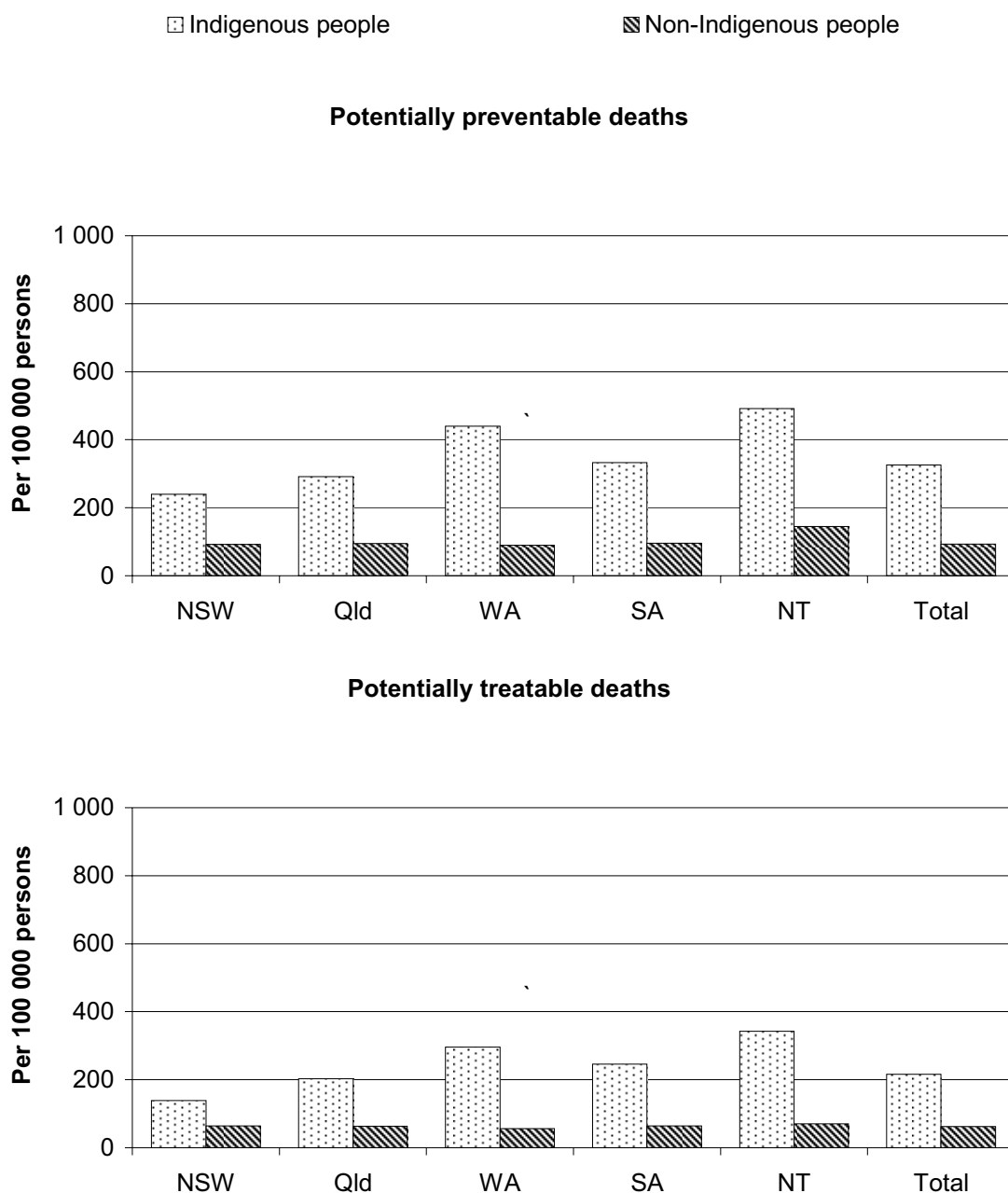
^a Median age at death by Indigenous status is not available for Victoria, Tasmania and the ACT due to data quality issues. ^b The accuracy of Indigenous mortality data is variable as a result of varying rates of coverage across jurisdictions and age groups, and of changes in the estimated Indigenous population caused by changing rates of identification in the Census and births data.

Source: ABS (2009) *Deaths Australia, 2008*, Cat. no. 3302.0, AusInfo, Canberra; table EA.50.

Potentially avoidable deaths

Potentially avoidable deaths comprise potentially preventable deaths (deaths amenable to screening and primary prevention, such as immunisation) and deaths from potentially treatable conditions (deaths amenable to therapeutic interventions). Avoidable deaths reflect the effectiveness of the current preventative health activities in the health sector. Indigenous people had significantly higher death rates from potentially avoidable, both preventable and treatable deaths. Nationally, for Indigenous people there were 541.6 potentially avoidable deaths per 100 000 people aged under 75 years over the period 2004–2008, comprising 325.9 potentially preventable deaths per 100 000 people and 215.6 treatable deaths per 100 000 people. Nationally, for non-Indigenous people there were 156.0 potentially avoidable deaths per 100 000 people aged under 75 years over the period 2004–2008, comprising 93.3 potentially preventable deaths per 100 000 people and 62.7 treatable deaths per 100 000 people (figure E.21 and table EA.52). Single year data are presented in table EA.51.

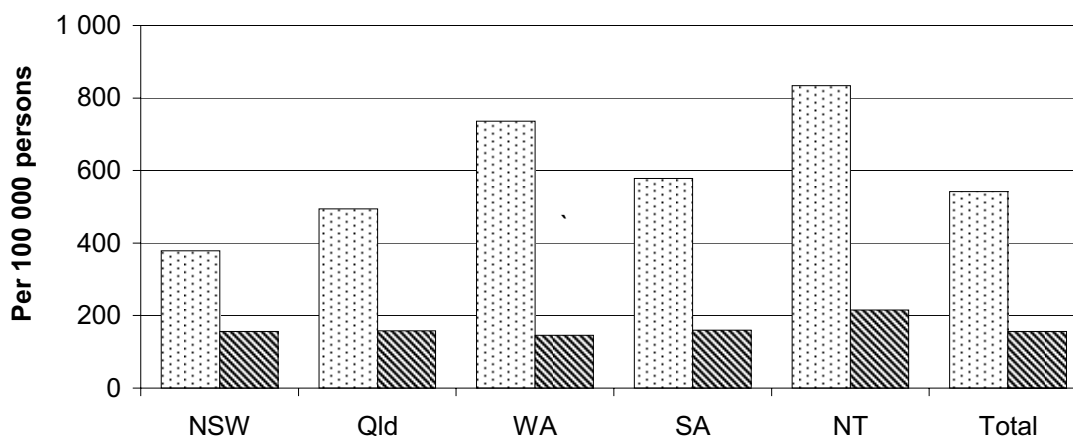
Figure E.21 **Age standardised mortality rates of potentially avoidable deaths, under 75 years, by Indigenous status, 2004–08^{a, b, c, d, e, f}**



(Continued on next page)

Figure E.21 (Continued)

All potentially avoidable deaths



^a Age standardised to the Australian population as at 30 June 2001. ^b Data are reported by jurisdiction of residence for NSW, Queensland, WA, SA and the NT only. These five states and territories are considered to have adequate levels of Indigenous identification in mortality data. ^c Data are presented in five-year groupings due to the volatility of small numbers each year. ^d Total includes only those five states and territories of residence that are considered to have acceptable levels of Indigenous identification in mortality data (NSW, Queensland, WA, SA and the NT). ^e Preventable deaths are those which are amenable to screening and primary prevention such as immunisation, and reflect the effectiveness of the current preventative health activities of the health sector. ^f Deaths from potentially treatable conditions are those which are amenable to therapeutic interventions, and reflect the safety and quality of the current treatment system.

Source: ABS (unpublished) *Causes of Deaths, Australia, 2008*, Cat. no. 3303.0; table EA.52.

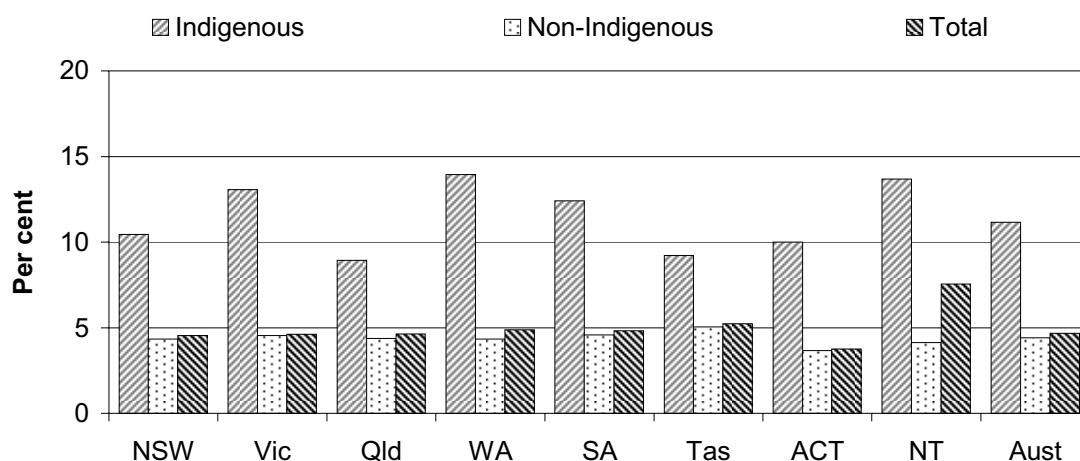
Birthweight of babies

The birthweight of a baby is an important indicator of its health status and future wellbeing. In 2008, 92.0 per cent of liveborn babies in Australia weighed between 2500 and 4499 grams (Laws and Sullivan 2010). The average birthweight for all live births was 3377 grams in 2008 (table EA.53). The average birthweight for liveborn babies of Indigenous mothers was 3196 grams in 2008 (table EA.54). This was 189 grams lighter than the average of 3385 grams for liveborn babies of non-Indigenous mothers (Laws and Sullivan 2010).

Babies' birthweight is defined as low if they weigh less than 2500 grams, very low if they weigh less than 1500 grams and extremely low if they weigh less than 1000 grams (Laws and Sullivan 2010). In 2008, 6.1 per cent of all liveborn babies in Australia weighed less than 2500 grams. This included 1.0 per cent of babies who weighed less than 1500 grams (table EA.53).

Among live babies born to Indigenous mothers in 2008, the proportion with low birthweight was over twice that of those born to non-Indigenous mothers (figure E.22). The number and proportion of live-born singleton babies of low birthweight for the period 2006–2008 are presented in table EA.56.

Figure E.22 Proportion of live-born singleton babies of low birthweight, by maternal Indigenous status, 2008^{a, b, c, d}



^a Low birthweight is defined as less than 2500 grams. ^b Disaggregation by State/Territory is by place of usual residence of the mother. ^c Data excludes Australian non-residents, residents of external territories and where State/Territory of residence was not stated. ^d Excludes stillbirths and multiple births. Births were included if they were at least 20 weeks gestation or at least 400 grams birthweight.

Source: AIHW (unpublished) National Perinatal Data Collection; table EA.55.

Future directions

The Steering Committee intends to replace this preface with a Health sector summary and continue to expand reporting on the characteristics of the Health sector. In particular, developments that span various health services, such as Indigenous health reporting, will be considered. Ongoing investigation of cross-cutting issues might allow improved reporting for health services as a whole.

Each chapter (public hospitals, primary and community health and health management issues) contains a service specific section on future directions in performance reporting. The aim of this section is to provide an insight into other related and overarching developments on reporting in the health sector.

Improving reporting on Indigenous health is a priority across all of the health chapters. This work is informed by the Aboriginal and Torres Strait Islander Health Performance Framework and by National Healthcare Agreement reporting.

COAG developments

Report on Government Services alignment with National Agreement reporting

Further alignment between the Report and NA indicators might occur in future reports as a result of developments in NA reporting.

Outcomes from review of Report on Government Services

COAG endorsed recommendations of a review of the Report in December 2009. Those recommendations implemented during 2010 are reflected in this Report.

Further recommendations will be reflected in future Reports, including implementation of Independent Reference Group and Steering Committee recommendations arising from the 'Review of the general performance indicator framework' and the 'Review of the performance indicators and their associated measures'. The 2012 Report and later editions will continue:

- lengthening time series data in attachment tables
- developing data quality information documents for performance indicators
- developing mini-case studies.

List of attachment tables

Attachment tables are identified in references throughout this preface by an 'EA' suffix (for example, table EA.3). Attachment tables are provided on the Review website (www.pc.gov.au/gsp). Users without access to the website can contact the Secretariat to obtain the attachment tables (see contact details on the inside front cover of the Report).

Table EA.1	Total health expenditure, by broad source of funds (2008-09 dollars)
Table EA.2	Government recurrent health expenditure, by area of expenditure (2008-09 dollars)
Table EA.3	Non-government recurrent health expenditure by area of expenditure (2008-09 dollars)
Table EA.4	Recurrent health expenditure, by source of funds and area of expenditure, 2008-09
Table EA.5	Total health expenditure per person (2008-09 dollars)
Table EA.6	Recurrent health expenditure per person, by source of funds, excluding high level residential aged care (2008-09 dollars)
Table EA.7	Total health price index
Table EA.8	Employed medical practitioners
Table EA.9	Employed nurses
Table EA.10	Net growth in health workforce, selected professions, 2007 to 2008
Table EA.11	Net growth in health workforce, by clinical/non-clinical status, 2007 to 2008 (per cent)
Table EA.12	Indigenous health workforce, by State/Territory, 2006
Table EA.13	Indigenous people in health workforce as a proportion of total health workforce, by age group and sex, 2006
Table EA.14	Proportion of the health workforce that is Indigenous, by occupation groupings, 2006
Table EA.15	Indigenous persons employed in selected health-related occupations, 2006
Table EA.16	Proportion of the health workforce that is Indigenous, by selected professions, 2008
Table EA.17	Proportion of people who accessed health services by health status, 2004-05
Table EA.18	RSEs and confidence intervals for the proportion of people who accessed health services by health status, 2004-05
Table EA.19	Proportion of people who accessed health services by health status, by Indigenous status, 2004-05
Table EA.20	RSEs and confidence intervals for the proportion of people who accessed health services by health status, by Indigenous status, 2004-05
Table EA.21	Proportion of people who accessed health services by health status, by remoteness of residence, 2004-05
Table EA.22	RSEs and 95 per cent confidence intervals for the proportion of people who accessed health services by health status, by remoteness of residence, 2004-05

Table EA.23	Proportion of people who accessed health services by health status, by SEIFA, 2004-05
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Table EA.25	Rates of obesity for adults and children, by remoteness, 2007-08
Table EA.26	RSEs and 95 per cent confidence intervals for rates of obesity for adults and children, by remoteness, 2007-08
Table EA.27	Rates of obesity for adults and children, by sex and age, 2007-08
Table EA.28	RSEs and 95 per cent confidence intervals for rates of obesity for adults and children, by sex and age, 2007-08
Table EA.29	Rates of obesity for adults and children, by Indigenous status, 2004-05
Table EA.30	Proportion of adults and children in BMI categories, 2007-08
Table EA.31	RSEs and 95 per cent confidence intervals for the proportion of adults and children in BMI categories, 2007-08
Table EA.32	Proportion of adults who are daily smokers, 2007-08
Table EA.33	Proportion of adults who are daily smokers, by Indigenous status, 2007-08
Table EA.34	Proportion of adults at risk of long term harm from alcohol, 2007-08
Table EA.35	Proportion of adults at risk of long term harm from alcohol, by remoteness, 2007-08
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EA Health preface — attachment

Data in this Report are examined by the Health Working Group, but have not been formally audited by the Secretariat. Unsourced information was obtained from the Australian, State and Territory governments.

This file is available in Adobe PDF format on the Review web page (www.pc.gov.au/gsp). Users without Internet access can contact the Secretariat to obtain these tables (see details on the inside front cover of the Report).

Data reported in the attachment tables are the most accurate available at the time of data collection. Historical data may have been updated since the last report.

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Table EA.1

Table EA.1 **Total health expenditure, by broad source of funds (2008-09 dollars)
(a), (b)**

	<i>Unit</i>	<i>Australian Government (c)</i>	<i>State, Territory and local governments</i>	<i>Total government</i>	<i>Non -government (c)</i>	<i>Total</i>
Expenditure						
1998-99	\$m	28 965	15 561	44 527	21 931	66 458
1999-2000	\$m	31 501	17 427	48 928	21 656	70 585
2000-01	\$m	33 680	17 673	51 353	24 115	75 468
2001-02	\$m	34 881	18 543	53 424	25 777	79 200
2002-03	\$m	36 429	20 625	57 054	26 585	83 640
2003-04	\$m	37 472	20 694	58 166	28 253	86 419
2004-05	\$m	39 943	22 513	62 456	29 446	91 902
2005-06	\$m	40 072	24 323	64 395	30 062	94 456
2006-07	\$m	41 791	26 145	67 936	32 059	99 995
2007-08	\$m	46 038	27 308	73 346	33 251	106 597
2008-09	\$m	48 733	29 802	78 535	34 267	112 802
Shares (d)						
1998-99	%	43.6	23.4	67.0	33.0	100.0
1999-2000	%	44.6	24.7	69.3	30.7	100.0
2000-01	%	44.6	23.4	68.0	32.0	100.0
2001-02	%	44.0	23.4	67.5	32.5	100.0
2002-03	%	43.6	24.7	68.2	31.8	100.0
2003-04	%	43.4	23.9	67.3	32.7	100.0
2004-05	%	43.5	24.5	68.0	32.0	100.0
2005-06	%	42.4	25.8	68.2	31.8	100.0
2006-07	%	41.8	26.1	67.9	32.1	100.0
2007-08	%	43.2	25.6	68.8	31.2	100.0
2008-09	%	43.2	26.4	69.6	30.4	100.0

(a) Constant price health expenditure for 1998-99 to 2008-09 is expressed in terms of 2008-09 prices.

(b) Components may not add to totals due to rounding.

(c) Funding of expenditure has been adjusted for non-specific tax expenditures.

(d) Data are derived.

Source: AIHW (unpublished) Health expenditure database.

Table EA.2

Table EA.2 Government recurrent health expenditure, by area of expenditure (2008-09 dollars) (a), (b), (c), (d)

Expenditure	Unit	Public hospitals (e)	Private hospitals	Medical services	Dental services (e)	Other health practitioners (f)	Medications	Other health (e), (g)	Total government recurrent expenditure
1998-99	\$m	18 178	1 376	10 144	671	373	4 245	6 587	41 574
1999-2000	\$m	18 564	1 885	10 707	859	432	4 749	8 004	45 199
2000-01	\$m	18 906	2 155	10 776	866	680	5 695	8 430	47 509
2001-02	\$m	19 775	2 238	11 244	931	707	5 934	8 708	49 537
2002-03	\$m	21 389	2 727	11 416	953	751	6 352	9 422	53 010
2003-04	\$m	22 527	2 771	11 715	980	816	6 742	9 542	55 069
2004-05	\$m	23 379	2 891	13 139	1 046	727	6 860	10 422	58 464
2005-06	\$m	25 788	2 843	13 307	1 058	755	6 705	11 227	61 684
2006-07	\$m	27 406	2 893	13 790	1 068	870	6 865	12 142	65 034
2007-08	\$m	29 437	3 156	14 755	1 260	1 072	7 305	13 678	70 664
2008-09	\$m	30 775	3 237	15 474	1 532	1 184	7 826	15 234	75 261
Shares (h)									
1998-99	%	43.7	3.3	24.4	1.6	0.9	10.2	15.8	100.0
1999-2000	%	41.1	4.2	23.7	1.9	1.0	10.5	17.7	100.0
2000-01	%	39.8	4.5	22.7	1.8	1.4	12.0	17.7	100.0
2001-02	%	39.9	4.5	22.7	1.9	1.4	12.0	17.6	100.0
2002-03	%	40.3	5.1	21.5	1.8	1.4	12.0	17.8	100.0
2003-04	%	40.9	5.0	21.3	1.8	1.5	12.2	17.3	100.0
2004-05	%	40.0	4.9	22.5	1.8	1.2	11.7	17.8	100.0
2005-06	%	41.8	4.6	21.6	1.7	1.2	10.9	18.2	100.0

Table EA.2

Table EA.2 Government recurrent health expenditure, by area of expenditure (2008-09 dollars) (a), (b), (c), (d)

	Unit	Public hospitals (e)	Private hospitals	Medical services	Dental services (e)	Other health practitioners (f)	Medications	Other health (e), (g)	Total government recurrent expenditure
2006-07	%	42.1	4.4	21.2	1.6	1.3	10.6	18.7	100.0
2007-08	%	41.7	4.5	20.9	1.8	1.5	10.3	19.4	100.0
2008-09	%	40.9	4.3	20.6	2.0	1.6	10.4	20.2	100.0

(a) Funding of expenditure has been adjusted for non-specific tax expenditure.

(b) Constant price health expenditure for 1998-99 to 2008-09 is expressed in terms of 2008-09 prices using the Implicit Price Deflator, constructed by AIHW, presented in table EA.7.

(c) Tables show funding provided by the Australian Government, State and Territory governments and local government authorities and by the major non-government sources of funding for health care. It does not show total expenditure on health goods and services by the different service provider sectors.

(d) Components may not add to totals due to rounding.

(e) Public hospitals (1998-99 to 2002-03) include any dental services, community health services, patient transport services, public health and health research undertaken by the hospital. Includes services provided off-site, such as hospital in the home, dialysis or other services. Public hospital services (2003-04 to 2008-09) excludes any dental services, community health services, patient transport services, public health and health research undertaken by the hospital. Can include services provided off the hospital site such as hospital in the home, dialysis or other services.

(f) Due to changes in methods, care must be taken comparing 2002-03 and 2003-04.

(g) Other health comprises patient transport services, community health, aids and appliances, other non-institutional health nec., administration and research.

(h) Data are derived.

Source: AIHW (unpublished) Health expenditure database.

Table EA.3

Table EA.3 Non-government recurrent health expenditure by area of expenditure (2008-09 dollars) (a), (b), (c), (d)

Expenditure	Unit	Public hospitals (e)	Private hospitals	Medical services	Dental services (e)	Other health practitioners (f)	Medications	Other health (e), (g)	Total non- government recurrent expenditure
1998-99	\$m	1 500	4 057	2 268	3 007	1 772	4 122	3 306	20 032
1999-2000	\$m	1 476	3 760	2 328	3 016	1 696	4 454	3 231	19 959
2000-01	\$m	1 618	3 700	2 440	3 603	1 785	4 845	4 192	22 182
2001-02	\$m	1 767	4 074	2 815	4 107	2 042	5 424	4 027	24 258
2002-03	\$m	1 662	3 966	3 175	4 283	2 239	5 132	4 270	24 724
2003-04	\$m	1 499	4 233	3 453	4 480	2 321	5 350	4 337	25 674
2004-05	\$m	1 667	4 282	3 466	4 713	2 448	5 799	4 449	26 825
2005-06	\$m	1 921	4 439	3 577	4 799	2 555	5 875	4 428	27 595
2006-07	\$m	2 103	4 643	3 868	4 987	2 577	6 417	4 584	29 180
2007-08	\$m	2 283	4 810	4 120	5 024	2 400	6 818	4 769	30 224
2008-09	\$m	2 647	5 117	4 346	5 183	2 243	7 381	4 924	31 840
Shares (h)									
1998-99	%	7.5	20.3	11.3	15.0	8.8	20.6	16.5	100.0
1999-2000	%	7.4	18.8	11.7	15.1	8.5	22.3	16.2	100.0
2000-01	%	7.3	16.7	11.0	16.2	8.0	21.8	18.9	100.0
2001-02	%	7.3	16.8	11.6	16.9	8.4	22.4	16.6	100.0
2002-03	%	6.7	16.0	12.8	17.3	9.1	20.8	17.3	100.0
2003-04	%	5.8	16.5	13.4	17.5	9.0	20.8	16.9	100.0
2004-05	%	6.2	16.0	12.9	17.6	9.1	21.6	16.6	100.0
2005-06	%	7.0	16.1	13.0	17.4	9.3	21.3	16.0	100.0

Table EA.3

Table EA.3 **Non-government recurrent health expenditure by area of expenditure (2008-09 dollars) (a), (b), (c), (d)**

Unit	Public hospitals (e)	Private hospitals	Medical services	Dental services (e)	Other health practitioners (f)	Medications	Other health (e), (g)	Total non- government recurrent expenditure
2006-07	%	7.2	15.9	13.3	17.1	8.8	22.0	15.7
2007-08	%	7.6	15.9	13.6	16.6	7.9	22.6	15.8
2008-09	%	8.3	16.1	13.6	16.3	7.0	23.2	15.5

(a) Total health funding has not been adjusted to include non-specific tax expenditure as funding by the Australian Government.

(b) Constant price health expenditure for 1998-99 to 2008-09 is expressed in terms of 2008-09 prices using the Implicit Price Deflator, constructed by AIHW, presented in table EA.7.

(c) Tables show funding provided by the Australian Government, State and Territory governments and local government authorities and by the major non-government sources of funding for health care. It does not show total expenditure on health goods and services by the different service provider sectors.

(d) Components may not add to totals due to rounding.

(e) Public hospitals (1998-99 to 2002-03) include any dental services, community health services, patient transport services, public health and health research undertaken by the hospital. Includes services provided off-site, such as hospital in the home, dialysis or other services. Public hospital services (2003-04 to 2008-09) excludes any dental services, community health services, patient transport services, public health and health research undertaken by the hospital. Can include services provided off the hospital site such as hospital in the home, dialysis or other services.

(f) Due to changes in methods, care must be taken comparing 2002-03 and 2003-04.

(g) Other health comprises patient transport services, community health, aids and appliances, other non-institutional health nec., administration and research.

(h) Data are derived.

Source: AIHW (unpublished) Health expenditure database.

Table EA.4

Table EA.4 Recurrent health expenditure, by source of funds and area of expenditure, 2008-09 (a), (b), (c), (d)

Area of expenditure	Unit	Government				Non-government				Total	
		Australian Government		State, Territory and local government	Total government	Private health insurance funds		Other (g) Individuals	Total non- government		
		Direct expenditure (e)	Health insurance premium rebates (f)			Total government	Individuals				
Expenditure											
<i>Institutional</i>											
Hospitals	\$m	13 663	2 019	15 681	18 331	34 012	4 902	1 336	1 526	7 764	41 776
Public hospital services (h)	\$m	12 535	255	12 791	17 985	30 775	620	951	1 076	2 647	33 422
Private hospitals	\$m	1 127	1 764	2 891	346	3 237	4 282	385	450	5 117	8 354
Patient transport services	\$m	207	59	266	1 554	1 819	147	334	89	569	2 389
Total institutional	\$m	13 869	2 078	15 947	19 884	35 831	5 048	1 670	1 615	8 333	44 165
<i>Non-institutional</i>											
Medical services	\$m	15 096	379	15 474	–	15 474	919	2 395	1 031	4 346	19 820
Dental services	\$m	481	426	907	625	1 532	1 034	4 129	20	5 183	6 715
State/territory provider	\$m	–	–	–	625	625	–	20	–	20	645
Private provider	\$m	481	426	907	–	907	1 034	4 109	20	5 163	6 070
Other health practitioners	\$m	978	206	1 184	–	1 184	500	1 431	311	2 243	3 426
Community health and other (i)	\$m	729	1	729	4 615	5 344	2	143	68	213	5 557
Public health	\$m	1 167	–	1 167	969	2 136	–	19	110	129	2 265
Medications	\$m	7 805	20	7 826	–	7 826	49	7 259	72	7 381	15 206
Benefit-paid medications	\$m	7 466	–	7 466	–	7 466	–	1 452	–	1 452	8 917
All other medications	\$m	340	20	360	–	360	49	5 807	72	5 929	6 289
Aids and appliances	\$m	368	150	518	–	518	364	2 337	49	2 750	3 268
Administration	\$m	1 262	382	1 644	394	2 038	929	1	34	963	3 001
Research	\$m	2 758	–	2 758	620	3 378	–	17	283	300	3 678

Table EA.4

Table EA.4 Recurrent health expenditure, by source of funds and area of expenditure, 2008-09 (a), (b), (c), (d)

Area of expenditure	Unit	Government					Non-government				Total
		Australian Government		State, Territory and local government	Private health insurance funds	Total government	Individuals	Other (g)	Total non- government		
		Direct expenditure (e)	Health insurance premium rebates (f)								
Total non-institutional	\$m	30 643	1 564	32 207	7 223	39 430	3 797	17 731	1 980	23 507	62 937
Total recurrent	\$m	44 512	3 642	48 154	27 107	75 261	8 845	19 401	3 595	31 840	107 101
Shares (j)											
<i>Institutional</i>											
Hospitals	%	32.7	4.8	37.5	43.9	81.4	11.7	3.2	3.7	18.6	100.0
Public hospital services	%	37.5	0.8	38.3	53.8	92.1	1.9	2.8	3.2	7.9	100.0
Private hospitals	%	13.5	21.1	34.6	4.1	38.7	51.3	4.6	5.4	61.3	100.0
Patient transport services	%	8.6	2.5	11.1	65.0	76.2	6.1	14.0	3.7	23.8	100.0
Total institutional	%	31.4	4.7	36.1	45.0	81.1	11.4	3.8	3.7	18.9	100.0
<i>Non-institutional</i>											
Medical services	%	76.2	1.9	78.1	—	78.1	4.6	12.1	5.2	21.9	100.0
Dental services	%	7.2	6.3	13.5	9.3	22.8	15.4	61.5	0.3	77.2	100.0
State/territory provider	%	—	—	—	96.9	96.9	—	3.1	—	3.1	100.0
Private provider	%	7.9	7.0	14.9	—	14.9	17.0	67.7	0.3	85.1	100.0
Other health practitioners	%	28.5	6.0	34.5	—	34.5	14.6	41.8	9.1	65.5	100.0
Community health and other	%	13.1	—	13.1	83.0	96.2	—	2.6	1.2	3.8	100.0
Public health	%	51.5	—	51.5	42.8	94.3	—	0.8	4.9	5.7	100.0
Medications	%	51.3	0.1	51.5	—	51.5	0.3	47.7	0.5	48.5	100.0
Benefit-paid medications	%	83.7	—	83.7	—	83.7	—	16.3	—	16.3	100.0
All other medications	%	5.4	0.3	5.7	—	5.7	0.8	92.3	1.1	94.3	100.0
Aids and appliances	%	11.3	4.6	15.8	—	15.8	11.1	71.5	1.5	84.2	100.0

Table EA.4

Table EA.4 Recurrent health expenditure, by source of funds and area of expenditure, 2008-09 (a), (b), (c), (d)

Area of expenditure	Unit	Government				Non-government			Total		
		Australian Government		State, Territory and local government	Private health insurance funds	Individuals	Other (g)	Total non- government			
		Direct expenditure	Health insurance premium rebates (f)							Total	Total
Administration	%	42.0	12.7	54.8	13.1	67.9	30.9	–	1.1	32.1	100.0
Research	%	75.0	–	75.0	16.9	91.8	–	0.5	7.7	8.2	100.0
Total non-institutional	%	48.7	2.5	51.2	11.5	62.7	6.0	28.2	3.1	37.3	100.0
Total recurrent	%	41.6	3.4	45.0	25.3	70.3	8.3	18.1	3.4	29.7	100.0

(a) Total health funding has not been adjusted to include non-specific tax expenditure as funding by the Australian Government.

(b) Constant price health expenditure is expressed in terms of 2007-08 prices using the Implicit Price Deflator, constructed by AIHW, presented in table EA.7.

(c) Tables show funding provided by the Australian Government, State and Territory governments and local government authorities and by the major non-government sources of funding for health care. They do not show total expenditure on health goods and services.

(d) Components may not add to totals due to rounding.

(e) 'Other' comprises Australian Government expenditure on capital consumption and health research not funded by the Department of Health and Aging (DoHA).

(f) Includes the 30-40 per cent rebate on health insurance premiums that can be claimed either directly from the Australian Government through the taxation system or it may involve a reduced premium being charged by the private health insurance fund.

(g) Expenditure on health goods and services by workers compensation and compulsory third-party motor vehicle insurers, as well as other sources of income (for example, rent, interest earned) for service providers.

(h) Public hospital services exclude certain services undertaken in hospitals. Can include services provided off-site, such as hospital in the home, dialysis or other services.

(i) 'Other' denotes 'other recurrent health services nec'.

(j) Data are derived.

– Nil or rounded to zero.

Source: AIHW (unpublished) Health expenditure database.

Table EA.5

Table EA.5 Total health expenditure per person (2008-09 dollars) (a), (b)

	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT (c)</i>	<i>NT</i>	<i>Aust</i>
2004-05	4 534	4 559	4 259	4 647	4 770	4 237	np	5 469	4 528
2005-06	4 598	4 638	4 367	4 654	4 667	4 557	np	5 777	4 598
2006-07	4 776	4 770	4 738	4 859	4 814	4 559	np	5 851	4 795
2007-08	5 012	4 813	5 061	5 139	5 371	4 898	np	6 255	5 033
2008-09	5 137	5 031	5 252	5 300	5 604	5 052	np	6 779	5 212

(a) Constant price health expenditure for 2004-05 to 2008-09 is expressed in terms of 2008-09 prices using the Implicit Price Deflator, constructed by AIHW, presented in table EA.7.

(b) Data are derived.

(c) ACT per person figures are not calculated, as the expenditure numbers for the ACT include substantial expenditures for NSW residents. Thus the ACT population is not the appropriate denominator.

np Not published.

Source: AIHW (unpublished) Health expenditure database; Australian Bureau of Statistics (ABS) (2009) *Australian Demographic Statistics*, Cat. no. 3101.0.

Table EA.6

Table EA.6 Recurrent health expenditure per person by source of funds, excluding high level residential aged care (2008-09 dollars) (a), (b), (c)

	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT (d)</i>	<i>NT</i>	<i>Aust</i>
Government recurrent health expenditure									
2004-05	2 965	2 770	2 688	2 916	3 160	2 760	np	4 234	2 887
2005-06	3 079	2 856	2 885	2 914	3 248	2 931	np	4 465	3 003
2006-07	3 169	2 914	3 080	3 079	3 372	3 073	np	4 639	3 119
2007-08	3 335	3 133	3 320	3 284	3 678	3 452	np	5 084	3 336
2008-09	3 452	3 261	3 486	3 390	3 898	3 560	np	5 592	3 477
Non-government recurrent health expenditure									
2004-05	1 321	1 491	1 175	1 352	1 224	1 144	np	912	1 325
2005-06	1 318	1 515	1 211	1 384	1 256	1 200	np	1 009	1 343
2006-07	1 386	1 573	1 285	1 438	1 228	1 246	np	1 018	1 399
2007-08	1 424	1 529	1 319	1 552	1 312	1 312	np	1 064	1 427
2008-09	1 459	1 602	1 357	1 599	1 335	1 389	np	1 073	1 471
Total recurrent health expenditure									
2004-05	4 285	4 260	3 863	4 268	4 384	3 904	np	5 146	4 211
2005-06	4 398	4 371	4 096	4 298	4 504	4 131	np	5 474	4 346
2006-07	4 555	4 487	4 365	4 517	4 600	4 319	np	5 657	4 518
2007-08	4 760	4 663	4 639	4 837	4 990	4 763	np	6 149	4 763
2008-09	4 911	4 863	4 843	4 989	5 234	4 949	np	6 665	4 948

- (a) Tables show funding provided by the Australian Government, State and Territory governments and local government authorities and by the major non-government sources of funding for health goods and services. They do not show total expenditure on health services by the different service provider sectors.
- (b) Constant price health expenditure for 2004-05 to 2008-09 is expressed in terms of 2008-09 prices using the Implicit Price Deflator, constructed by AIHW, presented in table EA.7.
- (c) Data are derived.
- (d) ACT per person figures are not calculated, as the expenditure numbers for the ACT include substantial expenditure for NSW residents. Thus the ACT population is not the appropriate denominator.

np Not published.

Source: AIHW (unpublished) Health expenditure database; ABS (2009) *Australian Demographic Statistics*, Cat. no. 3101.0.

Table EA.7 **Total health price index (a)**

	<i>Index</i>
1998-99	72.9
1999-2000	74.5
2000-01	77.2
2001-02	79.7
2002-03	82.3
2003-04	85.1
2004-05	88.2
2005-06	91.8
2006-07	94.9
2007-08	97.2
2008-09	100.0

(a) Implicit Price Deflator, constructed by AIHW.

Source: AIHW (2010) *Health Expenditure Australia 2008-09*, Health and Welfare Expenditure Series no. 42. Cat. no. HWE 51, Canberra.

Table EA.8

Table EA.8 Employed medical practitioners (a), (b)

	NSW (c)	Vic (d)	Qld (e)	WA (f)	SA	Tas (g)	ACT (h), (i)	NT	Aust
Practitioner rate (per 100 000 people)									
2004	315	311	221	243	321	288	392	241	289
2008	307	325	309	315	345	301	518	377	320
FTE practitioner rate (per 100 000 people) based on total weekly hours									
2004	312	306	217	230	310	268	383	237	283
2008	297	313	286	293	320	271	503	356	303

FTE = Full time equivalent.

- (a) FTE rate (FTE per 100 000 people) is based on standard full-time working week of 45 hours. This differs from tables EA.10 and EA.11 which are based on 40 hours.
- (b) Includes medical practitioners who are employed in medicine. Number of 'employed medical practitioners' does not include medical practitioners on extended leave.
- (c) NSW data are based on responses to the Medical Labour Force Survey weighted to financial registrants holding general, conditional specialist, limited prescribing and referring or non-practising registration.
- (d) In 2008, Victoria surveyed only general, specific and provisional registered medical practitioners in the Medical Labour Force Survey but responses are weighted to all registered medical practitioners.
- (e) In 2008, Queensland data are based on responses to the Medical Labour Force Survey weighted to all registrants excluding some conditional registration types. In 2004, responses to annual Medical Labour Force Surveys were weighted to general registrants and conditionally registered specialists only.
- (f) For WA, in 2008, the scope was consistent, that is, the survey population and the benchmark figures are based on general and conditional registrants. In 2004, the survey was administered to both general and conditional registrants but benchmark figures were for general registrants only. For 2008 the benchmark used was the total number of registered practitioners in 2008 using 2007 age by sex proportions. For WA in 2007 and 2008, the benchmark data includes a significant number of registered medical practitioners that are no longer active in the workforce. This inflates the perception of the medical labour force in WA. It is also unknown how significantly past years have been affected. Care should be taken when interpreting these figures.
- (g) Tasmania data are based on responses to the annual Medical Labour Force Survey weighted to general registrants, conditionally registered specialists and non-practising practitioners only.
- (h) Care must be taken when interpreting ACT's data as the ACT supplies a large number of services to the Greater Southern Area NSW. Inclusion of population from this catchment area would significantly reduce the ratio of practitioners per 100 000 population.
- (i) The ACT's medical workforce numbers for 2008 should be treated with caution. The AIHW (unpublished) Health Workforce Labour Surveys (Medical 2007 and 2008) show an increase in the workforce of 24.3 per cent, while the ACT Medical Board data shows an increase of 5.1 per cent in total registrations. There is usually a close correlation between these figures.

Source: AIHW (2010) *Medical Labour Force 2008*, AIHW Bulletin no. 82, AIHW Cat. no. AUS 131, Canberra; AIHW (2006) *Medical Labour Force 2004*, AIHW Cat. no. HWL 39, National Health Labour Force Series no. 38, AIHW, Canberra.

Table EA.9 **Employed nurses (a), (b), (c)**

	NSW	Vic (d)	Qld (e)	WA (f)	SA	Tas	ACT	NT (g)	Aust
FTE nurses rate (per 100 000 people) based on a 35-hour week									
2004	1 099	1 249	998	1 069	1 374	1 212	1 173	1 262	1 138
2005	1 055	1 249	999	1 035	1 398	1 295	1 242	np	1 133
2007	1 093	1 331	1 121	1 057	1 396	1 362	1 201	1 556	1 189
2008	1 101	1 325	1 101	1 132	1 523	1 413	1 270	1 983	1 211

FTE = Full time equivalent.

- (a) Includes registered and enrolled nurses who are employed in nursing.
- (b) FTE rate (FTE per 100 000 people) is based on standard full-time working week of 35 hours. This differs from tables EA.10 and EA.11 which are based on 38 hours.
- (c) Data for 2006 are not available.
- (d) Because survey data for Victoria were not available in 2005, the 2006 Victorian survey responses were weighted to 2005 benchmarks. Therefore, care should be taken when comparing these data for Victoria with earlier years and in making comparisons with other states and territories in 2005. In 2008 Victorian data was affected by large numbers of online survey records not being able to be used for technical reasons. Estimates for Victoria for 2008 should be treated with caution due to low response rate (33.3 per cent).
- (e) Queensland estimates for 2007 and 2008 should be treated with caution due to low response rate (33.9 per cent and 32.9 per cent respectively).
- (f) Estimates for WA for 2005, 2007 and 2008 should be treated with caution due to low response rates (26.9 per cent, 36.7 per cent and 34.4 per cent respectively).
- (g) Estimates for the NT for 2004, 2007 and 2008 should be treated with caution due to low response rates (35.1 per cent, 28.7 per cent and 34.9 per cent respectively). Data for NT for 2005 are not published. Data for the NT is affected by the transient nature of the nursing labour force in that jurisdiction. According to the Nursing Board Annual Report, approximately one-third of all nurses do not re-register each year, primarily because they no longer practise in the jurisdiction. There has been some variation across years in the degree to which nurses who are interstate have been removed from the renewal process and hence the survey.

np Not published.

Source: AIHW (2010) *Nursing and Midwifery Labour Force 2008*, AIHW Bulletin no. 81, AIHW Cat. no. AUS 130, Canberra; AIHW (2009) *Nursing and Midwifery Labour Force 2007*, AIHW Cat. no. HWL 44, National Health Labour Force Series no. 43, Canberra; AIHW (2008) *Nursing and midwifery labour force 2005*, AIHW Cat. no. HWL 40, National Health Labour Force Series no. 39, Canberra; AIHW (2006) *Nursing and Midwifery Labour Force 2005*, AIHW Cat. no. HWL 38, National Health Labour Force Series no. 37, Canberra.

Table EA.10

Table EA.10 Net growth in health workforce, selected professions, 2007 to 2008 (a), (b)

Unit	NSW	Vic	Qld	WA	SA	Tas	ACT (c)	NT	Aust (d)
Medical practitioners (e)									
FTE in workforce in 2007	no.	22 864	18 463	13 180	8 099	1 563	1 546	970	72 416
FTE in workforce in 2008	no.	23 404	18 773	13 865	7 165	1 518	1 959	882	73 325
Net growth from 2007 to 2008	%	2.4	1.7	5.2	- 11.5	- 2.9	26.7	- 9.0	1.3
Nurses/midwives (f)									
FTE in workforce in 2007	no.	69 534	64 008	43 317	20 563	6 189	3 773	3 078	230 762
FTE in workforce in 2008	no.	71 129	65 002	43 691	22 694	6 479	4 050	4 028	239 725
Net growth from 2007 to 2008	%	2.3	1.6	0.9	10.4	4.7	7.4	30.9	3.9

(a) Net growth measures the change in the full-time equivalent (FTE) number in the workforce in the reference year compared to the year prior to the reference year.

(b) FTEs calculated based on a 40-hour standard working week for medical practitioners and a 38-hour week for nurses/midwives. This differs from tables EA.8 and EA.9 which use 45 hours for medical practitioners and 35 hours for nurses.

(c) The ACT's medical workforce numbers for 2008 should be treated with caution. The AIHW (unpublished) Health Workforce Labour Surveys (Medical 2007 and 2008) show an increase in the workforce of 24.34 per cent, while ACT Medical Board data shows an increase of 5.09 per cent in total registrations. There is usually a close correlation between these figures.

(d) Due to rounding of average hours worked, the total FTE for Australia may not add up to the sum of states and territories.

(e) For WA the 2008 benchmark used was the total number of registered practitioners in 2008 using 2007 age-by-sex proportions. For WA in 2007 and 2008, the benchmark data was inflated by an unknown number of registered medical practitioners that were no longer active in the workforce. Data based on figures which were underestimates in NSW, Queensland and Tasmania.

(f) For 2007, State and Territory estimates should be treated with caution due to low response rates in some jurisdictions, particularly Victoria (39.9 per cent). Queensland (33.9 per cent), WA (36.7 per cent) and NT (28.7 per cent). For 2008, State and Territory estimates should be treated with caution due to low response rates in some jurisdictions, particularly Victoria (33.3 per cent). Queensland (32.9 per cent), WA (34.4 per cent) and NT (24.9 per cent). In 2008 Victorian data was affected by large numbers of online survey records not being able to be used for technical reasons.

Source: AIHW (unpublished) *Health Labour Force Surveys* (Medical (2007 and 2008); AIHW (unpublished) *Nursing and Midwifery Labour Force Survey* (2007 and 2008); State and Territory registration board data.

Table EA.11 Net growth in health workforce, by clinical/non-clinical status, 2007 to 2008 (per cent) (a), (b), (c)

	NSW	Vic	Qld	WA	SA	Tas	ACT (d), (e)	NT	Aust
Medical practitioners (f)									
Net growth from 2007 to 2008									
Clinician status (h)									
Clinician	2.5	1.9	4.4	- 11.2	3.0	- 3.5	28.9	- 11.0	1.4
Non-clinician	- 2.9	1.3	18.3	- 14.5	- 9.1	6.8	9.8	7.9	0.3
Nurses/midwives (g)									
Net growth from 2007 to 2008									
Clinician status (h)									
Clinician	2.1	2.0	1.0	np	10.9	4.9	2.9	32.9	3.3
Non-clinician	5.5	0.4	0.7	np	3.8	4.9	60.5	18.3	9.4

(a) Net growth measures the change in the full-time equivalent number in the workforce in the reference year compared to the year prior to the reference year.

(b) FTEs calculated based on a 40-hour standard working week for medical practitioners and a 38-hour week for nurses/midwives. This differs from tables EA.8 and EA.9 which use 45 hours for medical practitioners and 35 hours for nurses.

(c) Clinicians are those mainly working in clinical work (i.e. direct patient care). Non-clinicians are those mainly working in the profession as a researcher, lecturer, teacher, educator, or in other non-clinical work in the relevant professional field. The number of non-clinicians is very small in comparison to the number of clinicians and small changes in numbers may result in large percentage changes.

(d) Due to concerns regarding interaction between clinical status, data quality and the low response rate, the growth rates for the ACT should be treated with caution.

(e) The ACT's medical workforce numbers for 2008 should be treated with caution. The AIHW (unpublished) Health Workforce Labour Surveys (Medical 2007 and 2008) show an increase in the workforce of 24.34 per cent, while the ACT Medical Board data shows an increase of 5.09 per cent in total registrations. There is usually a close correlation between these figures.

(f) For WA the 2008 benchmark used was the total number of registered practitioners in 2008 using 2007 age by sex proportions. For WA in 2007 and 2008, the benchmark data was inflated by an unknown number of registered medical practitioners that were no longer active in the workforce. Data based on figures which were underestimates in NSW, Queensland and Tasmania.

Table EA.11 Net growth in health workforce, by clinical/non-clinical status, 2007 to 2008 (per cent) (a), (b), (c)

	NSW	Vic	Qld	WA	SA	Tas	ACT (d), (e)	NT	Aust
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(g) For 2007, State and Territory estimates should be treated with caution due to low response rates in some jurisdictions, particularly Victoria (39.9 per cent). Queensland (33.9 per cent), WA (36.7 per cent) and the NT (28.7 per cent). For 2008, State and Territory estimates should be treated with caution due to low response rates in some jurisdictions, particularly Victoria (33.3 per cent), Queensland (32.9 per cent), WA (34.4 per cent) and the NT (24.9 per cent). In 2008 Victorian data was affected by large numbers of online survey records not being able to be used for technical reasons.

(h) WA data for nurses and midwives has been suppressed due to concerns regarding interaction between clinical status data quality and the low response rate.

np Not published.

Source: AIHW (unpublished) *Medical Labour Force Survey* (2007 and 2008); AIHW (unpublished) *Nursing and Midwifery Labour Force Survey* (2007 and 2008); State and Territory registration board data.

Table EA.12

Table EA.12 Indigenous health workforce, by State/Territory, 2006 (a), (b), (c)

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust. (d)
Number of Indigenous health workers									
Number of total health workforce	1 743	381	1 343	486	302	196	47	390	4 891
Indigenous health workforce as a proportion of total health workforce	159 158	125 749	93 404	47 749	42 386	11 820	7 613	4 428	492 342
Indigenous population	1.1	0.3	1.4	1.0	0.7	1.7	0.6	8.8	1.0
Total population	85 320	19 017	77 958	37 017	16 268	10 687	2 471	35 014	283 911
Indigenous health workers as a proportion of the Indigenous population (per cent)	5 250 262	3 982 037	3 097 997	1 562 653	1 233 516	382 453	262 107	145 290	15 918 080
Proportion of State/Territory population that is Indigenous	2.0	2.0	1.7	1.3	1.9	1.8	1.9	1.1	1.7
	1.6	0.5	2.5	2.4	1.3	2.8	0.9	24.1	1.8

(a) Aged 15 years and over.

(b) Cells in this table have been randomly adjusted to avoid the release of confidential data.

(c) See table EA.15 for information about the scope of the Indigenous Health Workforce.

(d) Includes Other Territories.

Source: ABS (unpublished); ABS (2007) *2006 Census of Population and Housing*, Canberra.

Table EA.13 Indigenous people in health workforce as a proportion of total health workforce, by age group and sex, 2006 (a)

<i>Age group</i>	<i>15-24</i>	<i>25-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>Total (b)</i>
Indigenous persons in health workforce, by age by sex						
Males	108	301	388	314	104	1 223
Females	406	803	1 100	984	347	3 666
Total	518	1 098	1 486	1 290	453	4 891
All persons in health workforce, by age by sex						
Males	5 604	24 496	31 374	32 748	19 048	119 386
Females	30 549	78 498	97 751	110 928	49 611	372 961
Total	36 150	102 996	129 125	143 676	68 658	492 342
Proportion of total health workforce (per cent)						
Males	0.3	0.3	0.3	0.2	0.2	0.2
Females	1.1	0.8	0.9	0.7	0.5	0.7
Total	1.4	1.1	1.2	0.9	0.7	1.0

(a) Cells in this table have been randomly adjusted to avoid the release of confidential data.

(b) Includes persons aged 65 years and over.

Source: ABS (unpublished); ABS (2007) *2006 Census of Population and Housing*, Canberra.

Table EA.14

Table EA.14 Proportion of the health workforce that is Indigenous, by occupation groupings, 2006 (a)

Occupation groupings (c)	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (b)	
	%	%	%	%	%	%	%	%	%	no.
Medical practitioners	0.2	0.1	0.2	0.1	0.2	0.5	0.3	0.6	0.2	103
Medical imaging workers	0.2	0.1	0.3	–	0.4	–	–	–	0.2	19
Dental workers	0.8	0.2	1.2	0.4	0.4	0.9	0.8	1.9	0.7	203
Nursing workers	0.9	0.3	0.9	0.5	0.4	1.3	0.4	1.9	0.7	1 446
Pharmacists	–	0.1	0.2	0.2	–	–	–	–	0.1	13
Allied health workers	0.8	0.2	0.9	0.7	0.8	1.1	0.6	4.2	0.7	454
Complementary therapists	0.5	0.3	0.8	0.8	0.3	3.1	–	–	0.5	87
Other health workers	2.3	0.7	3.4	2.8	2.0	3.7	1.3	27.2	2.4	3 145
Total Indigenous health workforce as proportion of total health workforce	1.1	0.3	1.4	1.1	0.8	1.7	0.6	8.8	1.0	..
Total Indigenous health workforce	1 933	456	1 472	563	354	216	51	422	5 470	5 470

(a) Proportions exclude persons who did not state their Indigenous status.

(b) Includes Other Territories (Christmas Island, Cocos (Keeling) Islands, and Jervis Bay Territory).

(c) Occupation groupings are based on those used in AIHW *Health and Community Services Labour Force, 2006*.
.. Not applicable. – Nil or rounded to zero.

Source: ABS (unpublished) *2006 Census of Population and Housing*, Cat. no. 2068.0.

Table EA.15 Indigenous persons employed in selected health-related occupations, 2006 (a)

	<i>Indigenous people</i>	<i>All persons</i>	<i>Percent of Indigenous people in selected health-related occupations</i>
Health and welfare services managers (b)	141	10 807	1.3
Psychologists (c)	39	13 437	0.3
<i>Health diagnostic and promotion professionals</i>			
Medical Imaging Professionals (d)	18	10 147	0.2
Environmental Health Officer	98	3 907	2.5
Occupational Health and Safety Adviser	50	6 840	0.7
Health Promotion Officer	437	3 898	11.2
Other health diagnostic and promotion professionals (e)	45	23 287	0.2
Total	648	48 079	1.3
<i>Health therapy professionals</i>			
Dental Practitioners (f)	16	9 065	0.2
Dental Hygienists, Technicians and Therapists (g)	22	5 169	0.4
Dental Assistant	171	15 378	1.1
Physiotherapist	54	12 286	0.4
Other health therapy professionals (h)	58	22 699	0.3
Total	321	64 597	0.5
<i>Medical practitioners</i>			
General Medical Practitioner	60	29 920	0.2
Other medical practitioners, Internal Medicine (i) specialists, Psychiatrists & Surgeons	40	25 155	0.2
Total	100	55 075	0.2
<i>Midwifery and nursing professionals</i>			
Midwives (j)	53	13 164	0.4
Nurse Educators and Researchers (k)	17	3 762	0.5
Nurse Manager	46	10 899	0.4
Registered Nurse (Aged Care)	239	25 070	1.0
Registered Nurse (Community Health)	51	8 771	0.6

Table EA.15 Indigenous persons employed in selected health-related occupations, 2006 (a)

	<i>Indigenous people</i>	<i>All persons</i>	<i>Percent of Indigenous people in selected health-related occupations</i>
Registered Nurse (Critical Care and Emergency)	44	9 917	0.4
Registered Nurse (Mental Health)	48	7 712	0.6
Registered Nurse (Perioperative)	46	10 009	0.5
Other Registered Nurses (I)	679	111 096	0.6
Total	1 223	200 400	0.6
<i>Health and welfare support workers</i>			
Ambulance Officers and Paramedics	153	9 098	1.7
Diversional Therapist	41	4 078	1.0
Enrolled and Mothercraft Nurses	215	19 397	1.1
Aboriginal and Torres Strait Islander Health Worker	965	1 010	95.5
Massage Therapist	54	8 200	0.7
Hospital Orderly	165	9 939	1.7
Nursing Support Worker	442	22 380	2.0
Personal Care Assistant	339	21 956	1.5
Other Nursing Support and Personal Care Workers (m)	39	3 899	1.0
Total	2 413	99 957	2.4
Total aged 15 years and over (n)	4 891	492 342	1.0

(a) Aged 15 years and over.

(b) Comprises Health and Welfare Services Managers, nfd, Medical Administrator, Nursing Clinical Director, Primary Health Organisation Manager, Health and Welfare Services Managers, nec.

(c) Comprises Psychologists, nfd, Clinical Psychologist, Educational Psychologist, Organisational Psychologist, Psychotherapist, Psychologists, nec.

(d) Comprises Medical Imaging Professionals, nfd, Medical Diagnostic Radiographer, Medical Radiation Therapist, Nuclear Medicine Technologist, Sonographer.

(e) Comprises Health Professionals, nfd, Health Diagnostic and Promotion Professionals, nfd, Dietician, Occupational and Environmental Health Professionals, nfd, Optometrists and Orthoptists, nfd, Optometrist, Orthoptist, Pharmacists, nfd, Hospital Pharmacist, Industrial Pharmacist, Retail Pharmacist, Other Health Diagnostic and Promotion Professionals, nfd, Orthotist or Prosthetist, Health Diagnostic and Promotion Professionals, nec.

(f) Comprises Dental Practitioners, nfd, Dental Specialist, Dentist.

(g) Comprises Dental Hygienists, Technicians and Therapists, nfd, Dental Hygienist, Dental Prosthetist, Dental Technician, Dental Therapist.

(h) Comprises Health Therapy Professionals, nfd, Chiropractors and Osteopaths, nfd, Chiropractor, Osteopath, Complementary Health Therapists, nfd, Acupuncturist, Homeopath, Naturopath, Traditional Chinese Medicine Practitioner, Complementary Health Therapists, nec., Occupational Therapist, Podiatrist, Speech Professionals and Audiologists, nfd, Audiologist, Speech Pathologist.

Table EA.15 Indigenous persons employed in selected health-related occupations, 2006 (a)

	<i>Indigenous people</i>	<i>All persons</i>	<i>Percent of Indigenous people in selected health-related occupations</i>
(i)	Comprises Medical Practitioners, nfd, Generalist Medical Practitioners, nfd, Resident Medical Officer, Anaesthetist, Internal Medicine Specialists, nfd, Specialist Physician (General Medicine), Cardiologist, Clinical Haematologist, Clinical Oncologist, Endocrinologist, Gastroenterologist, Intensive Care Specialist, Neurologist, Paediatrician, Renal Medicine Specialist, Rheumatologist, Thoracic Medicine Specialist, Internal Medicine Specialists, nec, Psychiatrist, Surgeons, nfd, Surgeon (General), Cardiothoracic Surgeon, Neurosurgeon, Orthopaedic Surgeon, Otorhinolaryngologist, Paediatric Surgeon, Plastic and Reconstructive Surgeon, Urologist, Vascular Surgeon, Other Medical Practitioners, nfd, Dermatologist, Emergency Medicine Specialist, Obstetrician and Gynaecologist, Ophthalmologist, Pathologist, Radiologist, Medical Practitioners, nec.		
(j)	Comprises Midwifery and Nursing Professionals, nfd, Midwife.		
(k)	Comprises Nurse Educators and Researchers, nfd, Nurse Educator, Nurse Researcher.		
(l)	Comprises Registered Nurses, nfd, Nurse Practitioner, Registered Nurse (Child and Family Health), Registered Nurse (Developmental Disability), Registered Nurse (Disability and Rehabilitation), Registered Nurse (Medical), Registered Nurse (Medical Practice), Registered Nurse (Surgical), Registered Nurses, nec.		
(m)	Comprises Nursing Support and Personal Care Workers, nfd, Therapy Aide.		
(n)	Components may not add to total due to perturbation of component data.		
<i>Source:</i> ABS (2007) <i>2006 Census of Population and Housing</i> , Canberra.			

Table EA.16 Proportion of the health workforce that is Indigenous, by selected professions, 2008 (a), (b)

	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Aust</i>	
Unit	%	%	%	%	%	%	%	%	%	no.
Selected professions										
Medical practitioners (b), (c), (d)	0.2	0.2	0.4	0.1	0.1	0.2	0.2	1.2	0.2	153
Nurses/midwives (d)	0.8	0.3	0.9	0.2	0.4	1.0	0.2	1.2	0.6	1 598
Total	0.6	0.3	0.8	0.2	0.4	0.9	0.2	1.2	0.5	1 751

- (a) Excludes the response category 'Indigenous status — Not stated'.
- (b) Data for Indigenous medical practitioners should be treated with caution due to the small population size, the overall response rate and unexplained variation between years.
- (c) The total number of medical practitioners in NSW, Queensland and Tasmania are underestimates, as the benchmark figures did not include all registered medical practitioners.
- (d) For WA the 2008 benchmark used was the total number of registered practitioners in 2008 using 2007 age by sex proportions. For WA the benchmark data was inflated by an unknown number of registered medical practitioners that were no longer active in the workforce.
- (e) State and Territory estimates from the 2008 Nursing and Midwifery Labour Force Survey should be treated with caution due to low response rates in some jurisdictions, particularly Victoria (33.3 per cent), Queensland (32.9 per cent), WA (34.4 per cent) and the NT (34.9 per cent). Data quality issues associated with Indigenous identification are likely to have been compounded by estimation procedures used to deal with low responses rates.

Source: AIHW (unpublished) *Health Labour Force Surveys, 2008*; AIHW (unpublished) *Nursing and Midwifery Labour Force Survey 2008*; State and Territory registration board data.

Table EA.17

Table EA.17 Proportion of people who accessed health services by health status, 2004-05 (a), (b), (c)

Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
	Health status (excellent/very good/good)								
Admitted to hospital	14.2	13.5	13.5	15.8	13.5	13.5	13.4	13.7	14.0
Casualty/outpatients/day clinic	3.4	5.5	3.7	4.8	4.5	4.7	np	np	4.2
Doctor consultation (GP and/or specialist)	21.1	21.5	20.5	22.4	21.8	21.6	19.9	21.5	21.3
Dental consultation	5.5	5.9	5.2	6.3	6.4	5.6	5.8	4.4	5.7
Consultation with other health professional	11.8	14.3	14.0	13.5	14.2	11.9	12.5	12.6	13.2
Total accessing health care (d)	41.8	41.7	41.1	43.4	42.9	40.5	37.7	38.8	41.8
	Health status (fair/poor)								
Admitted to hospital	27.6	24.6	25.8	28.1	26.5	27.0	23.8	37.2	26.5
Casualty/outpatients/day clinic	7.9	10.0	10.3	12.5	11.4	11.9	5.5	13.0	9.7
Doctor consultation (GP and/or specialist)	41.8	44.1	42.3	39.7	41.1	44.1	30.4	38.7	42.0
Dental consultation	5.8	6.8	5.8	5.6	9.0	3.5	np	np	6.3
Consultation with other health professional	19.7	22.1	24.2	23.9	23.8	19.4	27.4	30.3	22.0
Total accessing health care (d)	60.6	65.2	63.3	63.0	64.2	58.6	58.5	66.5	62.6

(a) Rates are age standardised by State/Territory to the 2001 estimated resident population (5 year ranges from 15+).

(b) Persons who accessed at least one of the health services noted in the table in the last two weeks or were admitted to hospital in the last 12 months.

(c) Limited to people aged 15 years or over.

(d) Total persons accessing any of the selected health services above. Components may not add to total because persons may have accessed more than one type of health service.

np Not published.

Source: ABS (unpublished) National Health Survey, 2004-05.

Table EA.18

Table EA.18 RSEs and confidence intervals for the proportion of people who accessed health services by health status, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
		RSE for Health status (excellent/very good/good)								
Admitted to hospital	%	4.3	5.7	5.0	4.5	4.3	7.0	8.1	39.8	2.4
Casualty/outpatients/day clinic	%	9.7	9.4	10.4	12.4	9.1	10.9	np	np	5.1
Doctor consultation (GP and/or specialist)	%	3.2	3.9	4.1	4.7	4.3	5.1	7.7	35.6	1.9
Dental consultation	%	7.3	9.1	7.2	9.8	7.6	10.0	12.7	47.9	4.0
Consultation with other health professional	%	5.7	5.7	5.3	6.1	4.8	7.2	7.1	55.3	2.7
Total accessing health care (d)	%	2.3	2.8	2.5	2.6	2.6	3.4	22.6	4.3	1.3
		RSE for Health status (fair/poor)								
Admitted to hospital	%	8.7	8.3	7.3	10.7	8.5	11.4	15.7	46.8	4.2
Casualty/outpatients/day clinic	%	17.9	14.3	17.0	16.8	16.3	18.9	23.9	66.1	6.9
Doctor consultation (GP and/or specialist)	%	6.6	5.9	6.5	7.9	7.3	8.6	11.9	35.1	3.3
Dental consultation	%	25.0	23.8	19.9	27.4	22.0	35.9	np	np	10.8
Consultation with other health professional	%	9.9	10.6	8.9	12.9	9.1	14.3	14.7	33.8	4.9
Total accessing health care (d)	%	4.8	4.3	4.4	5.6	4.0	6.6	7.2	24.6	2.5
		95 per cent confidence interval for Health status (excellent/very good/good)								
Admitted to hospital	± %	1.2	1.5	1.3	1.4	1.1	1.9	2.1	10.7	0.6
Casualty/outpatients/day clinic	± %	0.7	1.0	0.7	1.2	0.8	1.0	np	np	0.4
Doctor consultation (GP and/or specialist)	± %	1.3	1.6	1.6	2.1	1.8	2.2	3.0	15.0	0.8
Dental consultation	± %	0.8	1.0	0.7	1.2	1.0	1.1	1.4	4.1	0.5

Table EA.18

Table EA.18 RSEs and confidence intervals for the proportion of people who accessed health services by health status, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Consultation with other health professional	± %	1.3	1.6	1.5	1.6	1.3	1.7	1.7	13.6	0.7
Total accessing health care (d)	± %	1.9	2.3	2.0	2.2	2.2	2.7	16.7	3.3	1.1
95 per cent confidence interval for Health status (fair/poor)										
Admitted to hospital	± %	4.7	4.0	3.7	5.9	4.4	6.0	7.3	34.1	2.2
Casualty/outpatients/day clinic	± %	2.8	2.8	3.5	4.1	3.6	4.4	2.6	16.9	1.3
Doctor consultation (GP and/or specialist)	± %	5.4	5.1	5.4	6.1	5.9	7.5	7.1	26.6	2.7
Dental consultation	± %	2.9	3.2	2.3	3.0	3.9	2.5	np	np	1.3
Consultation with other health professional	± %	3.8	4.6	4.2	6.0	4.3	5.4	7.9	20.1	2.1
Total accessing health care (d)	± %	5.7	5.5	5.5	6.9	5.0	7.6	8.2	32.1	3.0

RSE = Relative standard error. Estimates with RSEs between 25 per cent and 50 per cent should be used with caution. Estimates with RSEs greater than 50 per cent are considered too unreliable for general use.

(a) Rates are age standardised by State/Territory to the 2001 estimated resident population (5 year ranges from 15+).

(b) Persons who accessed at least one of the health services noted in the table in the last two weeks or were admitted to hospital in the last 12 months.

(c) Limited to people aged 15 years or over.

(d) Total persons accessing any of the selected health services above. Components may not add to total because persons may have accessed more than one type of health service.

np Not published.

Source: ABS (unpublished) *National Health Survey, 2004-05*.

Table EA.19

Table EA.19 Proportion of people who accessed health services by health status, by Indigenous status, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Health status (excellent/very good/good)										
Indigenous										
Admitted to hospital	%	14.7	17.1	16.0	19.1	19.2	10.7	9.9	23.3	17.0
Casualty/outpatients/day clinic	%	3.0	1.7	5.0	5.0	6.7	3.3	np	4.4	4.0
Doctor consultation (GP and/or specialist)	%	20.9	24.0	21.2	23.1	25.4	18.4	12.9	23.8	21.9
Dental consultation	%	3.3	np	3.4	np	np	np	np	2.6	3.3
Consultation with other health professional	%	14.5	15.6	18.7	20.7	20.5	9.0	14.1	37.2	19.7
Total accessing health care (d)	%	40.4	47.9	43.4	47.1	46.1	34.3	30.0	55.3	44.3
Non-Indigenous										
Admitted to hospital	%	14.2	13.4	13.2	15.6	13.4	13.3	13.1	10.8	13.8
Casualty/outpatients/day clinic	%	1.6	2.5	1.5	2.0	2.8	2.1	1.8	–	1.9
Doctor consultation (GP and/or specialist)	%	21.0	21.3	20.3	21.9	21.5	21.0	19.4	12.4	21.0
Dental consultation	%	5.5	5.9	5.2	6.4	6.6	5.8	5.6	8.2	5.7
Consultation with other health professional	%	11.6	14.4	14.0	13.3	14.2	12.1	12.1	12.5	13.2
Total accessing health care (d)	%	41.1	41.2	40.4	42.0	43.1	39.9	37.5	35.9	41.1
Health status (fair/poor)										
Indigenous										
Admitted to hospital	%	29.9	34.8	26.1	28.3	27.7	31.9	20.5	39.2	29.7
Casualty/outpatients/day clinic	%	5.0	10.9	14.6	16.3	10.7	7.2	np	10.9	10.8
Doctor consultation (GP and/or specialist)	%	40.6	45.4	34.6	41.1	39.4	52.2	27.4	43.0	39.8

Table EA.19

Table EA.19 Proportion of people who accessed health services by health status, by Indigenous status, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Dental consultation	%	3.0	np	7.0	np	np	np	np	4.6	4.3
Consultation with other health professional	%	24.6	33.7	28.1	21.3	24.1	24.9	30.5	47.5	27.8
Total accessing health care (d)	%	61.3	71.7	65.8	59.1	61.7	66.6	48.2	70.6	64.1
Non-Indigenous										
Admitted to hospital	%	28.6	25.1	26.3	28.6	26.1	26.5	23.1	49.4	27.1
Casualty/outpatients/day clinic	%	4.9	4.9	5.4	6.4	9.3	6.8	np	np	5.5
Doctor consultation (GP and/or specialist)	%	41.7	44.2	42.7	40.5	41.2	44.0	30.9	20.8	42.1
Dental consultation	%	5.7	6.9	5.7	5.5	8.8	3.6	6.9	–	6.1
Consultation with other health professional	%	19.2	22.2	24.2	23.7	23.7	18.9	27.8	18.0	21.7
Total accessing health care (d)	%	60.7	64.8	62.5	62.2	64.3	58.3	58.5	58.9	62.3

(a) Rates are age standardised by State/Territory to the 2001 estimated resident population (5 year ranges from 15+).

(b) Persons who accessed at least one of the health services noted in the table in the last two weeks or were admitted to hospital in the last 12 months.

(c) Limited to people aged 15 years or over.

(d) Total persons accessing any of the selected health services above. Components may not add to total because persons may have accessed more than one type of health service.

– Nil or rounded to zero. np Not published.

Source: ABS (unpublished) *National Health Survey, 2004-05*; ABS (unpublished) *National Aboriginal and Torres Strait Islander Health Survey, 2004-05*.

Table EA.20

Table EA.20 RSEs and confidence intervals for the proportion of people who accessed health services by health status, by Indigenous status, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
RSE for Health status (excellent/very good/good)										
Indigenous										
Admitted to hospital	%	13.6	18.9	15.0	13.5	18.7	16.4	29.5	11.9	6.0
Casualty/outpatients/day clinic	%	25.4	38.5	24.1	24.4	46.6	32.6	np	29.6	11.8
Doctor consultation (GP and/or specialist)	%	10.2	15.8	12.0	9.9	14.2	11.4	28.3	11.4	4.9
Dental consultation	%	45.3	np	49.4	np	np	np	np	45.2	26.5
Consultation with other health professional	%	15.8	20.8	14.0	14.3	17.0	18.2	25.5	11.3	6.3
Total accessing health care (d)	%	8.4	6.9	5.9	7.1	9.7	8.1	19.9	6.3	3.2
Non-Indigenous										
Admitted to hospital	%	4.3	5.8	5.0	4.7	4.2	6.9	7.8	44.1	2.4
Casualty/outpatients/day clinic	%	11.7	13.7	15.7	18.4	12.8	18.7	23.3	-	7.2
Doctor consultation (GP and/or specialist)	%	3.2	3.9	4.2	5.0	4.3	5.0	7.7	30.3	1.9
Dental consultation	%	7.8	9.0	7.3	10.0	7.6	10.1	12.8	45.2	4.1
Consultation with other health professional	%	5.8	5.7	5.5	6.2	4.8	7.2	7.2	56.0	2.7
Total accessing health care (d)	%	2.3	2.8	2.5	2.8	2.6	3.3	4.4	18.7	1.3
RSE for Health status (fair/poor)										
Indigenous										
Admitted to hospital	%	13.6	18.8	14.9	13.3	18.1	16.6	29.8	11.5	6.0
Casualty/outpatients/day clinic	%	25.6	38.3	23.9	24.0	45.1	33.1	np	28.6	11.8
Doctor consultation (GP and/or specialist)	%	10.2	15.7	11.9	9.8	13.7	11.6	28.6	11.0	4.8

Table EA.20

Table EA.20 RSEs and confidence intervals for the proportion of people who accessed health services by health status, by Indigenous status, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Dental consultation	%	45.6	np	49.0	np	np	np	np	43.7	26.4
Consultation with other health professional	%	15.9	20.7	13.9	14.1	16.5	18.4	25.7	11.0	6.2
Total accessing health care (d)	%	8.4	6.9	5.9	7.0	9.4	8.3	20.1	6.1	3.2
Non-Indigenous										
Admitted to hospital	%	8.8	8.0	7.2	11.0	8.2	10.8	15.4	41.0	3.9
Casualty/outpatients/day clinic	%	22.0	19.7	21.7	23.6	22.4	21.8	np	np	9.5
Doctor consultation (GP and/or specialist)	%	6.3	5.9	6.2	7.9	7.6	8.8	12.0	73.5	3.1
Dental consultation	%	23.2	22.8	20.8	26.5	25.4	35.8	27.6	-	10.4
Consultation with other health professional	%	10.0	10.4	9.5	12.8	9.5	14.1	14.5	42.4	5.0
Total accessing health care (d)	%	4.8	4.8	4.5	5.7	4.1	6.9	7.1	35.6	2.4
Indigenous										
Admitted to hospital	± %	4.6	6.2	4.4	4.6	6.2	5.7	6.8	6.8	2.2
Casualty/outpatients/day clinic	± %	1.5	1.9	2.9	3.5	4.4	2.5	3.4	2.9	1.1
Doctor consultation (GP and/or specialist)	± %	5.2	9.2	5.9	7.3	7.4	5.9	8.2	8.5	2.8
Dental consultation	± %	2.1	4.6	2.1	2.5	3.4	3.3	2.8	1.7	0.9
Consultation with other health professional	± %	5.8	6.5	6.1	8.5	7.4	5.3	6.3	7.5	2.9
Total accessing health care (d)	± %	6.9	11.2	6.6	8.5	8.5	6.7	12.4	7.7	3.3
Non-Indigenous										
Admitted to hospital	± %	1.2	1.5	1.3	1.4	1.1	1.8	2.0	9.4	0.7

95 per cent confidence interval for Health status (excellent/very good/good)

Table EA.20

Table EA.20 RSEs and confidence intervals for the proportion of people who accessed health services by health status, by Indigenous status, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Casualty/outpatients/day clinic	± %	0.4	0.7	0.5	0.7	0.7	0.8	0.8	–	0.3
Doctor consultation (GP and/or specialist)	± %	1.3	1.6	1.7	2.1	1.8	2.1	2.9	7.4	0.8
Dental consultation	± %	0.8	1.0	0.8	1.2	1.0	1.2	1.4	7.2	0.5
Consultation with other health professional	± %	1.3	1.6	1.5	1.6	1.3	1.7	1.7	13.8	0.7
Total accessing health care (d)	± %	1.8	2.3	2.0	2.3	2.2	2.6	3.2	13.1	1.1
95 per cent confidence interval for Health status (fair/poor)										
Indigenous										
Admitted to hospital	± %	7.9	12.9	7.7	7.5	10.1	10.2	11.9	9.1	3.5
Casualty/outpatients/day clinic	± %	2.5	8.2	6.9	7.8	9.8	4.6	2.5	6.3	2.5
Doctor consultation (GP and/or specialist)	± %	8.1	14.0	8.2	8.0	11.0	11.7	15.2	9.6	3.8
Dental consultation	± %	2.6	3.0	6.8	1.1	6.3	6.8	9.9	4.1	2.2
Consultation with other health professional	± %	7.6	13.7	7.7	6.0	8.0	8.9	15.3	10.6	3.4
Total accessing health care (d)	± %	10.1	9.8	7.6	8.2	11.7	10.6	18.8	8.7	4.1
Non-Indigenous										
Admitted to hospital	± %	4.9	4.0	3.7	6.2	4.2	5.6	7.0	39.7	2.1
Casualty/outpatients/day clinic	± %	2.1	1.9	2.3	2.9	4.1	2.9	np	np	1.0
Doctor consultation (GP and/or specialist)	± %	5.1	5.1	5.2	6.3	6.1	7.6	7.3	30.0	2.5
Dental consultation	± %	2.6	3.1	2.3	2.9	4.4	2.5	3.7	–	1.2
Consultation with other health professional	± %	3.8	4.5	4.5	6.0	4.4	5.2	7.9	14.9	2.1

Table EA.20

Table EA.20 RSEs and confidence intervals for the proportion of people who accessed health services by health status, by Indigenous status, 2004-05 (a), (b), (c)

<i>Unit</i>	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Aust</i>
Total accessing health care (d)	± %	6.1	5.5	6.9	5.2	7.9	8.2	41.1	2.9

RSE = Relative standard error. Estimates with RSEs between 25 per cent and 50 per cent should be used with caution. Estimates with RSEs greater than 50 per cent are considered too unreliable for general use.

- (a) Rates are age standardised by State/Territory to the 2001 estimated resident population (5 year ranges from 15+).
- (b) Persons who accessed at least one of the health services noted in the table in the last two weeks or were admitted to hospital in the last 12 months.
- (c) Limited to people aged 15 years or over.
- (d) Total persons accessing any of the selected health services above. Components may not add to total because persons may have accessed more than one type of health service.

– Nil or rounded to zero. **np** Not published.

Source: ABS (unpublished) *National Health Survey, 2004-05*; ABS (unpublished) *National Aboriginal and Torres Strait Islander Health Survey, 2004-05*.

Table EA.21

Table EA.21 Proportion of people who accessed health services by health status, by remoteness of residence, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Health status (excellent/very good/good)										
Major cities										
Admitted to hospital	%	13.7	13.2	14.3	14.3	12.8	..	13.4	..	13.6
Casualty/outpatients/day clinic	%	3.4	5.5	3.7	4.9	4.3	..	3.8	..	4.3
Doctor consultation (GP and/or specialist)	%	22.3	22.9	21.0	24.1	22.1	..	19.9	..	22.4
Dental consultation	%	5.7	5.7	5.3	6.8	6.5	..	5.8	..	5.8
Consultation with other health professional	%	12.1	13.6	13.8	13.2	14.4	..	12.5	..	13.1
Total accessing health care (d)	%	42.8	42.5	42.0	42.8	44.0	..	38.8	..	42.6
Inner regional										
Admitted to hospital	%	16.6	15.0	11.5	19.2	14.9	14.5	..	..	14.8
Casualty/outpatients/day clinic	%	3.1	4.9	3.2	3.4	3.3	4.7	..	..	3.8
Doctor consultation (GP and/or specialist)	%	18.4	16.1	20.9	18.3	18.4	21.3	..	..	18.6
Dental consultation	%	5.2	6.5	6.2	5.9	7.8	5.7	..	..	6.0
Consultation with other health professional	%	11.1	14.4	15.1	15.0	14.4	12.1	..	..	13.4
Total accessing health care (d)	%	39.3	38.2	40.5	44.0	42.1	41.4	..	..	39.9
Outer regional										
Admitted to hospital	%	13.9	10.9	14.4	18.7	16.1	12.1	..	13.8	14.2
Casualty/outpatients/day clinic	%	4.3	8.8	4.1	3.8	7.3	np	..	np	4.8
Doctor consultation (GP and/or specialist)	%	15.4	22.7	18.3	18.0	22.3	21.9	..	26.2	19.1
Dental consultation	%	5.1	4.9	3.9	3.1	4.6	5.9	..	2.1	4.4

Table EA.21

Table EA.21 Proportion of people who accessed health services by health status, by remoteness of residence, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Consultation with other health professional	%	10.9	25.5	13.2	14.5	11.9	12.2	..	13.2	14.1
Total accessing health care (d)	%	37.5	45.4	39.4	44.1	40.8	39.7	..	39.4	40.3
Remote										
Admitted to hospital	%	np	..	8.0	26.3	16.9	5.7	..	np	16.2
Casualty/outpatients/day clinic	%	np	..	6.5	9.6	3.8	np	..	np	5.9
Doctor consultation (GP and/or specialist)	%	36.3	..	22.6	15.5	24.9	np	..	np	20.0
Dental consultation	%	-	..	np	5.4	4.7	np	..	12.3	4.5
Consultation with other health professional	%	-	..	12.4	11.5	17.3	4.9	..	10.3	11.4
Total accessing health care (d)	%	47.3	..	37.4	40.2	45.8	28.8	..	32.0	39.4
Major cities										
Admitted to hospital	%	27.3	22.2	25.8	30.6	28.4	..	23.8	..	26.2
Casualty/outpatients/day clinic	%	7.9	9.6	10.7	13.9	10.9	..	5.5	..	9.6
Doctor consultation (GP and/or specialist)	%	42.2	43.8	42.6	40.9	45.9	..	30.4	..	42.6
Dental consultation	%	7.1	8.2	7.2	6.0	9.7	..	7.0	..	7.5
Consultation with other health professional	%	17.0	19.0	24.5	25.1	24.1	..	27.4	..	20.3
Total accessing health care (d)	%	61.2	63.4	64.0	63.8	67.4	..	58.5	..	62.9
Inner regional										
Admitted to hospital	%	27.8	28.0	23.4	20.0	20.8	32.1	..	..	26.2
Casualty/outpatients/day clinic	%	10.4	10.5	12.4	9.6	17.5	15.2	..	..	11.7

Table EA.21

Table EA.21 Proportion of people who accessed health services by health status, by remoteness of residence, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Doctor consultation (GP and/or specialist)	%	42.3	44.9	43.7	35.7	25.8	53.1	..	..	43.0
Dental consultation	%	2.3	4.2	5.4	np	np	4.6	..	..	4.1
Consultation with other health professional	%	30.5	29.1	20.8	24.4	13.9	22.9	..	..	25.7
Total accessing health care (d)	%	61.5	71.4	63.8	65.1	53.6	67.9	..	..	64.9
Outer regional										
Admitted to hospital	%	30.0	36.3	30.3	30.0	20.1	21.5	..	53.9	30.2
Casualty/outpatients/day clinic	%	4.0	12.4	6.0	np	10.3	8.2	..	np	6.8
Doctor consultation (GP and/or specialist)	%	38.3	44.1	40.0	36.2	34.5	32.8	..	34.1	38.4
Dental consultation	%	3.7	np	2.5	4.1	8.8	2.4	..	np	3.7
Consultation with other health professional	%	19.0	27.8	30.1	np	26.1	14.0	..	np	23.4
Total accessing health care (d)	%	56.0	59.9	60.2	55.9	56.0	45.4	..	53.9	56.7
Remote										
Admitted to hospital	%	np	..	20.6	np	np	10.9	..	np	16.1
Casualty/outpatients/day clinic	%	np	..	np	np	np	np	..	np	10.5
Doctor consultation (GP and/or specialist)	%	np	..	29.6	38.1	12.8	25.9	..	44.3	32.8
Dental consultation	%	-	..	np	np	np	-	..	np	6.6
Consultation with other health professional	%	np	..	np	-	52.2	19.4	..	57.7	27.3
Total accessing health care (d)	%	43.7	..	71.8	61.1	65.0	49.5	..	82.3	66.4

(a) Rates are age standardised by State/Territory to the 2001 estimated resident population (5 year ranges from 15+).

Table EA.21

Table EA.21 Proportion of people who accessed health services by health status, by remoteness of residence, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
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(b) Persons who accessed at least one of the health services noted in the table in the last two weeks or were admitted to hospital in the last 12 months.

(c) Limited to people aged 15 years or over.

(d) Total persons accessing any of the selected health services above. Components may not add to total because persons may have accessed more than one type of health service.

.. Not applicable. – Nil or rounded to zero. **np** Not published.

Source: ABS (unpublished) *National Health Survey, 2004-05*.

Table EA.22

Table EA.22 RSEs and 95 per cent confidence intervals for the proportion of people who accessed health services by health status, by remoteness of residence, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
RSE for Health status (excellent/very good/good)										
Major cities										
Admitted to hospital	%	5.1	6.8	6.6	6.5	5.2	..	8.1	..	3.0
Casualty/outpatients/day clinic	%	11.3	10.2	15.1	13.2	11.7	..	16.9	..	5.8
Doctor consultation (GP and/or specialist)	%	4.0	4.0	6.8	5.5	5.0	..	7.7	..	2.3
Dental consultation	%	8.4	10.5	10.3	10.7	8.7	..	12.7	..	4.6
Consultation with other health professional	%	5.8	5.7	8.3	7.6	5.6	..	7.1	..	3.1
Total accessing health care (d)	%	2.5	2.7	3.6	3.3	3.1	..	4.3	..	1.5
Inner regional										
Admitted to hospital	%	10.1	10.6	11.9	15.5	11.7	7.9	..	..	4.8
Casualty/outpatients/day clinic	%	28.3	17.7	22.2	28.3	35.7	12.1	..	..	10.5
Doctor consultation (GP and/or specialist)	%	8.7	10.7	7.3	15.9	14.4	5.7	..	..	3.9
Dental consultation	%	18.1	19.0	18.1	30.5	20.7	11.2	..	..	8.8
Consultation with other health professional	%	12.0	11.8	9.4	14.7	16.5	8.5	..	..	5.7
Total accessing health care (d)	%	5.9	7.3	5.0	9.8	7.9	3.9	..	..	2.9
Outer regional										
Admitted to hospital	%	16.9	23.1	12.1	16.5	15.6	14.3	..	44.1	7.1
Casualty/outpatients/day clinic	%	32.4	30.2	20.8	27.7	21.6	np	..	np	12.6
Doctor consultation (GP and/or specialist)	%	17.8	17.1	8.8	18.7	12.6	9.0	..	35.7	6.3
Dental consultation	%	28.7	34.9	21.3	33.9	27.4	20.6	..	82.8	13.2

Table EA.22

Table EA.22 RSEs and 95 per cent confidence intervals for the proportion of people who accessed health services by health status, by remoteness of residence, 2004-05 (a), (b), (c)

Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Consultation with other health professional	18.1	21.9	13.2	14.9	16.7	14.9	..	66.8	8.9
Total accessing health care (d)	9.3	11.6	5.4	8.9	9.0	6.9	..	25.4	4.4
Remote									
Admitted to hospital	np	..	40.6	22.1	25.5	75.1	..	np	13.8
Casualty/outpatients/day clinic	np	..	56.3	56.1	54.8	np	..	np	32.1
Doctor consultation (GP and/or specialist)	77.2	..	26.4	32.4	17.3	np	..	np	16.5
Dental consultation	-	..	np	67.5	47.3	np	..	36.6	29.0
Consultation with other health professional	-	..	39.5	36.6	14.3	52.3	..	60.2	16.5
Total accessing health care (d)	42.7	..	16.2	17.2	12.6	41.9	..	54.6	9.5
RSE for Health status (fair/poor)									
Major cities									
Admitted to hospital	11.6	9.8	11.9	13.2	10.4	..	15.7	..	5.5
Casualty/outpatients/day clinic	22.0	17.3	25.4	19.1	16.0	..	23.9	..	8.7
Doctor consultation (GP and/or specialist)	7.6	7.2	10.2	9.1	8.3	..	11.9	..	3.6
Dental consultation	28.6	25.9	24.2	33.9	28.6	..	27.4	..	13.7
Consultation with other health professional	11.6	13.9	15.3	15.0	11.1	..	14.7	..	5.7
Total accessing health care (d)	6.0	5.6	6.8	7.0	4.8	..	7.2	..	2.9
Inner regional									
Admitted to hospital	14.7	21.1	14.4	31.9	27.7	10.6	..	..	7.8
Casualty/outpatients/day clinic	32.6	34.4	27.9	46.5	49.6	20.8	..	..	13.3

Table EA.22

Table EA.22 RSEs and 95 per cent confidence intervals for the proportion of people who accessed health services by health status, by remoteness of residence, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Doctor consultation (GP and/or specialist)	%	12.9	14.8	10.9	22.8	23.3	9.4	..	..	5.6
Dental consultation	%	68.0	59.5	41.5	np	np	40.3	..	..	23.7
Consultation with other health professional	%	22.7	25.7	16.1	44.5	40.6	15.6	..	..	12.1
Total accessing health care (d)	%	8.8	7.1	7.3	13.1	12.1	6.1	..	..	3.8
Outer regional										
Admitted to hospital	%	20.8	23.2	15.7	29.7	25.6	23.8	..	56.0	10.5
Casualty/outpatients/day clinic	%	44.7	23.9	43.0	np	36.0	43.9	..	np	18.9
Doctor consultation (GP and/or specialist)	%	16.7	17.4	14.8	32.6	23.6	19.4	..	66.7	8.1
Dental consultation	%	42.5	np	64.5	65.3	55.4	52.0	..	np	24.7
Consultation with other health professional	%	28.1	29.5	18.6	np	27.7	30.5	..	np	14.9
Total accessing health care (d)	%	11.5	14.5	9.4	19.3	15.7	17.0	..	56.0	5.9
Remote										
Admitted to hospital	%	np	..	57.8	np	np	57.6	..	np	38.2
Casualty/outpatients/day clinic	%	np	..	np	np	np	np	..	np	47.1
Doctor consultation (GP and/or specialist)	%	np	..	65.5	28.9	52.0	35.9	..	57.2	25.3
Dental consultation	%	–	..	np	np	np	–	..	np	62.3
Consultation with other health professional	%	np	..	np	–	55.4	71.0	..	26.0	31.4
Total accessing health care (d)	%	138.3	..	21.5	46.4	36.0	23.1	..	15.6	12.9

Table EA.22

Table EA.22 RSEs and 95 per cent confidence intervals for the proportion of people who accessed health services by health status, by remoteness of residence, 2004-05 (a), (b), (c)

Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
95 per cent confidence interval for Health status (excellent/very good/good)									
Major cities									
Admitted to hospital	± %	1.4	1.8	1.8	1.3	..	2.1	..	0.8
Casualty/outpatients/day clinic	± %	0.8	1.1	1.3	1.0	..	1.3	..	0.5
Doctor consultation (GP and/or specialist)	± %	1.7	1.8	2.8	2.2	..	3.0	..	1.0
Dental consultation	± %	0.9	1.2	1.1	1.1	..	1.4	..	0.5
Consultation with other health professional	± %	1.4	1.5	2.3	1.6	..	1.7	..	0.8
Total accessing health care (d)	± %	2.1	2.3	3.0	2.7	..	3.3	..	1.2
Inner regional									
Admitted to hospital	± %	3.3	3.1	2.7	3.4	2.2	..	..	1.4
Casualty/outpatients/day clinic	± %	1.7	1.7	1.4	2.3	1.1	..	..	0.8
Doctor consultation (GP and/or specialist)	± %	3.1	3.4	3.0	5.2	2.4	..	..	1.4
Dental consultation	± %	1.9	2.4	2.2	3.2	1.3	..	..	1.0
Consultation with other health professional	± %	2.6	3.3	2.8	4.6	2.0	..	..	1.5
Total accessing health care (d)	± %	4.6	5.5	4.0	6.5	3.1	..	..	2.2
Outer regional									
Admitted to hospital	± %	4.6	4.9	3.4	4.9	3.4	..	12.0	2.0
Casualty/outpatients/day clinic	± %	2.7	5.2	1.7	3.1	np	..	np	1.2
Doctor consultation (GP and/or specialist)	± %	5.4	7.6	3.1	5.5	3.9	..	18.3	2.4
Dental consultation	± %	2.9	3.4	1.6	2.5	2.4	..	3.4	1.1

Table EA.22

Table EA.22 RSEs and 95 per cent confidence intervals for the proportion of people who accessed health services by health status, by remoteness of residence, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Consultation with other health professional	± %	3.9	11.0	3.4	4.3	3.9	3.6	..	17.3	2.4
Total accessing health care (d)	± %	6.8	10.3	4.2	7.7	7.2	5.3	..	19.6	3.4
Remote										
Admitted to hospital	± %	np	..	6.4	11.4	8.5	8.4	..	np	4.4
Casualty/outpatients/day clinic	± %	np	..	7.1	10.6	4.0	np	..	np	3.7
Doctor consultation (GP and/or specialist)	± %	54.9	..	11.7	9.9	8.4	np	..	np	6.5
Dental consultation	± %	-	..	np	7.2	4.4	np	..	8.8	2.6
Consultation with other health professional	± %	-	..	9.6	8.2	4.9	5.0	..	12.2	3.7
Total accessing health care (d)	± %	39.6	..	11.9	13.6	11.3	23.6	..	34.2	7.4
95 per cent confidence interval for Health status (fair/poor)										
Major cities										
Admitted to hospital	± %	6.2	4.3	6.0	7.9	5.8	..	7.3	..	2.8
Casualty/outpatients/day clinic	± %	3.4	3.3	5.4	5.2	3.4	..	2.6	..	1.6
Doctor consultation (GP and/or specialist)	± %	6.3	6.1	8.6	7.3	7.5	..	7.1	..	3.0
Dental consultation	± %	4.0	4.2	3.4	4.0	5.4	..	3.7	..	2.0
Consultation with other health professional	± %	3.9	5.2	7.3	7.4	5.3	..	7.9	..	2.3
Total accessing health care (d)	± %	7.2	7.0	8.5	8.7	6.3	..	8.2	..	3.6
Inner regional										
Admitted to hospital	± %	8.0	11.6	6.6	12.5	11.3	6.7	..	..	4.0
Casualty/outpatients/day clinic	± %	6.7	7.1	6.8	8.7	17.0	6.2	..	..	3.0

Table EA.22

Table EA.22 RSEs and 95 per cent confidence intervals for the proportion of people who accessed health services by health status, by remoteness of residence, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Doctor consultation (GP and/or specialist)	± %	10.7	13.0	9.3	16.0	11.8	9.7	..	..	4.7
Dental consultation	± %	3.1	4.9	4.4	np	np	3.6	..	..	1.9
Consultation with other health professional	± %	13.6	14.6	6.6	21.3	11.1	7.0	..	..	6.1
Total accessing health care (d)	± %	10.6	9.9	9.2	16.7	12.7	8.1	..	..	4.8
Outer regional										
Admitted to hospital	± %	12.3	16.5	9.3	17.5	10.1	10.0	..	59.1	6.2
Casualty/outpatients/day clinic	± %	3.5	5.8	5.1	np	7.3	7.0	..	np	2.5
Doctor consultation (GP and/or specialist)	± %	12.5	15.1	11.6	23.1	16.0	12.4	..	44.7	6.1
Dental consultation	± %	3.1	np	3.1	5.2	9.6	2.7	..	np	1.8
Consultation with other health professional	± %	10.5	16.1	11.0	np	14.2	8.3	..	np	6.8
Total accessing health care (d)	± %	12.7	17.0	11.1	21.2	17.2	15.1	..	59.1	6.6
Remote										
Admitted to hospital	± %	np	..	23.3	np	np	12.3	..	np	12.0
Casualty/outpatients/day clinic	± %	np	..	np	np	np	np	..	np	9.7
Doctor consultation (GP and/or specialist)	± %	np	..	38.0	21.5	13.0	18.2	..	49.7	16.3
Dental consultation	± %	–	..	np	np	np	–	..	np	8.1
Consultation with other health professional	± %	np	..	np	–	56.7	26.9	..	29.4	16.8
Total accessing health care (d)	± %	118.5	..	30.2	55.6	45.8	22.4	..	25.2	16.8

Table EA.22

Table EA.22 RSEs and 95 per cent confidence intervals for the proportion of people who accessed health services by health status, by remoteness of residence, 2004-05 (a), (b), (c)

<i>Unit</i>	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Aust</i>
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RSE = Relative standard error. Estimates with RSEs between 25 per cent and 50 per cent should be used with caution. Estimates with RSEs greater than 50 per cent are considered too unreliable for general use.

- (a) Rates are age standardised by State/Territory to the 2001 estimated resident population (5 year ranges from 15+).
- (b) Persons who accessed at least one of the health services noted in the table in the last two weeks or were admitted to hospital in the last 12 months.
- (c) Limited to people aged 15 years or over.
- (d) Total persons accessing any of the selected health services above. Components may not add to total because persons may have accessed more than one type of health service.

.. Not applicable. – Nil or rounded to zero. **np** Not published.

Source: ABS (unpublished) *National Health Survey, 2004-05*.

Table EA.23

Table EA.23 Proportion of people who accessed health services by health status, by SEIFA, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	Health status (excellent/very good/good)						NT	Aust
					WA	SA	Tas	ACT				
Quintile 1												
Admitted to hospital	%	14.5	12.5	14.5	15.7	13.7	13.7	13.7	np	np	14.0	
Casualty/outpatients/day clinic	%	3.6	5.6	3.2	4.1	4.6	4.3	–	–	–	4.1	
Doctor consultation (GP and/or specialist)	%	25.2	25.2	21.6	15.6	23.7	21.8	np	np	np	23.5	
Dental consultation	%	4.4	2.6	3.7	7.8	3.4	4.5	–	–	–	4.0	
Consultation with other health professional	%	9.6	8.3	10.5	12.0	11.2	9.2	–	–	–	9.7	
Total accessing health care (d)	%	42.5	39.1	39.1	34.9	42.3	38.3	np	np	np	40.3	
Quintile 2												
Admitted to hospital	%	15.0	15.5	12.3	16.1	13.6	8.6	np	np	np	14.3	
Casualty/outpatients/day clinic	%	4.0	7.9	3.1	6.5	6.0	np	6.8	np	np	4.8	
Doctor consultation (GP and/or specialist)	%	20.7	20.2	21.5	23.4	23.4	20.3	np	np	np	21.4	
Dental consultation	%	4.2	4.2	4.1	4.4	6.4	8.4	np	np	np	4.4	
Consultation with other health professional	%	11.7	14.9	12.8	13.7	14.1	12.8	10.5	–	–	12.9	
Total accessing health care (d)	%	41.5	39.5	38.4	42.7	44.7	37.8	np	np	np	40.7	
Quintile 3												
Admitted to hospital	%	13.1	12.4	12.4	17.4	16.5	12.7	np	np	np	13.5	
Casualty/outpatients/day clinic	%	3.0	5.4	3.7	3.3	5.2	np	np	np	np	3.9	
Doctor consultation (GP and/or specialist)	%	19.8	18.7	20.1	20.4	27.3	22.8	12.6	51.8	20.4	20.4	
Dental consultation	%	6.4	6.0	5.6	6.4	7.0	3.2	np	np	np	6.1	

Table EA.23

Table EA.23 Proportion of people who accessed health services by health status, by SEIFA, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Consultation with other health professional	%	12.3	14.2	15.6	13.7	14.1	12.9	9.6	32.6	13.9
Total accessing health care (d)	%	41.0	39.8	43.3	44.0	48.3	41.1	16.5	66.2	42.0
Quintile 4										
Admitted to hospital	%	13.2	12.9	14.0	11.1	13.1	14.5	15.0	8.1	13.1
Casualty/outpatients/day clinic	%	3.1	5.7	4.4	3.5	3.6	6.0	2.1	–	4.3
Doctor consultation (GP and/or specialist)	%	21.8	22.2	18.6	22.0	19.8	23.8	np	np	20.8
Dental consultation	%	5.7	6.3	6.1	5.8	7.6	9.2	5.7	5.5	6.2
Consultation with other health professional	%	11.0	14.6	13.0	12.5	15.8	13.2	np	np	13.3
Total accessing health care (d)	%	42.5	41.3	40.6	39.7	43.8	44.8	37.8	19.9	41.3
Quintile 5										
Admitted to hospital	%	15.0	14.9	14.8	17.7	11.9	14.7	12.9	28.1	14.9
Casualty/outpatients/day clinic	%	3.3	4.5	3.9	5.9	3.6	5.1	np	np	4.1
Doctor consultation (GP and/or specialist)	%	18.8	21.4	20.9	27.4	17.4	17.1	20.3	30.4	20.6
Dental consultation	%	6.8	7.8	7.3	8.2	7.0	8.4	np	np	7.3
Consultation with other health professional	%	13.7	17.4	20.2	14.4	14.7	20.4	np	np	15.8
Total accessing health care (d)	%	41.7	46.2	46.2	49.2	39.1	45.6	39.8	64.3	44.1
Quintile 1										
Admitted to hospital	%	25.7	25.0	26.0	30.5	20.5	26.0	–	–	25.4
Casualty/outpatients/day clinic	%	11.2	9.6	12.1	6.4	13.7	10.6	np	np	11.0

Health status (fair/poor)

Table EA.23

Table EA.23 Proportion of people who accessed health services by health status, by SEIFA, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Doctor consultation (GP and/or specialist)	%	45.9	49.2	51.1	28.9	38.1	45.0	np	np	46.0
Dental consultation	%	4.5	5.3	np	np	7.6	3.1	-	-	4.4
Consultation with other health professional	%	15.0	15.5	25.3	10.4	13.4	16.4	-	-	17.0
Total accessing health care (d)	%	64.7	66.5	73.7	60.6	61.4	58.2	np	np	66.0
Quintile 2										
Admitted to hospital	%	33.6	30.4	30.0	27.0	27.2	18.2	np	np	30.8
Casualty/outpatients/day clinic	%	3.1	11.6	11.8	13.1	5.8	4.5	np	np	7.5
Doctor consultation (GP and/or specialist)	%	36.0	48.0	47.5	56.1	36.8	46.1	44.7	-	42.3
Dental consultation	%	6.9	5.7	4.2	np	10.3	np	-	-	6.3
Consultation with other health professional	%	18.7	25.3	30.2	34.2	23.5	18.3	np	np	24.3
Total accessing health care (d)	%	62.1	71.2	70.9	70.4	64.6	54.9	np	np	66.0
Quintile 3										
Admitted to hospital	%	23.1	24.6	28.6	28.4	20.8	34.9	-	34.6	25.4
Casualty/outpatients/day clinic	%	11.5	13.8	8.6	9.8	12.2	12.6	np	np	11.6
Doctor consultation (GP and/or specialist)	%	47.4	49.0	36.3	29.7	52.4	42.7	np	np	44.2
Dental consultation	%	3.2	2.6	9.0	4.8	9.4	np	-	np	4.7
Consultation with other health professional	%	29.0	22.1	23.8	14.4	35.3	30.5	np	np	24.6
Total accessing health care (d)	%	59.1	65.1	54.6	52.5	68.1	60.8	np	np	59.7
Quintile 4										
Admitted to hospital	%	22.0	25.7	19.6	29.1	34.0	29.8	26.2	34.1	24.6

Table EA.23

Table EA.23 Proportion of people who accessed health services by health status, by SEIFA, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Casualty/outpatients/day clinic	%	8.2	8.8	8.1	25.1	13.4	19.2	3.9	–	10.0
Doctor consultation (GP and/or specialist)	%	37.0	40.1	30.8	38.3	45.7	36.9	27.5	35.6	37.2
Dental consultation	%	11.3	4.3	np	np	9.9	np	3.8	np	7.3
Consultation with other health professional	%	18.0	22.0	18.0	33.9	29.8	22.3	np	np	22.0
Total accessing health care (d)	%	52.5	61.8	52.0	70.2	63.1	59.3	61.0	80.6	57.9
Quintile 5										
Admitted to hospital	%	32.1	18.8	22.1	26.6	26.4	26.2	np	np	25.7
Casualty/outpatients/day clinic	%	6.5	5.7	10.2	9.2	14.0	15.2	np	np	7.8
Doctor consultation (GP and/or specialist)	%	43.4	34.0	43.0	32.2	37.6	48.3	np	np	38.3
Dental consultation	%	3.7	18.9	14.0	8.7	6.7	14.1	10.1	–	10.8
Consultation with other health professional	%	18.5	27.9	19.3	21.4	22.8	20.1	np	np	23.1
Total accessing health care (d)	%	60.6	64.9	57.3	60.8	67.5	60.1	59.1	100.0	62.4

(a) Rates are age standardised by State/Territory to the 2001 estimated resident population (5 year ranges from 15+).

(b) Persons who accessed at least one of the health services noted in the table in the last two weeks or were admitted to hospital in the last 12 months.

(c) Limited to people aged 15 years or over.

(d) Total persons accessing any of the selected health services above. Components may not add to total because persons may have accessed more than one type of health service.

– Nil or rounded to zero. **np** Not published.

Source: ABS (unpublished), *National Health Survey, 2004-05*.

Table EA.24

Table EA.24 RSEs and confidence intervals for the proportion of people who accessed health services by health status, by SEIFA, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
RSE for Health status (excellent/very good/good)										
Quintile 1										
Admitted to hospital	%	9.4	13.8	11.3	20.3	12.1	10.0	np	np	6.1
Casualty/outpatients/day clinic	%	20.8	23.6	24.4	32.0	20.2	16.8	–	–	11.3
Doctor consultation (GP and/or specialist)	%	8.1	9.6	7.4	19.3	9.9	7.8	np	np	4.7
Dental consultation	%	20.7	30.1	23.5	23.3	23.6	17.4	–	–	10.9
Consultation with other health professional	%	14.7	18.2	17.2	22.7	14.4	11.8	–	–	7.5
Total accessing health care (d)	%	5.2	6.3	5.1	9.9	5.6	5.2	np	np	3.0
Quintile 2										
Admitted to hospital	%	11.5	15.1	10.4	10.0	13.1	36.9	np	np	5.9
Casualty/outpatients/day clinic	%	21.3	25.3	19.3	19.4	15.7	np	42.9	np	10.2
Doctor consultation (GP and/or specialist)	%	7.6	16.4	6.9	7.9	9.1	19.7	np	np	4.1
Dental consultation	%	17.3	26.4	18.6	19.8	15.8	33.7	np	np	8.4
Consultation with other health professional	%	9.1	15.7	11.3	11.8	11.4	21.7	95.1	–	5.7
Total accessing health care (d)	%	5.7	9.2	4.3	5.3	5.4	11.8	np	np	2.9
Quintile 3										
Admitted to hospital	%	9.3	10.3	15.8	11.5	10.5	15.8	np	np	5.1
Casualty/outpatients/day clinic	%	21.8	20.4	29.2	27.8	25.7	np	np	np	9.7
Doctor consultation (GP and/or specialist)	%	9.7	8.9	10.4	12.8	9.3	15.8	139.8	41.4	4.6
Dental consultation	%	14.9	17.7	18.7	18.4	17.3	40.3	np	np	8.2

Table EA.24

Table EA.24 RSEs and confidence intervals for the proportion of people who accessed health services by health status, by SEIFA, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Consultation with other health professional	%	11.0	10.3	10.8	15.5	13.0	21.5	69.0	72.2	5.1
Total accessing health care (d)	%	5.7	5.6	6.5	6.9	6.4	9.4	81.5	24.7	2.7
Quintile 4										
Admitted to hospital	%	14.8	11.1	9.8	17.6	10.6	21.2	14.7	37.4	5.8
Casualty/outpatients/day clinic	%	31.0	14.4	21.9	26.7	18.6	38.1	36.0	–	9.6
Doctor consultation (GP and/or specialist)	%	10.8	6.2	7.2	12.8	6.0	10.4	np	np	3.8
Dental consultation	%	15.3	17.0	16.1	26.6	13.5	25.4	29.8	82.7	7.7
Consultation with other health professional	%	13.7	9.9	10.8	18.2	8.3	24.3	np	np	5.9
Total accessing health care (d)	%	7.0	4.3	4.5	9.3	4.4	8.9	8.3	47.0	2.9
Quintile 5										
Admitted to hospital	%	9.1	11.2	14.0	13.7	12.5	20.9	9.9	79.6	5.1
Casualty/outpatients/day clinic	%	22.7	17.3	24.8	22.8	30.9	31.6	np	np	10.9
Doctor consultation (GP and/or specialist)	%	6.0	6.2	9.1	8.7	8.9	15.3	9.8	61.5	3.3
Dental consultation	%	13.4	15.6	15.2	18.7	18.6	23.5	np	np	8.0
Consultation with other health professional	%	9.7	10.3	12.8	13.0	10.0	17.1	np	np	5.9
Total accessing health care (d)	%	4.3	4.0	6.3	5.7	6.0	7.8	5.1	24.3	2.3
RSE for Health status (fair/poor)										
Quintile 1										
Admitted to hospital	%	18.1	19.5	14.7	28.0	28.7	18.1	–	–	9.7
Casualty/outpatients/day clinic	%	36.0	26.4	30.4	67.2	34.5	28.1	np	np	15.1

Table EA.24

Table EA.24 RSEs and confidence intervals for the proportion of people who accessed health services by health status, by SEIFA, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Doctor consultation (GP and/or specialist)	%	9.1	12.5	12.1	24.3	16.5	11.5	np	np	5.6
Dental consultation	%	46.9	52.1	np	np	51.1	60.7	-	-	25.6
Consultation with other health professional	%	22.5	26.7	17.7	52.2	29.8	19.5	-	-	11.6
Total accessing health care (d)	%	7.0	8.7	6.2	15.8	9.9	10.7	np	np	3.5
Quintile 2										
Admitted to hospital	%	15.7	21.1	13.3	21.9	15.6	46.8	np	np	9.5
Casualty/outpatients/day clinic	%	32.6	29.3	31.3	33.7	31.7	78.0	np	np	14.8
Doctor consultation (GP and/or specialist)	%	12.8	14.3	11.7	9.9	15.3	17.6	66.0	-	5.5
Dental consultation	%	61.3	65.4	34.1	np	51.8	np	-	-	32.5
Consultation with other health professional	%	20.8	24.4	14.0	17.4	19.5	51.9	np	np	10.0
Total accessing health care (d)	%	9.3	12.0	5.3	8.8	9.3	16.4	np	np	4.5
Quintile 3										
Admitted to hospital	%	21.3	20.3	16.0	22.7	20.1	24.4	-	115.8	10.1
Casualty/outpatients/day clinic	%	27.2	28.6	36.1	41.6	34.6	49.9	np	np	15.6
Doctor consultation (GP and/or specialist)	%	12.2	16.3	19.2	18.4	16.3	19.9	np	np	7.7
Dental consultation	%	42.4	63.1	33.8	54.9	49.6	np	-	np	21.3
Consultation with other health professional	%	22.4	22.6	21.8	34.4	23.3	26.6	np	np	12.2
Total accessing health care (d)	%	11.0	10.5	12.1	13.5	13.0	13.9	np	np	5.5

Table EA.24

Table EA.24 RSEs and confidence intervals for the proportion of people who accessed health services by health status, by SEIFA, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Quintile 4										
Admitted to hospital	%	20.2	18.6	19.8	25.9	14.1	28.3	30.2	51.4	9.0
Casualty/outpatients/day clinic	%	54.0	31.5	30.8	30.4	26.8	53.8	55.7	-	16.2
Doctor consultation (GP and/or specialist)	%	17.3	12.0	17.8	22.6	10.5	39.8	24.5	43.9	7.3
Dental consultation	%	37.8	44.1	np	np	49.2	np	62.0	np	22.8
Consultation with other health professional	%	26.4	25.5	19.7	27.7	13.1	45.4	np	np	9.8
Total accessing health care (d)	%	13.4	9.5	10.0	11.0	7.3	21.9	14.1	26.0	5.3
Quintile 5										
Admitted to hospital	%	19.2	27.1	38.4	33.5	20.6	25.6	np	np	10.3
Casualty/outpatients/day clinic	%	37.2	41.2	68.0	36.8	45.3	56.3	np	np	19.4
Doctor consultation (GP and/or specialist)	%	13.9	20.4	22.6	24.2	21.8	19.8	np	np	8.0
Dental consultation	%	51.6	36.1	39.4	70.4	45.7	46.3	31.3	-	21.2
Consultation with other health professional	%	24.5	23.1	35.9	35.4	29.3	45.4	np	np	11.1
Total accessing health care (d)	%	9.9	11.1	21.0	20.8	10.0	17.0	8.4	-	5.6
Quintile 1										
Admitted to hospital	± %	2.7	3.4	3.2	6.2	3.2	2.7	np	np	1.7
Casualty/outpatients/day clinic	± %	1.5	2.6	1.5	2.5	1.8	1.4	-	-	0.9
Doctor consultation (GP and/or specialist)	± %	4.0	4.7	3.1	5.9	4.6	3.3	np	np	2.2
Dental consultation	± %	1.8	1.5	1.7	3.6	1.6	1.5	-	-	0.9

95 per cent confidence interval for Health status (excellent/very good/good)

Table EA.24

Table EA.24 RSEs and confidence intervals for the proportion of people who accessed health services by health status, by SEIFA, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Q/d	WA	SA	Tas	ACT	NT	Aust
Consultation with other health professional	± %	2.8	3.0	3.6	5.4	3.2	2.1	–	–	1.4
Total accessing health care (d)	± %	4.3	4.8	3.9	6.8	4.7	3.9	np	np	2.4
Quintile 2										
Admitted to hospital	± %	3.4	4.6	2.5	3.2	3.5	6.2	np	np	1.7
Casualty/outpatients/day clinic	± %	1.7	3.9	1.2	2.5	1.8	np	5.7	np	1.0
Doctor consultation (GP and/or specialist)	± %	3.1	6.5	2.9	3.6	4.2	7.8	np	np	1.7
Dental consultation	± %	1.4	2.2	1.5	1.7	2.0	5.5	np	np	0.7
Consultation with other health professional	± %	2.1	4.6	2.8	3.2	3.2	5.5	19.6	–	1.4
Total accessing health care (d)	± %	4.6	7.2	3.2	4.4	4.8	8.7	np	np	2.3
Quintile 3										
Admitted to hospital	± %	2.4	2.5	3.8	3.9	3.4	3.9	np	np	1.3
Casualty/outpatients/day clinic	± %	1.3	2.2	2.1	1.8	2.6	np	np	np	0.7
Doctor consultation (GP and/or specialist)	± %	3.8	3.3	4.1	5.1	5.0	7.1	34.5	42.1	1.8
Dental consultation	± %	1.9	2.1	2.0	2.3	2.4	2.5	np	np	1.0
Consultation with other health professional	± %	2.7	2.9	3.3	4.2	3.6	5.4	13.0	46.2	1.4
Total accessing health care (d)	± %	4.5	4.4	5.5	5.9	6.0	7.5	26.3	32.1	2.2
Quintile 4										
Admitted to hospital	± %	3.8	2.8	2.7	3.8	2.7	6.0	4.3	5.9	1.5
Casualty/outpatients/day clinic	± %	1.9	1.6	1.9	1.8	1.3	4.5	1.5	–	0.8

Table EA.24

Table EA.24 RSEs and confidence intervals for the proportion of people who accessed health services by health status, by SEIFA, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Doctor consultation (GP and/or specialist)	± %	4.6	2.7	2.6	5.5	2.3	4.8	np	np	1.6
Dental consultation	± %	1.7	2.1	1.9	3.0	2.0	4.6	3.3	8.9	0.9
Consultation with other health professional	± %	2.9	2.8	2.7	4.5	2.6	6.3	np	np	1.5
Total accessing health care (d)	± %	5.8	3.4	3.6	7.2	3.8	7.8	6.1	18.3	2.4
Quintile 5										
Admitted to hospital	± %	2.7	3.3	4.1	4.8	2.9	6.0	2.5	43.9	1.5
Casualty/outpatients/day clinic	± %	1.5	1.5	1.9	2.6	2.2	3.1	np	np	0.9
Doctor consultation (GP and/or specialist)	± %	2.2	2.6	3.7	4.7	3.0	5.1	3.9	36.7	1.3
Dental consultation	± %	1.8	2.4	2.2	3.0	2.6	3.9	np	np	1.1
Consultation with other health professional	± %	2.6	3.5	5.1	3.7	2.9	6.8	np	np	1.8
Total accessing health care (d)	± %	3.5	3.6	5.7	5.4	4.6	6.9	4.0	30.6	2.0
Quintile 1										
Admitted to hospital	± %	9.1	9.5	7.5	16.7	11.5	9.2	–	–	4.8
Casualty/outpatients/day clinic	± %	7.9	5.0	7.2	8.4	9.3	5.9	np	np	3.3
Doctor consultation (GP and/or specialist)	± %	8.2	12.1	12.1	13.7	12.4	10.1	np	np	5.1
Dental consultation	± %	4.1	5.5	np	np	7.6	3.7	–	–	2.2
Consultation with other health professional	± %	6.6	8.1	8.8	10.6	7.8	6.3	–	–	3.9
Total accessing health care (d)	± %	8.9	11.4	9.0	18.7	12.0	12.3	np	np	4.6

95 per cent confidence interval for Health status (fair/poor)

Table EA.24

Table EA.24 RSEs and confidence intervals for the proportion of people who accessed health services by health status, by SEIFA, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Quintile 2										
Admitted to hospital	± %	10.4	12.6	7.8	11.6	8.3	16.7	np	np	5.8
Casualty/outpatients/day clinic	± %	2.0	6.6	7.2	8.7	3.6	6.9	np	np	2.2
Doctor consultation (GP and/or specialist)	± %	9.0	13.5	10.9	10.9	11.0	15.9	57.8	–	4.6
Dental consultation	± %	8.3	7.4	2.8	np	10.4	np	–	–	4.0
Consultation with other health professional	± %	7.6	12.1	8.3	11.7	9.0	18.6	np	np	4.8
Total accessing health care (d)	± %	11.4	16.8	7.4	12.1	11.8	17.7	np	np	5.8
Quintile 3										
Admitted to hospital	± %	9.6	9.8	9.0	12.6	8.2	16.7	–	78.5	5.0
Casualty/outpatients/day clinic	± %	6.1	7.7	6.1	8.0	8.3	12.3	np	np	3.5
Doctor consultation (GP and/or specialist)	± %	11.3	15.7	13.6	10.7	16.7	16.6	np	np	6.7
Dental consultation	± %	2.7	3.2	6.0	5.1	9.1	np	–	np	1.9
Consultation with other health professional	± %	12.7	9.8	10.2	9.7	16.2	15.9	np	np	5.9
Total accessing health care (d)	± %	12.7	13.4	13.0	13.9	17.3	16.5	np	np	6.4
Quintile 4										
Admitted to hospital	± %	8.7	9.4	7.6	14.8	9.4	16.5	15.5	34.4	4.3
Casualty/outpatients/day clinic	± %	8.7	5.4	4.9	15.0	7.0	20.2	4.2	–	3.2
Doctor consultation (GP and/or specialist)	± %	12.6	9.4	10.8	17.0	9.4	28.8	13.2	30.6	5.3
Dental consultation	± %	8.4	3.8	np	np	9.6	np	4.6	np	3.3

Table EA.24

Table EA.24 RSEs and confidence intervals for the proportion of people who accessed health services by health status, by SEIFA, 2004-05 (a), (b), (c)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Consultation with other health professional	± %	9.3	11.0	7.0	18.4	7.6	19.9	np	np	4.2
Total accessing health care (d)	± %	13.8	11.5	10.2	15.1	9.0	25.4	16.8	41.1	6.1
Quintile 5										
Admitted to hospital	± %	12.1	10.0	16.6	17.4	10.7	13.2	np	np	5.2
Casualty/outpatients/day clinic	± %	4.7	4.6	13.6	6.6	12.5	16.8	np	np	3.0
Doctor consultation (GP and/or specialist)	± %	11.8	13.6	19.0	15.3	16.1	18.7	np	np	6.0
Dental consultation	± %	3.7	13.4	10.8	12.0	6.0	12.8	6.2	–	4.5
Consultation with other health professional	± %	8.9	12.7	13.6	14.8	13.1	17.9	np	np	5.0
Total accessing health care (d)	± %	11.8	14.1	23.6	24.8	13.3	20.0	9.8	–	6.9

RSE = Relative standard error. Estimates with RSEs between 25 per cent and 50 per cent should be used with caution. Estimates with RSEs greater than 50 per cent are considered too unreliable for general use.

(a) Rates are age standardised by State/Territory to the 2001 estimated resident population (5 year ranges from 15+).

(b) Persons who accessed at least one of the health services noted in the table in the last two weeks or were admitted to hospital in the last 12 months.

(c) Limited to people aged 15 years or over.

(d) Total persons accessing any of the selected health services above. Components may not add to total because persons may have accessed more than one type of health service.

– Nil or rounded to zero. **np** Not published.

Source: ABS (unpublished) *National Health Survey, 2004-05*.

Table EA.25

Table EA.25 Rates of obesity for adults and children, by remoteness, 2007-08 (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Adults										
Remoteness of residence										
Major cities	%	21.5	23.0	22.4	23.5	23.4	..	25.0	..	22.5
Inner regional	%	28.2	27.8	27.3	29.0	24.3	25.4	-	..	27.6
Outer regional	%	32.7	40.2	29.0	32.3	26.7	28.9	..	26.8	31.3
Remote	%	35.7	-	27.1	38.0	31.5	19.8	..	45.6	35.0
Very remote (e)	%	..	..	..	..	..	..	..	..	..
Total (f)	%	23.8	24.8	25.2	25.7	23.8	26.5	24.9	32.8	24.7
Total number of obese adults	('000)	919.7	690.4	558.0	304.8	181.2	66.4	44.9	25.2	2 790.6
Children										
Remoteness of residence										
Major cities	%	8.6	6.7	8.3	5.8	np	..	6.0	..	np
Inner regional	%	8.0	6.4	8.8	np	np	7.8	-	..	7.8
Outer regional	%	14.9	-	np	np	-	5.5	..	np	10.1
Remote	%	-	-	np	-	-	-	..	-	np
Very remote (e)	%	..	..	..	..	..	..	..	..	..
Total (f)	%	8.9	6.5	9.3	np	7.4	6.8	6.0	np	7.9
Total number of obese children	('000)	74.1	34.3	48.1	13.8	10.4	3.8	2.5	np	187.9

(a) Adults are defined as persons aged 18 years and over. Children are defined as persons aged 5–17 years.

(b) Obesity for adults is defined as BMI equal to or greater than 30. Obesity for children is defined as BMI (appropriate for age and sex) that is likely to be 30 or more at age 18 years.

(c) Measured persons only.

Table EA.25 Rates of obesity for adults and children, by remoteness, 2007-08 (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
(d)	Rates are age standardised by State and Territory, to the 2001 Estimated Resident Population (5 yr ranges from 18 for adults, selected ranges from 0–17 for children).									

(e) Very remote data was not collected in the 2007-08 National Health Survey (NHS).

(f) Includes persons for whom index of disadvantage was not able to be determined.

.. Not applicable. – Nil or rounded to zero. **np** Not published.

Source: ABS (unpublished) *National Health Survey, 2007-08*.

Table EA.26

Table EA.26 RSEs and 95 per cent confidence intervals for rates of obesity for adults and children, by remoteness, 2007-08
(a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
RSE for Adults										
Remoteness of residence										
Major cities	%	7.1	6.3	7.8	8.4	5.8	..	5.2	..	3.1
Inner regional	%	9.1	9.8	7.4	12.8	16.4	8.5	-	..	4.5
Outer regional	%	10.7	15.8	10.4	15.1	18.9	10.2	..	24.2	5.1
Remote	%	40.2	-	45.3	35.8	33.4	114.9	..	35.1	17.7
Very remote (e)	%
Total (f)	%	4.7	4.9	5.0	6.3	5.0	6.1	5.2	20.8	2.3
Total obese adults	%	5.2	5.5	5.5	6.4	5.7	6.8	5.4	23.4	2.6
RSE for Children										
Remoteness of residence										
Major cities	%	19.0	26.1	31.2	27.3	np	..	21.4	..	np
Inner regional	%	47.6	39.1	38.1	np	np	34.2	-	..	19.9
Outer regional	%	91.3	-	np	np	-	50.8	..	np	43.6
Remote	%	-	-	np	-	-	-	..	-	np
Very remote (e)	%
Total (f)	%	19.2	20.9	21.9	np	30.1	29.1	21.4	np	11.1
Total obese children	%	19.0	22.5	21.8	25.2	31.2	30.0	21.7	np	11.3
95 per cent confidence interval for Adults										
Remoteness of residence										
Major cities	± %	3.0	2.8	3.4	3.9	2.7	..	2.6	..	1.4
Inner regional	± %	5.0	5.4	4.0	7.2	7.8	4.2	-	..	2.4

Table EA.26

Table EA.26 RSEs and 95 per cent confidence intervals for rates of obesity for adults and children, by remoteness, 2007-08
(a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Outer regional	± %	6.9	12.4	5.9	9.6	9.9	5.8	..	12.7	3.1
Remote	± %	28.2	-	24.0	26.7	20.6	44.5	..	31.4	12.2
Very remote (e)	± %	..	..	..	..	..	..	..	..	..
Total (f)	± %	2.2	2.4	2.5	3.2	2.3	3.2	2.5	13.4	1.1
Total obese adults	('000)	93.4	73.9	60.1	38.2	20.3	8.8	4.7	11.6	139.7
Remoteness of residence										
Major cities	± %	3.2	3.4	5.1	3.1	np	..	2.5	..	np
Inner regional	± %	7.4	4.9	6.6	np	np	5.2	-	-	3.0
Outer regional	± %	26.7	-	np	np	-	5.5	-	np	8.6
Remote	± %	-	-	np	-	-	-	-	-	np
Very remote (e)	± %	-	-	-	-	-	-	-	-	-
Total (f)	± %	3.4	2.6	4.0	np	4.4	3.9	2.5	np	1.7
Total number of obese children	('000)	27.7	15.1	20.6	6.8	6.4	2.2	1.1	np	41.5

RSE = Relative standard error. Estimates with RSEs between 25 per cent and 50 per cent should be used with caution. Estimates with RSEs greater than 50 per cent are considered too unreliable for general use.

(a) Adults are defined as persons aged 18 years and over. Children are defined as persons aged 5–17 years.

(b) Obesity for adults is defined as BMI equal to or greater than 30. Obesity for children is defined as BMI (appropriate for age and sex) that is likely to be 30 or more at age 18 years.

(c) Measured persons only.

(d) Rates are age standardised by State and Territory, to the 2001 Estimated Resident Population (5 year ranges from 18 for adults, selected ranges from 0–17 for children).

Table EA.26

Table EA.26 RSEs and 95 per cent confidence intervals for rates of obesity for adults and children, by remoteness, 2007-08 (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
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(e) Very remote data was not collected in the 2007-08 NHS.

(f) Includes persons for whom index of disadvantage was not able to be determined.

.. Not applicable. – Nil or rounded to zero. **np** Not published.

Source: ABS (unpublished) *National Health Survey, 2007-08*.

Table EA.27

Table EA.27 Rates of obesity for adults and children, by sex and age, 2007-08 (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Adults										
Male adults										
18-24	%	17.1	11.6	9.0	13.5	3.0	10.9	np	np	12.8
25-34	%	20.3	18.9	19.2	20.5	19.1	17.7	np	np	19.6
35-44	%	24.4	24.3	32.1	28.8	23.9	28.4	np	np	26.5
45-54	%	32.2	28.0	27.3	31.6	32.8	25.2	np	np	29.9
55-64	%	35.4	39.5	31.4	28.9	33.9	32.2	33.6	51.1	35.0
65-69	%	37.2	35.4	29.0	30.0	30.4	23.6	np	np	33.6
70-74	%	31.6	35.4	46.9	22.4	31.4	25.9	np	np	34.2
75 and over	%	26.1	10.1	22.5	27.9	16.7	22.2	np	np	21.5
Total male adults	%	26.9	24.4	25.2	25.3	23.8	23.6	24.9	39.0	25.6
Total male adults number	'000	522.4	344.1	269.3	152.4	90.6	28.6	23.8	18.2	1 449.5
Female adults										
18-24	%	14.2	15.7	16.8	12.1	13.1	17.1	13.6	-	14.9
25-34	%	16.2	17.2	23.7	17.1	19.0	21.1	np	np	18.4
35-44	%	18.6	27.6	22.7	23.1	24.2	39.5	np	np	22.9
45-54	%	25.3	27.0	24.4	33.0	23.1	39.2	np	np	26.5
55-64	%	30.0	40.1	32.6	35.6	33.5	24.6	22.3	-	33.4
65-69	%	17.6	33.3	39.8	34.4	43.2	30.6	29.8	-	29.6
70-74	%	28.9	23.3	29.1	35.1	35.9	43.3	38.6	-	29.2
75 and over	%	24.1	22.2	26.2	33.4	24.0	25.2	40.2	-	25.1
Total female adults	%	21.4	25.4	25.0	25.9	25.1	29.7	23.2	15.4	24.0
Total female adults number	'000	397.3	346.3	288.7	152.4	90.5	37.8	21.2	7.0	1 341.2

Table EA.27

Table EA.27 Rates of obesity for adults and children, by sex and age, 2007-08 (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
All adults										
18-24	%	15.7	13.7	13.1	12.8	7.7	13.9	np	np	13.9
25-34	%	18.4	18.1	21.4	18.9	19.0	19.4	16.7	19.1	19.0
35-44	%	21.4	25.9	27.2	25.9	24.1	34.4	np	np	24.7
45-54	%	28.8	27.5	25.8	32.3	28.2	32.3	29.2	16.3	28.2
55-64	%	32.8	39.8	32.0	32.1	33.7	28.3	28.3	42.7	34.2
65-69	%	27.4	34.4	34.4	32.3	37.7	26.9	np	np	31.6
70-74	%	30.3	29.1	37.3	29.4	33.6	33.8	np	np	31.7
75 and over	%	25.0	16.5	24.7	30.9	20.6	23.9	np	np	23.5
Total adults	%	24.2	24.9	25.1	25.6	24.4	26.7	24.1	27.4	24.8
Total adults number	'000	919.7	690.4	558.0	304.8	181.2	66.4	44.9	25.2	2 790.6
Male children										
5-14	%	9.9	3.8	11.3	3.1	np	np	4.9	-	8.1
15-17	%	23.4	9.7	12.2	4.0	np	np	15.7	-	15.2
Total male children	%	13.1	5.0	11.5	3.3	13.4	9.5	7.4	-	9.7
Total male children number	'000	56.2	13.5	31.5	4.3	9.2	2.6	1.5	-	118.9
Female children										
5-14	%	4.2	5.4	6.4	8.3	np	np	3.6	np	5.2
15-17	%	5.5	14.9	8.6	5.9	np	np	8.7	np	8.0
Total female children	%	4.5	7.2	6.8	7.7	np	4.1	4.9	np	5.8
Total female children number	'000	17.9	20.8	16.6	9.4	np	1.1	1.0	np	69.0
All children										
5-14	%	7.1	4.6	8.9	5.6	np	7.1	4.2	np	6.7
15-17	%	14.8	12.3	10.8	5.0	np	5.7	12.0	np	11.8

Table EA.27

Table EA.27 Rates of obesity for adults and children, by sex and age, 2007-08 (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Total children	%	9.0	6.2	9.3	5.4	np	6.8	6.1	np	7.8
Total children number	'000	74.1	34.3	48.1	13.8	np	3.8	2.5	np	187.9

(a) Adults are defined as persons aged 18 years and over. Children are defined as persons aged 5–17 years.

(b) Obesity for adults is defined as BMI equal to or greater than 30. Obesity for children is defined as BMI (appropriate for age and sex) that is likely to be 30 or more at age 18 years.

(c) Includes measured persons only.

(d) Rates are age standardised by State and Territory, to the 2001 Estimated Resident Population (5 year ranges from 18 for adults, and 5 year ranges from 0 for children).

– Nil or rounded to zero. **np** Not published.

Source: ABS (unpublished) *National Health Survey, 2007-08*.

Table EA.28

Table EA.28 RSEs and 95 per cent confidence intervals for rates of obesity for adults and children, by sex and age, 2007-08
(a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
RSE for Adults										
Male adults										
18-24	%	30.3	36.6	32.8	29.5	59.4	51.2	np	np	18.2
25-34	%	14.7	20.7	20.8	17.3	20.0	28.1	np	np	9.3
35-44	%	14.3	12.5	10.7	14.7	17.6	20.4	np	np	5.9
45-54	%	13.1	12.6	15.5	18.2	13.3	18.1	np	np	6.3
55-64	%	11.7	13.3	13.2	17.3	15.1	17.9	14.8	53.4	5.7
65-69	%	17.2	20.5	29.3	25.4	27.0	38.5	np	np	9.9
70-74	%	22.2	26.3	21.0	41.2	27.6	35.3	np	np	11.5
75 and over	%	22.9	41.6	33.9	25.1	32.3	26.8	np	np	13.4
Total male adults	%	6.2	6.9	6.6	7.9	5.7	10.7	6.1	29.1	3.1
Total male adults number	%	6.5	6.6	7.3	8.2	6.5	10.9	7.0	30.2	3.2
Female adults										
18-24	%	32.3	34.8	23.3	35.1	44.7	37.6	33.9	np	12.2
25-34	%	14.7	19.5	15.8	21.0	18.9	25.5	np	np	8.0
35-44	%	12.4	12.4	16.3	15.2	18.6	17.2	np	np	6.4
45-54	%	11.9	16.6	15.9	15.8	21.0	15.2	np	np	6.8
55-64	%	13.0	13.1	11.9	15.5	15.7	18.8	19.8	np	6.6
65-69	%	26.5	21.6	17.5	21.8	17.4	31.3	25.9	np	8.3
70-74	%	24.7	30.0	26.4	23.2	19.5	20.6	34.4	np	12.5
75 and over	%	21.4	18.3	20.8	24.2	24.2	24.3	28.6	np	10.0
Total female adults	%	6.6	7.1	6.1	7.9	7.5	7.5	8.9	39.4	3.4
Total female adults number	%	7.1	8.1	6.8	8.1	8.2	9.3	9.7	39.8	3.8

Table EA.28

Table EA.28 RSEs and 95 per cent confidence intervals for rates of obesity for adults and children, by sex and age, 2007-08
(a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
All adults										
18-24	%	20.5	25.2	18.7	20.1	39.2	31.3	np	np	9.8
25-34	%	10.2	14.0	14.0	13.4	13.9	18.3	12.8	54.8	5.8
35-44	%	9.4	9.2	9.7	11.6	10.8	13.8	np	np	4.3
45-54	%	8.5	11.1	11.8	13.9	10.5	10.6	10.6	46.8	4.8
55-64	%	9.0	8.4	10.1	11.2	10.3	13.0	12.1	56.5	4.2
65-69	%	15.3	13.4	17.6	15.8	14.8	27.9	np	np	6.6
70-74	%	16.9	21.2	16.7	21.7	16.2	22.2	np	np	8.5
75 and over	%	16.6	17.7	17.4	18.9	18.7	13.4	np	np	8.1
Total adults	%	4.7	4.9	5.0	6.3	4.9	5.7	5.0	20.9	2.3
Total adults number	%	5.2	5.5	5.5	6.4	5.7	6.8	5.4	23.4	2.6
RSE for Children										
Male children										
5-14	%	30.7	50.3	29.5	44.4	np	np	41.1	-	16.9
15-17	%	38.0	49.4	40.0	63.3	np	np	41.6	-	24.7
Total male children	%	23.9	35.3	24.1	40.6	32.7	38.7	27.5	-	14.1
Total male children number	%	24.2	36.8	23.8	39.6	34.6	37.5	28.0	-	14.4
Female children										
5-14	%	37.7	38.0	45.6	36.2	np	np	53.0	np	21.0
15-17	%	64.7	39.5	51.9	60.3	np	np	54.1	np	22.8
Total female children	%	31.5	25.8	36.7	30.8	np	40.1	44.0	np	15.6
Total female children number	%	31.7	26.6	37.0	32.5	np	40.9	45.1	np	15.8

Table EA.28

Table EA.28 RSEs and 95 per cent confidence intervals for rates of obesity for adults and children, by sex and age, 2007-08
(a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
All children										
5-14	%	23.0	29.4	26.7	29.5	np	35.8	29.1	np	13.7
15-17	%	31.9	28.7	35.0	44.6	np	49.2	31.9	np	17.6
Total children	%	19.1	20.9	22.1	25.3	np	29.7	21.5	np	11.1
Total children number	%	19.0	22.5	21.8	25.2	np	30.0	21.7	np	11.3
95 per cent confidence interval for Adults										
Male adults										
18-24	± %	10.2	8.3	5.8	7.8	3.5	10.9	np	np	4.6
25-34	± %	5.9	7.7	7.9	7.0	7.5	9.7	np	np	3.6
35-44	± %	6.9	6.0	6.7	8.3	8.3	11.4	np	np	3.1
45-54	± %	8.3	6.9	8.3	11.3	8.6	8.9	np	np	3.7
55-64	± %	8.2	10.3	8.2	9.8	10.1	11.3	9.8	53.5	3.9
65-69	± %	12.6	14.3	16.7	14.9	16.1	17.8	np	np	6.6
70-74	± %	13.7	18.2	19.3	18.1	17.0	17.9	np	np	7.7
75 and over	± %	11.7	8.2	15.0	13.7	10.6	11.7	np	np	5.6
Total male adults	± %	3.3	3.3	3.3	3.9	2.7	5.0	3.0	22.3	1.6
Total male adults number	('000)	66.9	44.4	38.3	24.6	11.5	6.1	3.3	10.8	90.2
Female adults										
18-24	± %	9.0	10.7	7.7	8.3	11.5	12.6	9.0	np	3.6
25-34	± %	4.7	6.6	7.3	7.1	7.0	10.6	np	np	2.9
35-44	± %	4.5	6.7	7.3	6.9	8.8	13.3	np	np	2.9
45-54	± %	5.9	8.8	7.6	10.2	9.5	11.7	np	np	3.6
55-64	± %	7.7	10.3	7.6	10.8	10.3	9.1	8.7	np	4.3
65-69	± %	9.1	14.1	13.6	14.7	14.7	18.7	15.1	np	4.8

Table EA.28

Table EA.28 RSEs and 95 per cent confidence intervals for rates of obesity for adults and children, by sex and age, 2007-08
(a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
70-74	± %	14.0	13.7	15.1	15.9	13.7	17.5	26.0	np	7.2
75 and over	± %	10.2	8.0	10.7	15.9	11.4	12.0	22.6	np	4.9
Total female adults	± %	2.8	3.5	3.0	4.0	3.7	4.3	4.1	11.9	1.6
Total female adults number	('000)	55.1	55.0	38.7	24.1	14.6	6.9	4.0	5.5	98.7
All adults										
18-24	± %	6.3	6.8	4.8	5.0	5.9	8.5	np	np	2.7
25-34	± %	3.7	5.0	5.9	5.0	5.2	7.0	4.2	20.5	2.2
35-44	± %	4.0	4.7	5.2	5.9	5.1	9.3	np	np	2.1
45-54	± %	4.8	6.0	6.0	8.8	5.8	6.7	6.1	14.9	2.7
55-64	± %	5.8	6.6	6.3	7.0	6.8	7.2	6.7	47.2	2.8
65-69	± %	8.2	9.0	11.8	10.0	10.9	14.7	np	np	4.1
70-74	± %	10.0	12.1	12.2	12.5	10.6	14.7	np	np	5.3
75 and over	± %	8.1	5.7	8.4	11.4	7.6	6.3	np	np	3.7
Total adults	± %	2.2	2.4	2.5	3.2	2.3	3.0	2.4	11.2	1.1
Total adults number	('000)	93.4	73.9	60.1	38.2	20.3	8.8	4.7	11.6	139.7
95 per cent confidence interval for Children										
Male children										
5-14	± %	5.9	3.8	6.5	2.7	np	np	3.9	-	2.7
15-17	± %	17.5	9.4	9.6	5.0	np	np	12.8	-	7.4
Total male children	± %	6.1	3.5	5.4	2.6	8.6	7.2	4.0	-	2.7
Total male children number	('000)	26.6	9.8	14.7	3.4	6.3	1.9	0.8	-	33.5
Female children										
5-14	± %	3.1	4.0	5.7	5.9	np	np	3.7	np	2.2
15-17	± %	6.9	11.5	8.7	7.0	np	np	9.2	np	3.6

Table EA.28

Table EA.28 RSEs and 95 per cent confidence intervals for rates of obesity for adults and children, by sex and age, 2007-08
(a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Total female children	± %	2.8	3.7	4.9	4.6	np	3.2	4.2	np	1.8
Total female children number	('000)	11.1	10.9	12.0	6.0	np	0.9	0.9	np	21.3
All children										
5-14	± %	3.2	2.7	4.6	3.2	np	5.0	2.4	np	1.8
15-17	± %	9.3	6.9	7.4	4.4	np	5.5	7.5	np	4.1
Total children	± %	3.4	2.5	4.0	2.7	np	4.0	2.6	np	1.7
Total children number	('000)	27.7	15.1	20.6	6.8	np	2.2	1.1	np	41.5

RSE = Relative standard error. Estimates with RSEs between 25 per cent and 50 per cent should be used with caution. Estimates with RSEs greater than 50 per cent are considered too unreliable for general use.

(a) Adults are defined as persons aged 18 years and over. Children are defined as persons aged 5-17 years.

(b) Obesity for adults is defined as BMI equal to or greater than 30. Obesity for children is defined as BMI (appropriate for age and sex) that is likely to be 30 or more at age 18 years.

(c) Includes measured persons only.

(d) Rates are age standardised by State and Territory, to the 2001 Estimated Resident Population (5 year ranges from 18 for adults, and 5 year ranges from 0 for children).

– Nil or rounded to zero. **np** Not published.

Source: ABS (unpublished) *National Health Survey, 2007-08*.

Table EA.29

Table EA.29 Rates of obesity for adults and children, by Indigenous status, 2004-05 (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust	
Age standardised rate	%	36.9	28.9	34.8	35.4	35.3	26.2	36.4	25.0	33.6	
95 per cent confidence intervals	± %	5.9	8.2	5.1	7.8	7.5	6.8	10.5	7.6	2.8	
RSE	%	8.1	14.5	7.5	11.2	10.8	13.3	14.7	15.5	4.2	
Number of obese population	('000)	20.1	3.1	20.8	8.7	3.9	2.0	0.7	7.5	67.7	
					Indigenous adults						
Age standardised rate	%	17.7	17.0	18.3	17.2	19.3	19.3	14.8	18.5	17.7	
95 per cent confidence intervals	± %	1.2	1.5	1.7	2.0	1.6	2.3	8.5	2.0	0.7	
RSE	%	3.5	4.6	4.7	5.8	4.3	6.1	29.2	5.5	2.0	
Number of obese population	('000)	811.7	587.2	480.0	225.0	199.4	59.1	40.3	13.2	2 415.9	
					Non-Indigenous adults						
Rate	%	na	na	na	na	na	na	na	na	na	
95 per cent confidence intervals	± %	na	na	na	na	na	na	na	na	na	
RSE	%	na	na	na	na	na	na	na	na	na	
Number of obese population	('000)	na	na	na	na	na	na	na	na	na	
					Indigenous children (15–17 yrs)						
Rate	%	na	na	na	na	na	na	na	na	na	
95 per cent confidence intervals	± %	na	na	na	na	na	na	na	na	na	
RSE	%	na	na	na	na	na	na	na	na	na	
Number of obese population	('000)	na	na	na	na	na	na	na	na	na	
					Non-Indigenous children (15–17 yrs)						
Rate	%	na	na	na	na	na	na	na	na	na	
95 per cent confidence intervals	± %	na	na	na	na	na	na	na	na	na	
RSE	%	na	na	na	na	na	na	na	na	na	
Number of obese population	('000)	na	na	na	na	na	na	na	na	na	

RSE = Relative standard error. Estimates with RSEs between 25 per cent and 50 per cent should be used with caution. Estimates with RSEs greater than 50 per cent are considered too unreliable for general use.

(a) Adults are defined as persons aged 18 years and over. Children are defined as persons aged 15–17 years (different to 2007-08 data which was for persons aged 5–17 years).

(b) Obesity for adults is defined as BMI equal to or greater than 30. Obesity for children is defined as BMI (appropriate for age and sex) that is likely to be 30 or more at age 18 years. Data is self-reported data only.

Table EA.29

Table EA.29 Rates of obesity for adults and children, by Indigenous status, 2004-05 (a), (b), (c), (d)

Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
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(c) BMI calculated from self-reported height and weight. This differs from data reported in other tables which were for measured BMI. Data excludes persons for whom height or weight was not reported.

(d) Rates are age standardised by State and Territory, to the 2001 Estimated Resident Population (10 year ranges from 18). Rates for children 15–17 are not age standardised.

na Not available.

Source : ABS (unpublished) *National Aboriginal and Torres Strait Islander Health Survey, 2004-05*; ABS (unpublished) *National Health Survey, 2004-05*.

Table EA.30

Table EA.30 Proportion of adults and children in BMI categories, 2007-08 (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Adults										
Body Mass Index (measured)										
Underweight	%	1.9	1.5	3.1	1.6	2.3	2.1	1.3	–	2.0
Normal	%	37.3	37.4	35.6	35.4	36.9	35.2	39.7	36.8	36.7
Overweight	%	37.0	36.4	36.1	37.4	37.0	36.2	34.1	30.4	36.6
Obese	%	23.8	24.8	25.2	25.7	23.8	26.5	24.9	32.8	24.7
Total	('000)	3 799.4	2 772.0	2 225.1	1 191.2	741.2	248.7	186.7	92.1	11 256.3
Children										
Body Mass Index (measured)										
Underweight	%	7.7	6.3	10.4	6.9	6.2	4.1	3.6	–	7.6
Normal	%	68.4	68.3	62.6	68.1	68.0	77.1	74.8	88.4	67.5
Overweight	%	14.9	18.9	17.7	19.6	18.4	12.1	np	np	17.0
Obese	%	8.9	6.5	9.3	5.4	7.4	6.8	np	np	7.9
Total	('000)	828.5	557.1	519.0	252.9	138.3	55.2	40.3	16.3	2 407.6

(a) Adults are defined as persons aged 18 years and over. Children are defined as persons aged 5–17 years.

(b) Obesity for adults is defined as BMI equal to or greater than 30. Obesity for children is defined as BMI (appropriate for age and sex) that is likely to be 30 or more at age 18 years.

(c) Measured persons only.

(d) Rates are age standardised by State and Territory, to the 2001 Estimated Resident Population (5 year ranges from 18 for adults, selected ranges from 5–17 for children).

– Nil or rounded to zero. **np** Not published.

Source: ABS (unpublished) *National Health Survey, 2007-08*.

Table EA.31

Table EA.31 RSEs and 95 per cent confidence intervals for the proportion of adults and children in BMI categories, 2007-08
(a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
RSE for Adults										
Body Mass Index (measured)										
Underweight	%	19.2	21.1	22.4	21.0	20.3	29.2	28.0	–	10.8
Normal	%	3.3	3.6	3.7	4.7	3.8	4.8	3.8	17.2	1.7
Overweight	%	3.3	3.2	3.6	4.1	3.9	4.3	4.1	22.2	1.7
Obese	%	4.7	4.9	5.0	6.3	5.0	6.1	5.2	20.8	2.3
Total number	%	1.6	2.2	1.9	1.7	3.0	3.2	2.9	12.0	0.9
RSE for Children										
Body Mass Index (measured)										
Underweight	%	17.0	22.6	17.3	24.1	26.9	42.6	25.1	–	9.5
Normal	%	3.6	3.9	5.2	4.6	6.1	4.7	3.5	12.3	2.2
Overweight	%	12.6	12.1	14.9	14.0	17.7	22.6	np	np	6.3
Obese	%	19.2	20.9	21.9	25.9	30.1	29.1	np	np	11.1
Total number	%	3.5	4.5	4.2	4.2	5.4	4.9	4.6	25.9	1.9
95 per cent confidence interval for Adults										
Body Mass Index (measured)										
Underweight	± %	0.7	0.6	1.4	0.6	0.9	1.2	0.7	–	0.4
Normal	± %	2.4	2.6	2.6	3.3	2.7	3.3	3.0	12.4	1.2
Overweight	± %	2.4	2.3	2.6	3.0	2.8	3.1	2.7	13.2	1.2
Obese	± %	2.2	2.4	2.5	3.2	2.3	3.2	2.5	13.4	1.1
Total number	(‘000)	119.3	119.4	84.0	38.6	42.2	15.5	10.6	16.2	194.9

Table EA.31

Table EA.31 RSEs and 95 per cent confidence intervals for the proportion of adults and children in BMI categories, 2007-08 (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
95 per cent confidence interval for Children										
Body Mass Index (measured)										
Underweight	± %	2.6	2.8	3.5	3.2	3.3	3.4	1.7	–	1.4
Normal	± %	4.8	5.2	6.4	6.1	8.1	7.0	5.1	21.3	2.9
Overweight	± %	3.7	4.5	5.2	5.4	6.4	5.4	np	np	2.1
Obese	± %	3.4	2.6	4.0	2.8	4.4	3.9	np	np	1.7
Total number	('000)	56.9	49.1	43.1	21.0	14.7	5.3	3.7	8.3	90.2

RSE = Relative standard error. Estimates with RSEs between 25 per cent and 50 per cent should be used with caution. Estimates with RSEs greater than 50 per cent are considered too unreliable for general use.

(a) Adults are defined as persons aged 18 years and over. Children are defined as persons aged 5–17 years.

(b) Obesity for adults is defined as BMI equal to or greater than 30. Obesity for children is defined as BMI (appropriate for age and sex) that is likely to be 30 or more at age 18 years.

(c) Measured persons only.

(d) Rates are age standardised by State and Territory, to the 2001 Estimated Resident Population (5 year ranges from 18 for adults, selected ranges from 0–17 for children).

– Nil or rounded to zero. **np** Not published.

Source: ABS (unpublished) *National Health Survey, 2007-08*.

Table EA.32

Table EA.32 Proportion of adults who are daily smokers, 2007-08

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Age standardised rate (a)										
Remoteness of residence										
Major cities	%	17.9	17.0	18.5	16.7	18.1	..	15.8	..	17.6
Inner regional	%	20.8	17.5	22.0	13.2	25.5	23.2	-	..	20.1
Outer regional	%	23.7	21.3	28.4	23.9	28.5	27.4	..	21.7	25.7
Remote	%	27.9	-	33.4	32.8	21.7	11.3	..	19.6	27.3
Very remote (b)	%	..	..	..	..	..	..	..	..	..
Index of disadvantage of residence										
Quintile 1	%	28.8	29.0	28.1	30.2	27.4	33.4	17.9	13.5	28.7
Quintile 2	%	19.3	17.8	28.0	23.1	24.2	24.4	26.7	18.7	21.6
Quintile 3	%	19.3	16.7	23.8	19.1	18.3	17.1	18.5	26.5	19.6
Quintile 4	%	15.6	17.4	16.2	16.2	14.1	18.9	16.6	13.7	16.2
Quintile 5	%	12.3	10.0	11.7	8.2	13.5	18.1	np	np	11.2
Total (c)	%	19.0	17.3	21.6	17.3	20.2	24.3	15.7	21.1	19.1
Total number of adult daily smokers	'000	975.4	682.5	665.2	268.6	232.9	85.1	41.9	28.8	2 980.3
RSE (per cent)										
Remoteness of residence										
Major cities	%	6.1	5.2	7.2	7.1	5.8	..	6.4	..	2.9
Inner regional	%	11.3	10.1	9.2	19.7	20.5	9.3	-	..	5.3
Outer regional	%	13.2	34.7	9.6	12.0	12.6	9.7	..	28.5	6.1
Remote	%	58.7	-	24.6	26.5	24.8	29.1	..	30.5	13.7
Very remote (b)	%	..	..	..	..	..	..	..	..	..
Index of disadvantage of residence										
Quintile 1	%	7.4	9.6	10.0	11.1	8.2	9.2	41.9	69.9	4.2
Quintile 2	%	12.3	11.4	9.4	10.6	9.2	13.6	32.5	35.2	4.9

Table EA.32

Table EA.32 Proportion of adults who are daily smokers, 2007-08

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Quintile 3	%	11.7	9.9	9.0	10.8	13.3	13.9	14.8	40.2	4.8
Quintile 4	%	10.6	11.7	11.1	16.0	12.5	22.3	13.5	136.5	5.5
Quintile 5	%	12.4	13.9	14.7	16.6	18.2	37.6	np	np	7.3
Total (c)	%	5.2	4.6	4.7	6.3	5.7	6.2	6.4	22.4	2.4
95 per cent confidence interval										
Remoteness of residence										
Major cities	± %	2.1	1.7	2.6	2.3	2.1	..	2.0	..	1.0
Inner regional	± %	4.6	3.5	4.0	5.1	10.2	4.2	–	..	2.1
Outer regional	± %	6.1	14.5	5.3	5.6	7.0	5.2	..	12.1	3.1
Remote	± %	32.2	–	16.1	17.0	10.5	6.4	..	11.7	7.3
Very remote (b)	± %
Index of disadvantage of residence										
Quintile 1	± %	4.2	5.4	5.5	6.5	4.4	6.0	14.7	18.5	2.4
Quintile 2	± %	4.6	4.0	5.2	4.8	4.4	6.5	17.0	12.9	2.1
Quintile 3	± %	4.4	3.2	4.2	4.0	4.8	4.6	5.4	20.8	1.8
Quintile 4	± %	3.2	4.0	3.5	5.1	3.5	8.2	4.4	36.6	1.7
Quintile 5	± %	3.0	2.7	3.4	2.7	4.8	13.3	np	np	1.6
Total (c)	± %	1.9	1.6	2.0	2.1	2.3	3.0	2.0	9.3	0.9

RSE = Relative standard error. Estimates with RSEs between 25 per cent and 50 per cent should be used with caution. Estimates with RSEs greater than 50 per cent are considered too unreliable for general use.

(a) Rates are age standardised by State and Territory, to the 2001 Estimated Resident Population (5 year ranges from 18 years).

(b) Very remote data was not collected in the 2007-08 NHS.

(c) Includes persons for whom an Index of disadvantage of residence score was not known.

.. Not applicable. – Nil or rounded to zero. np Not published.

Source: ABS (unpublished) *National Health Survey, 2007-08*.

Table EA.33

Table EA.33 Proportion of adults who are daily smokers, by Indigenous status, 2007-08 (a)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Age standardised rate	%	47.6	46.6	42.8	39.6	47.0	44.2	29.8	46.6	44.8
95 per cent confidence intervals	± %	4.6	4.1	4.3	4.5	5.7	5.7	7.6	5.1	2.0
RSE	%	4.9	4.5	5.1	5.8	6.2	6.6	13.1	5.6	2.3
Number of daily smokers	'000	42.5	9.3	36.6	17.2	7.9	5.1	0.9	19.2	138.7
		Indigenous adults (b)								
Age standardised rate	%	18.8	17.3	21.5	16.9	20.0	23.5	16.0	22.2	18.9
95 per cent confidence intervals	± %	1.9	1.6	2.0	2.0	2.3	3.1	2.0	12.3	0.9
RSE	%	5.1	4.8	4.6	6.2	5.8	6.7	6.4	28.2	2.4
Number of daily smokers	'000	947.0	673.0	642.3	256.9	229.5	78.6	24.7	41.5	2 893.4
		Non-Indigenous adults (c)								

RSE = Relative standard error. Estimates with RSEs between 25 per cent and 50 per cent should be used with caution. Estimates with RSEs greater than 50 per cent are considered too unreliable for general use.

(a) Rates are age standardised by State and Territory, to the 2001 Estimated Resident Population (10 year ranges from 18–55 years and over).

(b) Data for the Indigenous people are based on the ABS *National Aboriginal and Torres Strait Islander Social Survey, 2008*.

(c) Data for the non-Indigenous people are based on the ABS *National Health Survey, 2007-08*.

Source: ABS (unpublished) *National Aboriginal and Torres Strait Islander Social Survey, 2008*; ABS (unpublished) *National Health Survey, 2007-08*.

Table EA.34

Table EA.34 Proportion of adults at risk of long term harm from alcohol, 2007-08 (a)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Age standardised rate (b)	%	13.1	10.7	14.8	16.5	11.3	13.7	12.1	21.6	13.1
95 per cent confidence intervals	± %	1.4	1.4	1.7	2.0	1.5	2.6	1.8	11.8	0.7
RSE	%	5.6	6.7	5.7	6.0	6.6	9.7	7.4	27.8	2.8
Number of adults at risk	('000)	685.9	423.8	464.0	260.9	135.1	49.0	31.2	25.4	2 075.3

RSE = Relative standard error. Estimates with RSEs between 25 per cent and 50 per cent should be used with caution. Estimates with RSEs greater than 50 per cent are considered too unreliable for general use.

(a) Risky/high risk alcohol consumption in the long term.

(b) Rates are age standardised by State and Territory, to the 2001 Estimated Resident Population (5 year ranges from 18 years).

Source: ABS (unpublished) *National Health Survey, 2007-08*.

Table EA.35

Table EA.35 Proportion of adults at risk of long term harm from alcohol, by remoteness, 2007-08 (a)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Age standardised rate (b)										
Remoteness of residence										
Major cities	%	11.7	10.2	13.3	14.8	11.1	..	12.2	..	11.8
Inner regional	%	17.3	12.8	15.2	17.5	10.6	12.7	-	..	14.9
Outer regional	%	np	7.6	16.8	28.0	9.7	np	..	14.0	15.8
Remote	%	np	-	29.7	18.9	20.6	np	..	43.3	26.0
Very remote (c)	%	..	..	..	..	..	..	..	..	..
Total (d)	%	13.1	10.7	14.8	16.5	11.3	13.7	12.1	21.6	13.1
Total number of adults at risk	('000)	685.9	423.8	464.0	260.9	135.1	49.0	31.2	25.4	2 075.3
RSE (per cent)										
Remoteness of residence										
Major cities	%	5.9	8.5	7.3	7.3	7.5	..	7.4	..	3.0
Inner regional	%	8.9	14.9	11.7	17.8	32.0	14.0	-	..	6.2
Outer regional	%	np	41.6	10.9	13.5	21.9	np	..	34.2	8.8
Remote	%	np	-	48.2	48.1	27.0	np	..	42.0	19.0
Very remote (c)	%	..	..	..	..	..	..	..	..	..
Total (d)	%	5.6	6.7	5.7	6.0	6.6	9.7	7.4	27.8	2.8
95 per cent confidence interval										
Remoteness of residence										
Major cities	±%	1.3	1.7	1.9	2.1	1.6	..	1.8	..	0.7
Inner regional	±%	3.0	3.7	3.5	6.1	6.7	3.5	-	..	1.8
Outer regional	±%	np	6.2	3.6	7.4	4.2	np	..	9.4	2.7
Remote	±%	np	-	28.0	17.8	10.9	np	..	35.6	9.7
Very remote (c)	±%	..	..	..	..	..	..	..	..	..
Total (d)	±%	1.4	1.4	1.7	2.0	1.5	2.6	1.8	11.8	0.7

Table EA.35 Proportion of adults at risk of long term harm from alcohol, by remoteness, 2007-08 (a)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
RSE = Relative standard error. Estimates with RSEs between 25 per cent and 50 per cent should be used with caution. Estimates with RSEs greater than 50 per cent are considered too unreliable for general use.										

(a) Risky/high risk alcohol consumption in the long term.

(b) Rates are age standardised by State and Territory, to the 2001 Estimated Resident Population (5 year ranges from 18 years).

(c) Very remote data was not collected in the 2007-08 NHS.

(d) Includes persons for whom index of disadvantage was not able to be determined.

.. Not applicable. – Nil or rounded to zero. **np** Not published.

Source: ABS (unpublished) *National Health Survey, 2007-08*.

Table EA.36

Table EA.36 Proportion of adults at risk of long term harm from alcohol, by Indigenous status, 2004-05 (a), (b)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT (c)	NT	Aust
Age standardised rate	%	16.6	16.6	17.5	16.0	16.0	12.6	9.3	7.2	15.4
95 per cent confidence intervals	± %	3.6	8.3	4.0	3.7	7.2	3.5	5.1	3.0	1.8
RSE	%	11.0	25.5	11.6	11.7	23.0	14.0	28.1	21.2	6.1
Number of adults at risk	('000)	13.0	2.7	13.4	6.9	2.5	1.2	0.3	2.6	42.5
					Non-Indigenous adults					
Age standardised rate	%	13.0	12.2	14.3	16.3	14.7	11.6	14.2	17.5	13.5
95 per cent confidence intervals	± %	1.2	1.3	1.3	2.1	1.5	1.8	2.2	10.8	0.6
RSE	%	4.7	5.5	4.7	6.4	5.1	7.8	8.0	31.4	2.3
Number of adults at risk	('000)	645.7	458.6	399.9	231.1	165.0	39.3	34.3	16.1	1 990.0

RSE = Relative standard error. Estimates with RSEs between 25 per cent and 50 per cent should be used with caution. Estimates with RSEs greater than 50 per cent are considered too unreliable for general use.

(a) Rates are age standardised by State and Territory, to the 2001 Estimated Resident Population (10 year ranges from 0).

(b) Risky/high risk alcohol consumption in the long term.

(c) The Indigenous estimate should be treated with caution.

Source: ABS (unpublished) *National Aboriginal and Torres Strait Islander Health Survey, 2004-05*; ABS (unpublished) *National Health Survey, 2004-05*.

Table EA.37

Table EA.37 Incidence of selected cancers, 2007

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Age standardised rate per 100 000 population										
Bowel cancer (a)	rate	63.3	63.0	64.7	56.4	65.1	79.6	60.8	68.8	63.4
Lung cancer (a)	rate	42.9	43.9	44.4	41.9	40.4	49.3	37.4	54.0	43.3
Melanoma (a)	rate	47.7	39.1	63.1	45.3	34.1	41.6	33.2	24.8	46.7
Female breast cancer (b)	rate	109.6	110.2	110.4	101.5	116.3	97.4	115.1	81.8	109.2
Cervical cancer (b)	rate	7.7	5.8	6.6	7.5	5.1	7.9	4.4	10.3	6.8
Number of new cases										
Bowel cancer (a)	no	4 784	3 553	2 746	1 187	1 239	467	178	80	14 234
Lung cancer (a)	no	3 245	2 479	1 878	870	770	284	108	69	9 703
Melanoma (a)	no	3 530	2 161	2 685	962	616	234	105	49	10 342
Female breast cancer (b)	no	4 189	3 171	2 437	1 117	1 107	286	199	61	12 567
Cervical cancer (b)	no	278	160	141	79	42	21	8	10	739
95 per cent confidence interval										
Bowel cancer (a)	±	61.5–65.1	61.0–65.1	62.3–67.2	53.3–59.8	61.5–68.8	72.5–87.2	52.1–70.6	52.4–88.1	62.4–64.5
Lung cancer (a)	±	41.4–44.4	42.2–45.7	42.4–46.5	39.2–44.9	37.5–43.3	43.7–55.5	30.6–45.3	40.3–70.5	42.4–44.2
Melanoma (a)	±	46.2–49.3	37.4–40.8	60.7–65.5	42.5–48.3	31.4–36.9	36.4–47.3	27.1–40.3	18.0–33.3	45.8–47.7
Female breast cancer (b)	±	106.3–113.0	106.4–114.1	106.1–114.9	95.6–107.7	109.4–123.4	86.3–109.5	99.5–132.4	59.5–108.8	107.3–111.1
Cervical cancer (b)	±	6.8–8.6	4.9–6.8	5.5–7.8	6.0–9.4	3.6–6.9	4.8–12.1	1.9–8.7	4.7–19.2	6.3–7.3

(a) Age-standardised to the Australian population as at 30 June 2001, using five-year age groups to 84 years, and expressed per 100 000 persons.

(b) Age-standardised to the Australian population as at 30 June 2001, using five-year age groups to 84 years, and expressed per 100 000 females.

Source: AIHW (unpublished) *Australian Cancer Database*; ABS (unpublished) *Estimated Residential Population*, 30 June 2007.

Table EA.38

Table EA.38 Incidence of selected cancers by Indigenous status, 2007

Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust	no.
Age standardised rate per 100 000 population										
Bowel cancer (a)										
Indigenous rate	37.7	49.4	51.0	40.0	12.9	17.4	np	38.1	40.2	82
Other (b) rate	63.8	63.3	64.7	56.6	65.7	80.5	np	74.5	63.8	14 152
Lung cancer (a)										
Indigenous rate	55.4	77.4	95.6	65.2	60.5	55.5	–	44.1	67.2	136
Other (b) rate	42.8	43.9	43.5	41.4	40.3	48.5	np	58.5	43.0	9 567
Melanoma of the skin (a)										
Indigenous rate	np	14.0	7.3	7.0	–	–	–	np	np	np
Other (b) rate	46.2	39.3	64.1	45.9	34.7	42.7	np	31.7	46.6	10 179
Female breast cancer (c)										
Indigenous rate	71.5	41.6	75.4	94.8	28.2	74.2	–	np	68.1	86
Other (b) rate	110.0	110.3	110.9	102.4	117.4	98.6	np	87.8	109.8	12 481
Cervical cancer (c)										
Indigenous rate	15.7	8.5	5.6	22.7	22.0	–	np	np	14.0	23
Other (b) rate	7.5	5.8	6.6	7.2	5.0	7.9	np	np	6.7	716
95 per cent confidence interval										
Bowel cancer (a)										
Indigenous ±	23.1–57.5	18.2–104.8	31.4–77.4	17.3–75.7	1.5–46.7	2.1–62.8	np	14.9–75.5	31.1–50.9	..
Other (b) ±	62.0–65.6	61.3–65.5	62.3–67.2	53.4–59.9	62.1–69.5	73.3–88.2	np	56.7–95.7	62.7–64.8	..
Lung cancer (a)										
Indigenous ±	37.6–78.1	36.1–142.5	67.8–130.2	35.1–109.1	24.8–121.6	14.4–136.5	–	20.8–79.5	55.4–80.5	..
Other (b) ±	41.4–44.4	42.2–45.7	41.6–45.6	38.7–44.3	37.5–43.3	42.9–54.5	np	43.0–77.4	42.2–43.9	..
Melanoma of the skin (a)										
Indigenous ±	np	0.8–53.4	1.7–18.4	0.0–28.6	–	–	–	np	np	..

Table EA.38

Table EA.38 Incidence of selected cancers by Indigenous status, 2007

Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Other (b) ±	44.7–47.8	37.6–41.0	61.7–66.6	43.0–48.9	32.0–37.6	37.3–48.5	np	22.8–42.7	45.7–47.6
Female breast cancer (c)									
Indigenous ±	44.7–107.5	11.2–106.6	47.5–112.5	48.1–164.8	3.4–101.9	9.7–230.5	–	np	53.3–85.5
Other (b) ±	106.7–113.5	106.5–114.3	106.5–115.4	96.4–108.6	110.5–124.6	87.3–110.9	np	63.0–118.3	107.9–111.8
Cervical cancer (c)									
Indigenous ±	7.0–29.9	0.2–47.2	1.1–16.7	4.8–58.1	0.6–122.4	–	np	np	8.3–21.7
Other (b) ±	6.6–8.5	4.9–6.8	5.5–7.8	5.7–9.1	3.6–6.9	4.9–12.2	np	np	6.2–7.2

(a) Age-standardised to the Australian population as at 30 June 2001, using five-year age groups to 64 years, and expressed per 100 000 persons.

(b) 'Other' comprises non-Indigenous and unknown Indigenous status.

(c) Age-standardised to the Australian population as at 30 June 2001, using five-year age groups to 64 years, and expressed per 100 000 females.

.. Not applicable. – Nil or rounded to zero. **np** Not published.

Source: AIHW (unpublished) *Australian Cancer Database*; ABS (unpublished) *Estimated Residential Population, 30 June 2007*; ABS (2009) *Experimental Estimates and Projections, Aboriginal and Torres Strait Islander Australians, 1991 to 2021*, 30 June 2007, Series B, Cat. no. 3238.0.

Table EA.39

Table EA.39 Incidence of selected cancers by remoteness area, 2007 (a)

Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust	no.
Age standardised rate per 100 000 population										
Bowel cancer (b)										
Major cities rate	62.7	61.3	67.4	55.7	62.9	..	60.8	..	62.4	9 254
Inner regional rate	63.7	65.3	60.2	61.3	71.0	78.8	-	..	64.6	3 238
Outer regional rate	66.2	73.3	61.2	55.9	69.5	82.5	..	76.9	67.0	1 493
Remote rate	77.2	56.2	56.7	58.4	69.3	54.0	..	72.4	63.9	174
Very remote rate	133.0	..	52.0	30.0	81.5	73.9	..	np	54.1	57
Lung cancer (b)										
Major cities rate	42.2	43.1	41.5	42.3	40.0	..	37.4	..	42.0	6 216
Inner regional rate	42.6	45.3	44.0	38.3	32.6	49.6	-	..	43.3	2 184
Outer regional rate	46.6	47.7	47.5	44.4	48.7	49.5	..	54.5	47.6	1 064
Remote rate	66.8	43.1	63.2	40.7	43.8	39.9	..	60.9	52.2	148
Very remote rate	115.4	..	81.9	45.9	35.6	22.0	..	np	59.9	63
Melanoma (b)										
Major cities rate	44.0	36.1	63.0	42.2	32.8	..	33.2	..	43.7	6 465
Inner regional rate	58.4	47.9	67.2	60.6	34.8	42.2	-	..	55.5	2 610
Outer regional rate	55.8	46.1	60.1	42.8	43.9	40.3	..	27.7	50.7	1 088
Remote rate	35.7	22.9	58.6	52.5	28.6	38.6	..	30.9	45.9	136
Very remote rate	25.9	..	32.3	33.7	22.6	117.8	..	np	29.1	36
Female breast cancer (c)										
Major cities rate	109.3	111.5	116.6	103.7	120.1	..	115.1	..	111.7	8 649
Inner regional rate	110.8	108.8	102.8	102.5	99.5	102.9	-	..	106.8	2 624
Outer regional rate	110.5	95.8	96.7	87.9	119.5	88.7	..	102.6	100.6	1 109
Remote rate	90.6	109.4	96.1	92.4	70.3	60.7	..	70.2	84.1	120
Very remote rate	136.7	..	107.2	107.4	96.1	95.4	..	np	88.1	52

Table EA.39

Table EA.39 Incidence of selected cancers by remoteness area, 2007 (a)

Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Cervical cancer (c)									
Major cities rate	7.9	6.1	6.7	7.4	4.9	..	4.4	..	6.8
Inner regional rate	7.0	4.8	6.3	4.2	9.6	5.8	-	..	6.1
Outer regional rate	6.2	5.8	6.0	6.8	1.2	12.5	..	np	6.2
Remote rate	18.4	-	5.6	15.0	6.9	1.4	..	np	10.7
Very remote rate	-	..	22.6	16.6	15.9	-	..	np	17.1
95 per cent confidence interval									
Bowel cancer (b)									
Major cities	60.6-64.9	58.9-63.8	64.2-70.7	52.0-59.6	58.7-67.3	..	52.1-70.6	..	61.1-63.7
Inner regional	60.0-67.5	60.9-70.0	55.5-65.1	52.6-70.8	60.6-82.3	70.0-88.3	-	..	62.4-66.9
Outer regional	59.6-73.1	64.5-83.0	54.9-67.8	45.7-67.2	59.1-81.1	70.2-96.3	..	54.3-103.9	63.7-70.5
Remote	50.6-111.0	13.5-128.8	40.2-77.2	40.0-81.4	48.7-95.3	15.0-121.3	..	39.3-118.0	54.4-74.2
Very remote	45.9-290.5	..	30.8-81.1	13.1-56.7	36.7-151.0	8.9-266.8	..	np	40.0-71.2
Lung cancer (b)									
Major cities	40.5-44.1	41.1-45.2	39.0-44.1	39.0-45.7	36.7-43.5	..	30.6-45.3	..	41.0-43.1
Inner regional	39.6-45.8	41.7-49.2	40.0-48.2	31.6-46.0	25.5-40.5	42.4-57.3	-	..	41.5-45.2
Outer regional	41.1-52.4	40.6-55.5	42.0-53.4	35.5-54.7	39.9-58.5	39.9-60.3	..	36.3-75.9	44.7-50.5
Remote	42.6-98.6	7.7-113.2	45.8-83.9	25.6-60.2	27.8-65.6	8.0-103.6	..	32.2-98.9	43.9-61.5
Very remote	33.6-256.8	..	54.7-115.2	18.8-84.3	10.7-81.7	0.6-122.4	..	np	44.9-77.0
Melanoma (b)									
Major cities	42.2-45.8	34.3-38.0	59.9-66.2	38.9-45.6	29.8-36.1	..	27.1-40.3	..	42.6-44.7
Inner regional	54.7-62.3	44.0-52.1	62.1-72.5	51.9-70.3	27.3-43.4	35.6-49.4	-	..	53.3-57.7
Outer regional	49.4-62.7	38.5-54.7	54.0-66.5	34.0-52.8	35.0-54.1	31.4-50.4	..	18.0-39.9	47.7-53.8
Remote	18.6-60.8	0.8-91.1	41.9-78.6	37.0-70.9	15.1-47.2	5.8-99.7	..	17.4-50.3	38.3-54.3
Very remote	0.0-106.4	..	15.6-54.9	14.5-63.3	3.9-66.6	29.4-307.1	..	np	19.6-41.0

Table EA.39

Table EA.39 Incidence of selected cancers by remoteness area, 2007 (a)

Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Female breast cancer (c)									
Major cities	105.4–113.4	107.0–116.2	110.8–122.7	96.7–111.1	111.9–128.7	..	99.5–132.4	..	109.3–114.1
Inner regional	103.7–118.3	100.6–117.4	94.2–112.0	86.7–119.9	82.1–119.1	88.5–118.4	–	..	102.7–111.0
Outer regional	98.1–123.9	80.5–112.5	85.9–108.2	70.3–108.2	99.5–141.8	70.8–109.6	..	68.8–143.2	94.7–106.7
Remote	50.1–149.2	24.6–299.5	66.6–133.6	62.2–129.3	39.1–111.8	12.0–178.0	..	31.6–128.6	69.3–100.4
Very remote	18.2–401.7	..	64.7–160.0	50.3–187.1	32.5–196.5	10.8–346.8	..	np	64.3–116.8
Cervical cancer (c)									
Major cities	6.9–9.1	5.1–7.3	5.3–8.2	5.6–9.6	3.2–7.0	..	1.9–8.7	..	6.2–7.4
Inner regional	5.2–9.2	3.1–7.0	4.1–8.9	1.2–9.1	4.1–17.4	2.6–10.3	–	..	5.1–7.3
Outer regional	3.2–10.5	2.4–10.9	3.5–9.5	2.6–14.2	0.0–6.1	5.8–21.7	..	np	4.7–7.9
Remote	2.7–53.1	–	0.6–20.1	4.4–32.2	0.1–34.4	0.0–83.5	..	np	5.8–17.4
Very remote	–	..	6.4–53.6	2.9–47.0	0.0–84.3	–	..	np	8.1–30.1

(a) Remoteness areas are classified according to the Australian Standard Geographical classification (ASGC) Remoteness Area. Disaggregation by remoteness area is based on postcode of usual residence. Not all remoteness areas are represented in each State or Territory.

(b) Age-standardised to the Australian population as at 30 June 2001, using five-year age groups to 84 years, and expressed per 100 000 persons.

(c) Age-standardised to the Australian population as at 30 June 2001, using five-year age groups to 84 years, and expressed per 100 000 females.

.. Not applicable. – Nil or rounded to zero. np Not published.

Source: AIHW (unpublished) Australian Cancer Database; ABS (unpublished) concordances from Postal Area to Remoteness Area; ABS (unpublished) Estimated Residential Population, 30 June 2007.

**Table EA.40 Mortality rates, age standardised for all causes (per 1000 people)
(a), (b)**

	NSW	Vic	Qld	WA (c)	SA (d)	Tas	ACT	NT	Aust (e)
All Australians, annual									
2003	6.5	6.3	6.4	6.3	6.6	7.4	5.9	9.4	6.5
2004	6.4	6.1	6.5	6.0	6.2	7.1	5.7	8.7	6.3
2005	6.1	5.9	6.0	5.9	6.2	6.9	5.7	9.3	6.0
2006	6.0	5.9	6.0	5.8	6.0	6.8	5.5	8.7	6.0
2007	5.9	5.8	6.1	5.9	6.1	6.9	5.6	8.9	6.0
2008	6.0	5.8	6.2	5.9	6.0	6.9	5.8	9.2	6.0
Indigenous (f), (g)									
2000–2004	na	na	12.0	13.2	11.7	na	na	17.1	13.4
2001–2005	na	na	11.7	13.3	11.2	na	na	16.7	13.1
2002–2006	na	na	11.9	14.0	11.0	na	na	16.8	13.3
2003–2007	9.8	na	11.0	15.1	10.5	na	na	16.3	11.0
2004–2008	9.8	na	10.7	16.7	10.3	na	na	15.8	11.1
Non-Indigenous (h), (i)									
2000–2004	na	na	6.6	6.2	6.6	na	na	7.0	6.5
2001–2005	na	na	6.4	6.1	6.5	na	na	7.0	6.4
2002–2006	na	na	6.3	6.0	6.4	na	na	6.9	6.2
2003–2007	6.2	na	6.1	5.8	6.2	na	na	7.3	6.1
2004–2008	6.1	na	6.1	5.8	6.1	na	na	7.3	6.0

- (a) Deaths are based on year of registration of death.
- (b) Deaths per 1000 standard population. Standardised death rates use total persons in the 2001 Australian population as the standard population.
- (c) The unusually high Indigenous mortality rate for WA in 2008 is under investigation by the ABS.
- (d) Death rates data for 2007 have been revised.
- (e) Includes all states and territories.
- (f) Calculations of rates for the Indigenous population are based on *ABS Experimental Projections, Aboriginal and Torres Strait Islander Australians 1991 to 2009* (ABS Cat. no. 3238.0, low series, 2001 base). There are no comparable population data for the non-Indigenous population. Calculations of rates for comparison with the Indigenous population are derived by subtracting Indigenous population projections from total Estimated Resident Population and should be used with care, as these data include deaths and population units for which Indigenous status were not stated. ERP used in calculations are final ERP based on 2006 Census.
- (g) Historical rates in this table/figure may differ from those in previous Reports, as new Indigenous population estimates and projections have been released following the *2006 Census of Population and Housing*.
- (h) Includes deaths of non-Indigenous persons and those for whom Indigenous status was not stated.
- (i) Non-Indigenous estimates are available for census years only. In the intervening years, Indigenous population figures are derived from assumptions about past and future levels of fertility, mortality and migration. In the absence of non-Indigenous population figures for these years, it is possible to derive denominators for calculating non-Indigenous rates by subtracting the Indigenous population from the total population. Such figures have a degree of uncertainty and should be used with caution, particularly as the time from the base year of the projection series increases.

na Not available.

Table EA.40 **Mortality rates, age standardised for all causes (per 1000 people)**
(a), (b)

	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA (c)</i>	<i>SA (d)</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Aust (e)</i>
Source:	ABS (unpublished) <i>Deaths Australia, 2008</i> ; ABS (2009) <i>Deaths 2008</i> , Australia, Cat. no. 3302.0, AusInfo, Canberra.								

Table EA.41

Table EA.41 **Infant mortality rate, three year average (per 1000 live births) (a)**

	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Aust (b)</i>
All Australians									
1997–1999	5.1	5.1	6.0	5.0	4.3	6.6	5.1	12.2	5.3
1998–2000	5.1	4.9	6.1	4.7	4.3	6.4	5.3	11.9	5.3
1999–2001	5.4	5.0	5.9	4.7	4.5	6.5	4.3	11.4	5.4
2000–2002	5.0	4.8	6.0	4.6	4.8	6.1	3.5	11.2	5.2
2001–2003	4.8	5.0	5.5	4.5	4.5	6.5	4.1	10.1	5.0
2002–2004	4.6	4.9	5.3	4.1	4.0	5.6	5.4	10.1	4.8
2003–2005	4.7	4.9	5.0	4.2	4.0	4.7	6.1	9.6	4.8
2004–2006	4.8	4.6	5.2	4.5	3.8	3.7	5.9	9.7	4.8
2005–2007	4.7	4.4	5.1	4.0	4.3	3.9	4.9	9.0	4.6
2006–2008	4.5	3.9	5.1	3.6	3.5	4.0	4.6	7.8	4.3
Indigenous									
2002–2004	8.5	na	10.9	14.1	9.4	na	na	15.4	10.5
2003–2005	8.4	na	10.9	12.8	7.7	na	na	15.6	10.2
2004–2006	7.5	na	11.1	11.9	6.7	na	na	16.7	10.0
2005–2007	8.9	na	9.1	10.2	8.9	na	na	15.7	9.6
2006–2008	7.7	na	7.9	10.1	6.4	na	na	13.6	8.5
Non-Indigenous (c)									
2002–2004	4.5	na	4.8	3.4	3.8	na	na	6.3	4.5
2003–2005	4.6	na	4.6	3.6	3.9	na	na	5.2	4.6
2004–2006	4.7	na	4.8	3.9	3.7	na	na	4.7	4.6
2005–2007	4.5	na	4.8	3.5	4.1	na	na	4.2	4.4
2006–2008	4.4	na	4.8	3.0	3.4	na	na	3.8	4.1

(a) Infant deaths per 1000 live births.

(b) Includes all states and territories.

(c) Includes births and deaths of non-Indigenous persons and those for whom Indigenous status was not stated.

na Not available.

Source: ABS (various years) *Deaths Australia, 2008*, Cat. no. 3302.0, AusInfo, Canberra.

Table EA.42

Table EA.42 All causes infant and child mortality, by age group, by State and Territory (a), (b), (c), (d)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (e)
<i>2007–2009</i>										
Infants (0–1 year) (f)										
Number of deaths	no.	1 186	812	972	278	220	78	59	84	3 690
Rate	per 1000 live births (g)	4.3	3.8	5.1	3.0	3.7	3.9	4.1	7.2	4.2
Child (1–4 years)										
Number of deaths	no.	204	143	174	68	51	16	12	20	688
Rate	per 100 000 population (h)	19.2	18.0	25.5	20.2	23.0	21.0	22.5	47.0	21.0
Child (0–4 years)										
Number of deaths	no.	1 390	955	1 146	346	271	94	71	104	4 378
Rate	per 100 000 population (i)	104.1	95.0	132.1	80.9	96.3	97.7	105.9	191.9	105.9
<i>2006–2008</i>										
Infants (0–1 year) (f)										
Number of deaths	no.	1 223	817	895	315	206	79	65	90	3 691
Rate	per 1000 live births (g)	4.5	4.0	5.1	3.5	3.5	4.0	4.6	7.8	4.4
Child (1–4 years)										
Number of deaths	no.	210	129	183	65	51	13	11	16	678
Rate	per 100 000 population (h)	20.0	16.8	27.8	20.3	23.4	17.9	21.4	37.7	21.3
Child (0–4 years)										
Number of deaths	no.	1 433	946	1 078	380	257	92	76	106	4 369
Rate	per 100 000 population (i)	108.9	97.0	130.0	93.4	93.7	99.0	116.7	197.8	108.8

(a) State or Territory of usual residence.

(b) Data are presented in three-year groupings due to volatility of the small numbers involved.

Table EA.42 All causes infant and child mortality, by age group, by State and Territory (a), (b), (c), (d)

Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (e)
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(c) Data based on reference year. See data quality statements for a more detailed explanation.

(d) 2008 Estimated Resident Population used for calculating rates is revised and will be subject to a further revision process.

(e) Includes Other Territories.

(f) Includes all deaths within the first year of life.

(g) For infant deaths (less than one year), the rates represent the number of deaths per 1000 live births.

(h) For child deaths (1–4 years), the rates represent the number of deaths per 100 000 Estimated Resident Population (1–4 years) at 30 June of the mid point year of the reference period.

(i) For child deaths (0–4 years), the rates represent the number of deaths per 100 000 Estimated Resident Population (0–4 years) at 30 June of the mid point year of the reference period.

Source: ABS (unpublished) *Deaths, Australia* (cat. no. 3302.0); ABS (unpublished) *Births, Australia* (Cat. no. 3301.0); ABS (unpublished) *Causes of Death, Australia*, Cat. no. 3303.0.

Table EA.43

Table EA.43 **All causes infant (0–1 year) mortality, by Indigenous status, NSW, Queensland, WA, SA, NT and Australia (a), (b), (c), (d), (e), (f)**

	<i>Unit</i>	<i>NSW</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>NT</i>	<i>Total (g)</i>
<i>2005–2009</i>							
Number of deaths							
Indigenous	no.	131	188	99	28	106	552
Non-Indigenous	no.	1 873	1 280	418	330	46	3 947
Percentage							
Indigenous	%	6.5	12.8	19.1	7.8	69.7	12.3
Non-Indigenous	%	93.5	87.2	80.9	92.2	30.3	87.7
Rate (h)							
Indigenous	per 1000 live births	7.1	8.9	9.3	6.8	13.7	8.9
Non-Indigenous	per 1000 live births	4.3	4.7	3.2	3.7	4.1	4.2
Rate ratio (i)							
		1.6	1.9	2.9	1.8	3.4	2.1
Rate difference (j)							
		2.7	4.1	6.0	3.1	9.6	4.6
<i>2004–2008</i>							
Number of deaths							
Indigenous	no.	140	178	106	27	115	566
Non-Indigenous (k)	no.	1 876	1 201	410	311	48	3 846
Percentage							
Indigenous	%	6.9	12.9	20.5	8.0	70.6	12.8
Non-Indigenous (k)	%	93.1	87.1	79.5	92.0	29.4	87.2
Rate (h)							
Indigenous	per 1000 live births	7.8	9.2	10.6	6.9	14.9	9.6
Non-Indigenous (k)	per 1000 live births	4.4	4.7	3.3	3.6	4.4	4.3
Rate ratio (i)							
		1.8	2.0	3.2	2.0	3.4	2.3
Rate difference (j)							
		3.4	4.5	7.3	3.4	10.6	5.4
<i>2003–2007</i>							
Number of deaths							
Indigenous	no.	147	176	104	28	121	576
Non-Indigenous (k)	no.	1 831	1 136	399	314	49	3 729
Percentage							
Indigenous	%	7.4	13.4	20.7	8.2	71.2	13.4
Non-Indigenous (k)	%	92.6	86.6	79.3	91.8	28.8	86.6
Rate (h)							
Indigenous	per 1000 live births	8.6	9.5	11.3	8.0	15.5	10.3
Non-Indigenous (k)	per 1000 live births	4.4	4.7	3.4	3.7	4.5	4.3
Rate ratio (i)							
		2.0	2.0	3.3	2.2	3.4	2.4
Rate difference (j)							
		4.2	4.9	7.9	4.3	11.0	6.0

* Some totals and figures may not compute due to the effects of rounding.

(a) Includes all deaths within the first year of life.

Table EA.43 All causes infant (0–1 year) mortality, by Indigenous status, NSW, Queensland, WA, SA, NT and Australia (a), (b), (c), (d), (e), (f)

<i>Unit</i>	<i>NSW</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>NT</i>	<i>Total (g)</i>
(b)	Data are reported by jurisdiction of residence for NSW, Queensland, WA, SA and the NT only. These five states and territories are considered to have adequate levels of Indigenous identification in mortality data.					
(c)	Data are presented in five-year groupings due to volatility of the small numbers involved.					
(d)	Although most deaths of Indigenous people are registered, it is likely that some are not accurately identified as Indigenous. Therefore, these data are likely to underestimate the Indigenous all causes mortality rate.					
(e)	Deaths where Indigenous status was not stated are excluded. As a result, infant death rates by Indigenous status may be underestimated.					
(f)	Data based on reference year. See data quality statements for a more detailed explanation.					
(g)	Total includes only those five states and territories of residence that are considered to have acceptable levels of Indigenous identification in mortality data (NSW, Queensland, WA, SA and the NT).					
(h)	For infant deaths (less than one year), the rates represent the number of deaths per 1000 live births. Infant deaths per 1000 live births. The volatility in infant mortality rates is partially due to the relatively small number of infant deaths registered.					
(i)	Rate ratio is the Indigenous mortality rate divided by the non-Indigenous mortality rate.					
(j)	Rate difference is the Indigenous mortality rate less the non-Indigenous mortality rate.					
(k)	Non-Indigenous estimates are available for census years only. In the intervening years, Indigenous population figures are derived from assumptions about past and future levels of fertility, mortality and migration. In the absence of non-Indigenous population figures for these years, it is possible to derive denominators for calculating non-Indigenous rates by subtracting the Indigenous population from the total population. Such figures have a degree of uncertainty and should be used with caution, particularly as the time from the base year of the projection series increases.					

Source: ABS (unpublished) *Deaths, Australia* (Cat. no. 3302.0); ABS (unpublished) *Births, Australia* (Cat. no. 3301.0).

Table EA.44

Table EA.44 **All causes child (1–4 years) mortality, by Indigenous status, NSW, Queensland, WA, SA, NT and Australia (a), (b), (c), (d), (e), (f), (g)**

	<i>Unit</i>	<i>NSW</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>NT</i>	<i>Total (h), (i)</i>
<i>2005–2009</i>							
Number of deaths							
Indigenous	no.	26	41	29	7	26	129
Non-Indigenous	no.	318	233	89	79	9	728
Percentage							
Indigenous	%	7.6	15.0	24.6	8.1	74.3	15.1
Non-Indigenous	%	92.4	85.0	75.4	91.9	25.7	84.9
Rate (j), (k)							
Indigenous	per 100 000 population	34.1	53.8	86.5	52.7	85.0	56.1
Non-Indigenous	per 100 000 population	19.0	22.8	17.8	22.6	22.4	20.3
Rate ratio (l)							
		1.8	2.4	4.9	2.3	3.8	2.8
Rate difference (m)							
		15.1	31.0	68.7	30.0	62.6	35.8
<i>2004–2008</i>							
Number of deaths							
Indigenous	no.	27	39	27	7	22	122
Non-Indigenous (k)	no.	350	250	93	75	9	777
Percentage							
Indigenous	%	7.2	13.5	22.5	8.5	71.0	13.6
Non-Indigenous (k)	%	92.8	86.5	77.5	91.5	29.0	86.4
Rate (m)							
Indigenous	per 100 000 population	35.8	51.5	80.5	52.4	70.5	53.2
Non-Indigenous (k)	per 100 000 population	21.2	25.2	19.2	21.7	23.1	22.1
Rate ratio (l)							
		1.7	2.0	4.2	2.4	3.1	2.4
Rate difference (m)							
		14.6	26.3	61.3	30.7	47.4	31.1
<i>2003–2007</i>							
Number of deaths							
Indigenous	no.	22	43	25	5	21	116
Non-Indigenous (k)	no.	377	247	100	73	10	807
Percentage							
Indigenous	%	5.5	14.8	20.0	6.4	67.7	12.6
Non-Indigenous (k)	%	94.5	85.2	80.0	93.6	32.3	87.4
Rate (n)							
Indigenous	per 100 000 population	29.1	57.1	72.8	np	64.9	50.2
Non-Indigenous (k)	per 100 000 population	23.0	25.5	21.1	21.2	25.7	23.3
Rate ratio (l)							
		1.3	2.2	3.4	np	2.5	2.2

Table EA.44 All causes child (1–4 years) mortality, by Indigenous status, NSW, Queensland, WA, SA, NT and Australia (a), (b), (c), (d), (e), (f), (g)

<i>Unit</i>	<i>NSW</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>NT</i>	<i>Total (h), (i)</i>
Rate difference (m)	6.0	31.6	51.7	np	39.1	26.9

* Some totals and figures may not compute due to the effects of rounding.

- (a) Census year non-Indigenous and Indigenous estimates are sourced from ABS Experimental Estimates of Aboriginal and Torres Strait Islander Australians (Cat. no. 3238.0.55.001).
- (b) Includes all deaths aged 1 to 4 years.
- (c) Data are reported by jurisdiction of residence for NSW, Queensland, WA, SA and the NT only. These five states and territories are considered to have adequate levels of Indigenous identification in mortality data.
- (d) Deaths where Indigenous status was not stated are excluded. As a result, mortality rates by Indigenous status may be underestimated.
- (e) Data based on reference year. See data quality statements for a more detailed explanation.
- (f) Data are presented in five-year groupings because of small numbers each year.
- (g) Although most deaths of Indigenous people are registered, it is likely that some are not accurately identified as Indigenous. Therefore, these data are likely to underestimate the Indigenous all causes mortality rate.
- (h) Data are for NSW, Queensland, WA, SA and NT combined, based on state or territory of usual residence. Victoria, Tasmania and the ACT are excluded due to small numbers of registered Indigenous deaths.
- (i) Total includes only those five states and territories of residence that are considered to have acceptable levels of Indigenous identification in mortality data (NSW, Queensland, WA, SA and the NT).
- (j) Child death rates based on the average number of death registrations between 2005-2009, divided by the Estimated Resident Population (ERP) at 30 June 2007.
- (k) Non-Indigenous estimates are available for census years only. In the intervening years, Indigenous population figures are derived from assumptions about past and future levels of fertility, mortality and migration. In the absence of non-Indigenous population figures for these years, it is possible to derive denominators for calculating non-Indigenous rates by subtracting the Indigenous population from the total population. Such figures have a degree of uncertainty and should be used with caution, particularly as the time from the base year of the projection series increases.
- (l) Rate ratio is the Indigenous mortality rate divided by the non-Indigenous mortality rate.
- (m) Rate difference is the Indigenous mortality rate less the non-Indigenous mortality rate.
- (n) For child deaths (1–4 years), the rates represent the number of deaths per 100 000 Estimated Resident Population (1–4 years) for the mid point year.

np Not published.

Source: ABS (unpublished) *Deaths, Australia*, Cat. no. 3302.0.

Table EA.45

Table EA.45 **All causes child (0–4 years) mortality, by Indigenous status, NSW, Queensland, WA, SA, NT and Australia (a), (b), (c), (d), (e), (f)**

	<i>Unit</i>	<i>NSW</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>NT</i>	<i>Total (g), (h)</i>
<i>2005–2009</i>							
Number of deaths							
Indigenous	no.	157	229	128	35	132	681
Non-Indigenous	no.	2 191	1 513	507	409	55	4 675
Percentage							
Indigenous	%	6.7	13.1	20.2	7.9	70.6	12.7
Non-Indigenous	%	93.3	86.9	79.8	92.1	29.4	87.3
Rate (i)							
Indigenous	per 100 000 population	162.3	238.1	304.4	209.2	343.4	234.7
Non-Indigenous	per 100 000 population	104.5	117.6	79.7	92.9	108.1	103.7
Rate ratio (k)							
		1.6	2.0	3.8	2.3	3.2	2.3
Rate difference (l)							
		57.8	120.4	224.8	116.3	235.3	131.0
<i>2004–2008</i>							
Number of deaths							
Indigenous	no.	167	217	133	34	137	688
Non-Indigenous	no.	2 226	1 451	503	386	57	4 623
Percentage							
Indigenous	%	7.0	13.0	20.9	8.1	70.6	13.0
Non-Indigenous	%	93.0	87.0	79.1	91.9	29.4	87.0
Rate (j)							
Indigenous	per 100 000 population	174.8	228.7	314.4	204.3	352.5	238.7
Non-Indigenous	per 100 000 population	106.7	116.3	82.6	89.2	115.0	104.5
Rate ratio (k)							
		1.6	2.0	3.8	2.3	3.1	2.3
Rate difference (l)							
		68.1	112.3	231.8	115.1	237.5	134.2
<i>2003–2007</i>							
Number of deaths							
Indigenous	no.	169	219	129	33	142	692
Non-Indigenous	no.	2 208	1 383	499	387	59	4 536
Percentage							
Indigenous	%	7.1	13.7	20.5	7.9	70.6	13.2
Non-Indigenous	%	92.9	86.3	79.5	92.1	29.4	86.8
Rate (j)							
Indigenous	per 100 000 population	178.3	230.4	302.3	197.1	357.5	239.5
Non-Indigenous	per 100 000 population	107.9	113.9	84.2	90.2	120.6	104.7
Rate ratio (k)							
		1.7	2.0	3.6	2.2	3.0	2.3

Table EA.45 All causes child (0–4 years) mortality, by Indigenous status, NSW, Queensland, WA, SA, NT and Australia (a), (b), (c), (d), (e), (f)

<i>Unit</i>	<i>NSW</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>NT</i>	<i>Total (g), (h)</i>
Rate difference (l)	70.5	116.5	218.1	107.0	236.9	134.8

* Some totals and figures may not compute due to the effects of rounding.

- (a) Non-Indigenous estimates are available for census years only. In the intervening years, Indigenous population figures are derived from assumptions about past and future levels of fertility, mortality and migration. In the absence of non-Indigenous population figures for these years, it is possible to derive denominators for calculating non-Indigenous rates by subtracting the Indigenous population from the total population. Such figures have a degree of uncertainty and should be used with caution, particularly as the time from the base year of the projection series increases.
- (b) Includes all deaths aged 0 to 4 years.
- (c) Deaths where Indigenous status was not stated are excluded. As a result, mortality rates by Indigenous states may be underestimated.
- (d) Data based on reference year. See data quality statements for a more detailed explanation.
- (e) Data are reported by jurisdiction of residence for NSW, Queensland, WA, SA and the NT only. These five states and territories are considered to have adequate levels of Indigenous identification in mortality data.
- (f) Data are presented in five-year groupings because of small numbers each year.
- (g) Data are for NSW, Qld, WA, SA and NT combined, based on State or Territory of usual residence. Victoria, Tasmania and the ACT are excluded due to small numbers of registered Indigenous deaths.
- (h) Total includes only those five states and territories of residence that are considered to have acceptable levels of Indigenous identification in mortality data (NSW, Queensland, WA, SA and the NT).
- (i) Child death rates based on the average number of death registrations between 2005-2009, divided by the Estimated Resident Population (ERP) at 30 June 2007.
- (j) For child deaths (0–4 years), the rates represent the number of deaths per 100 000 Estimated Resident Population (0–4 years) for the mid point year.
- (k) Rate ratio is the Indigenous mortality rate divided by the non-Indigenous mortality rate.
- (l) Rate difference is the Indigenous mortality rate less the non-Indigenous mortality rate.

Source: ABS (unpublished) *Deaths, Australia*, Cat. no. 3302.0.

Table EA.46

Table EA.46 Age standardised mortality rates by major cause of death (per 100 000 persons) (a), (b), (c), (d)

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (e)
2008									
Cause of death									
Certain infectious and parasitic diseases (A00-B99)	10.3	6.3	6.8	6.5	8.7	6.1	8.2	28.2	8.2
Neoplasms (C00-D48)	178.0	182.3	188.5	175.6	184.5	205.7	167.8	229.6	182.1
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism (D50-D89)	1.9	2.2	1.7	2.8	2.7	2.0	1.4	1.0	2.1
Endocrine, nutritional and metabolic diseases (E00-E90)	21.4	25.9	26.4	26.2	24.4	32.4	22.4	83.5	24.7
Mental and behavioural disorders (F00-F99)	25.4	26.6	22.4	25.0	25.9	32.8	29.5	42.9	25.5
Diseases of the nervous system (G00-G99)	22.2	25.3	24.0	29.9	27.8	26.9	34.7	24.9	24.8
Diseases of the eye and adnexa (H00-H59)	—	—	—	0.1	0.1	—	—	—	0.1
Diseases of the ear and mastoid process (H60-H95)	—	—	—	—	—	—	—	—	—
Diseases of the circulatory system (I00-I99)	205.2	185.3	207.2	183.7	190.3	221.5	186.9	214.9	197.6
Diseases of the respiratory system (J00-J99)	48.0	45.1	47.5	43.0	45.1	57.5	35.5	88.4	46.8
Diseases of the digestive system (K00-K93)	20.5	20.5	20.4	21.2	19.9	24.7	19.6	40.9	20.7
Diseases of the skin and subcutaneous tissue (L00-L99)	2.1	1.3	1.3	1.6	1.3	1.3	1.1	2.9	1.6
Diseases of the musculoskeletal system and connective tissue (M00-M99)	4.8	4.4	4.7	5.1	4.1	8.0	9.8	8.2	4.8
Diseases of the genitourinary system (N00-N99)	13.8	12.6	13.4	11.8	14.9	12.3	14.4	38.2	13.5
Pregnancy, childbirth and the puerperium (O00-O99)	—	—	0.1	—	—	—	—	—	—
Certain conditions originating in the perinatal period (P00-P96)	3.2	2.3	3.1	1.4	2.0	2.1	5.6	4.4	2.7
Congenital malformations, deformations and chromosomal abnormalities (Q00-Q99)	2.8	2.7	3.4	2.1	2.6	2.0	1.1	2.6	2.8
Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified (R00-R99)	5.3	3.3	9.2	5.1	3.2	3.3	3.9	8.2	5.4
External causes of morbidity and mortality (V01-Y98)	34.9	37.3	41.0	47.0	39.5	49.3	37.3	100.1	39.2
Total	600.1	583.5	621.1	588.3	596.9	688.0	579.2	919.3	602.5

Table EA.46

Table EA.46 Age standardised mortality rates by major cause of death (per 100 000 persons) (a), (b), (c), (d)

Cause of death	2007									
	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (e)	
Certain infectious and parasitic diseases (A00-B99)	10.1	6.8	7.5	6.2	7.8	3.7	5.3	24.6	8.1	
Neoplasms (C00-D48)	178.2	178.8	169.4	180.4	180.0	202.8	173.0	225.3	177.9	
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism (D50-D89)	2.2	2.0	2.1	1.8	2.1	1.6	2.0	2.5	2.1	
Endocrine, nutritional and metabolic diseases (E00-E90)	20.0	25.5	21.2	25.9	24.1	36.4	24.8	62.8	23.2	
Mental and behavioural disorders (F00-F99)	25.2	24.4	18.9	21.0	25.1	27.9	31.1	40.0	23.7	
Diseases of the nervous system (G00-G99)	21.7	24.5	21.7	29.4	25.6	25.6	29.9	16.4	23.6	
Diseases of the eye and adnexa (H00-H59)	—	—	—	—	—	—	—	—	—	
Diseases of the ear and mastoid process (H60-H95)	—	—	—	—	—	0.2	—	0.4	—	
Diseases of the circulatory system (I00-I99)	202.6	185.6	206.4	185.0	203.9	229.7	179.6	249.7	198.4	
Diseases of the respiratory system (J00-J99)	49.0	46.6	58.5	45.5	45.4	58.9	38.3	68.2	49.8	
Diseases of the digestive system (K00-K93)	19.8	19.8	22.0	22.7	20.1	21.9	18.1	38.7	20.7	
Diseases of the skin and subcutaneous tissue (L00-L99)	1.8	1.2	1.5	1.0	1.8	1.7	2.6	4.8	1.5	
Diseases of the musculoskeletal system and connective tissue (M00-M99)	4.4	4.9	3.7	5.4	4.7	7.5	4.7	11.8	4.6	
Diseases of the genitourinary system (N00-N99)	13.7	13.7	14.4	13.5	14.5	17.2	9.7	34.7	14.0	
Pregnancy, childbirth and the puerperium (O00-O99)	—	—	—	0.1	0.1	—	—	—	—	
Certain conditions originating in the perinatal period (P00-P96)	3.0	2.6	3.1	1.3	2.8	2.7	3.7	4.9	2.8	
Congenital malformations, deformations and chromosomal abnormalities (Q00-Q99)	2.5	2.7	3.3	2.1	2.5	3.4	2.1	5.4	2.7	
Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified (R00-R99)	6.2	3.6	13.4	3.1	4.5	2.8	1.7	6.1	6.3	
External causes of morbidity and mortality (V01-Y98)	33.7	31.9	40.5	44.1	39.0	48.0	37.0	93.1	36.9	
Total	594.3	574.8	607.7	588.4	604.1	692.1	563.6	888.7	596.4	

Table EA.46 **Age standardised mortality rates by major cause of death (per 100 000 persons) (a), (b), (c), (d)**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (e)
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* Some totals and figures may not compute due to the effects of rounding.

(a) 2008 data have been subject to a process improvement which has increased the quality of these data. See Causes of Death, Australia, 2008 (Cat. no. 3303.0) Technical Note 1: 2008 COD Collection - Process Improvement for further information.

(b) Causes of death data for 2008 are preliminary and subject to a revisions process. See Causes of Death, Australia, 2008 (Cat. no. 3303.0) Technical Note 2: Revisions Process for further information.

Causes of death data for 2007 have been revised and are subject to further revisions. See Causes of Death, Australia, 2008 (Cat. no. 3303.0) Technical Note 2: Revisions Process for further information.

(c) Age standardised death rates enable the comparison of death rates between populations with different age structures by relating them to a standard population. The current ABS standard population is all persons in the Australian population at 30 June 2001. Standardised death rates (SDRs) are expressed per 100 000 persons. SDRs in this table have been calculated using the direct method, age standardised by 5 year age group to 95 years and over. Rates calculated using the direct method are not comparable to rates calculated using the indirect method.

(d) Data based on reference year. See data quality statements for a more detailed explanation.

(e) Includes 'Other territories'.

– Nil or rounded to zero.

Source: ABS (unpublished) Causes of Death, Australia, 2008, Cat. no. 3301.0; ABS (unpublished) Causes of Death, Australia, 2007, Cat. no. 3301.0.

Table EA.47

Table EA.47 Age standardised mortality rates and rate ratios by major cause of death, by Indigenous status (a), (b), (c), (d), (e), (f), (g), (h), (i), (j)

	NSW	Q/d	WA	SA	NT	Total (k)
2004–2008						
Cause of death	Age standardised mortality rate: Indigenous persons (per 100 000 population)					
Circulatory diseases (I00-I99)	439.6	477.7	699.6	539.1	770.6	542.7
Neoplasms (cancer) (C00-D48)	226.9	263.5	337.4	225.7	322.9	267.6
External causes of morbidity and mortality (V01-Y98)	56.5	75.4	140.4	117.6	166.6	95.2
Endocrine, metabolic and nutritional disorders (E00-E90)	60.4	146.6	217.5	108.8	222.7	135.3
Respiratory diseases (J00-J99)	116.7	112.0	208.6	143.0	273.3	152.4
Digestive diseases (K00-K93)	66.6	76.6	139.5	83.4	170.7	96.0
Kidney Diseases (N00-N29)	29.8	44.2	64.4	49.7	142.7	55.9
Conditions originating in the perinatal period (P00-P96)	4.6	6.3	6.3	5.6	9.2	6.1
Infectious and parasitic diseases (A00-B99)	19.7	22.9	35.6	20.1	58.8	28.5
Nervous system diseases (G00-G99)	26.1	24.1	66.6	52.1	51.5	37.0
Other causes (I)	66.7	78.6	166.9	70.0	144.0	96.5
All causes	1 078.6	1 310.7	2 089.7	1 428.3	2 326.4	1 497.6
	Age standardised mortality rate: Non-Indigenous persons (per 100 000 persons)					
Cause of death						
Circulatory diseases (I00-I99)	218.7	215.6	190.4	211.0	199.8	213.3
Neoplasms (cancer) (C00-D48)	182.5	178.7	178.1	184.4	185.5	181.2
External causes of morbidity and mortality (V01-Y98)	34.6	38.6	38.0	37.9	60.8	36.8
Endocrine, metabolic and nutritional disorders (E00-E90)	20.0	22.1	23.4	24.2	30.1	21.5
Respiratory diseases (J00-J99)	51.9	51.4	44.2	52.9	65.3	51.0
Digestive diseases (K00-K93)	20.5	20.4	19.8	20.8	29.0	20.4
Kidney Diseases (N00-N29)	11.2	10.0	9.5	12.6	12.6	10.9

Table EA.47

Table EA.47 Age standardised mortality rates and rate ratios by major cause of death, by Indigenous status (a), (b), (c), (d), (e), (f), (g), (h), (i), (j)

	NSW	Q/d	WA	SA	NT	Total (k)
Conditions originating in the perinatal period (P00-P96)	3.1	3.1	2.0	2.1	2.9	2.8
Infectious and parasitic diseases (A00-B99)	10.4	7.0	7.0	8.4	13.3	8.8
Nervous system diseases (G00-G99)	21.7	21.4	27.7	23.9	16.6	22.6
Other causes (l)	42.5	40.8	38.3	41.4	48.7	41.4
All causes	617.1	609.0	578.8	619.2	687.1	610.7
	Rate ratio (m)					
Cause of death						
Circulatory diseases (I00-I99)	2.0	2.2	3.7	2.6	3.9	2.5
Neoplasms (cancer) (C00-D48)	1.2	1.5	1.9	1.2	1.7	1.5
External causes of morbidity and mortality (V01-Y98)	1.6	2.0	3.7	3.1	2.7	2.6
Endocrine, metabolic and nutritional disorders (E00-E90)	3.0	6.6	9.3	4.5	7.4	6.3
Respiratory diseases (J00-J99)	2.2	2.2	4.7	2.7	4.2	3.0
Digestive diseases (K00-K93)	3.3	3.8	7.1	4.0	5.9	4.7
Kidney Diseases (N00-N29)	2.7	4.4	6.8	4.0	11.3	5.1
Conditions originating in the perinatal period (P00-P96)	1.5	2.0	3.1	2.6	3.1	2.1
Infectious and parasitic diseases (A00-B99)	1.9	3.3	5.1	2.4	4.4	3.2
Nervous system diseases (G00-G99)	1.2	1.1	2.4	2.2	3.1	1.6
Other causes (l)	1.6	1.9	4.4	1.7	3.0	2.3
All causes	1.7	2.2	3.6	2.3	3.4	2.5
2003–2007						
Cause of death	Age standardised mortality rate: Indigenous persons (per 100 000 population)					
Circulatory diseases (I00-I99)	454.9	520.0	631.1	585.6	833.7	561.2

Table EA.47

Table EA.47 Age standardised mortality rates and rate ratios by major cause of death, by Indigenous status (a), (b), (c), (d), (e), (f), (g), (h), (i), (j)

	NSW	WA	Q/Id	SA	NT	Total (k)
Neoplasms (cancer) (C00-D48)	229.5	314.2	254.8	224.1	324.3	262.3
External causes of morbidity and mortality (V01-Y98)	56.4	122.4	80.1	114.1	166.6	93.7
Endocrine, metabolic and nutritional disorders (E00-E90)	59.2	200.8	149.2	125.4	194.3	130.5
Respiratory diseases (J00-J99)	118.7	208.0	131.5	155.2	298.6	162.9
Digestive diseases (K00-K93)	69.7	124.7	78.8	80.1	188.6	97.6
Kidney Diseases (N00-N29)	25.1	59.0	41.6	52.2	140.9	52.6
Conditions originating in the perinatal period (P00-P96)	4.5	6.7	6.2	5.5	9.2	6.1
Infectious and parasitic diseases (A00-B99)	19.0	28.9	23.2	20.8	54.4	26.8
Nervous system diseases (G00-G99)	28.0	59.0	26.8	49.8	52.4	37.2
Other causes (l)	68.7	163.2	76.3	70.1	151.0	97.0
All causes	1 095.1	1 923.5	1 361.7	1 477.3	2 391.3	1 504.8
Age standardised mortality rate: Non-Indigenous persons (per 100 000 persons)						
Cause of death						
Circulatory diseases (I00-I99)	223.1	194.4	220.2	218.5	212.4	218.2
Neoplasms (cancer) (C00-D48)	182.5	179.7	178.2	184.1	188.0	181.2
External causes of morbidity and mortality (V01-Y98)	34.6	37.3	38.8	37.4	58.1	36.6
Endocrine, metabolic and nutritional disorders (E00-E90)	19.4	22.8	21.0	23.5	30.8	20.8
Respiratory diseases (J00-J99)	53.5	46.0	52.6	57.0	65.7	52.8
Digestive diseases (K00-K93)	20.4	19.6	20.6	21.1	28.8	20.5
Kidney Diseases (N00-N29)	10.8	9.2	9.5	12.0	11.7	10.4
Conditions originating in the perinatal period (P00-P96)	3.1	2.2	3.1	2.2	3.1	2.9
Infectious and parasitic diseases (A00-B99)	10.4	7.1	6.8	8.0	11.4	8.8
Nervous system diseases (G00-G99)	21.3	26.7	20.2	20.9	14.1	21.6
Other causes (l)	39.6	37.6	38.1	38.9	49.5	38.9

Table EA.47

Table EA.47 **Age standardised mortality rates and rate ratios by major cause of death, by Indigenous status (a), (b), (c), (d), (e), (f), (g), (h), (i), (j)**

	NSW	Q/d	WA	SA	NT	Total (k)
All causes	618.5	609.0	582.9	623.6	693.7	612.6
	Rate ratio (m)					
Cause of death						
Circulatory diseases (I00-I99)	2.0	2.4	3.2	2.7	3.9	2.6
Neoplasms (cancer) (C00-D48)	1.3	1.4	1.7	1.2	1.7	1.4
External causes of morbidity and mortality (V01-Y98)	1.6	2.1	3.3	3.0	2.9	2.6
Endocrine, metabolic and nutritional disorders (E00-E90)	3.1	7.1	8.8	5.3	6.3	6.3
Respiratory diseases (J00-J99)	2.2	2.5	4.5	2.7	4.5	3.1
Digestive diseases (K00-K93)	3.4	3.8	6.4	3.8	6.6	4.8
Kidney Diseases (N00-N29)	2.3	4.4	6.4	4.4	12.1	5.0
Conditions originating in the perinatal period (P00-P96)	1.4	2.0	3.1	2.6	2.9	2.1
Infectious and parasitic diseases (A00-B99)	1.8	3.4	4.1	2.6	4.8	3.0
Nervous system diseases (G00-G99)	1.3	1.3	2.2	2.4	3.7	1.7
Other causes (I)	1.7	2.0	4.3	1.8	3.1	2.5
All causes	1.8	2.2	3.3	2.4	3.4	2.5

* Some totals and figures may not compute due to the effects of rounding.

(a) 2008 data have been subject to a process improvement which has increased the quality of these data. See Causes of Death, Australia, 2008 (Cat. no. 3303.0) Technical Note 1: 2008 COD Collection - Process Improvement for further information.

(b) Causes of death data for 2008 are preliminary and subject to a revisions process. See Causes of Death, Australia, 2008 (Cat. no. 3303.0) Technical Note 2: Revisions Process for further information.

(c) Causes of death data for 2007 have been revised and are subject to further revisions. See Causes of Death, Australia, 2008 (Cat. no. 3303.0) Technical Note 2: Revisions Process for further information.

Table EA.47 Age standardised mortality rates and rate ratios by major cause of death, by Indigenous status (a), (b), (c), (d), (e), (f), (g), (h), (i), (j)

	NSW	Q/d	WA	SA	NT	Total (k)
(d)	Age standardised death rates enable the comparison of death rates between populations with different age structures by relating them to a standard population. The current ABS standard population is all persons in the Australian population at 30 June 2001. Standardised death rates (SDRs) are expressed per 100 000 persons. SDRs in this table have been calculated using the indirect method, age standardised by 5 year age group to 75 years and over. Rates calculated using the indirect method are not comparable to rates calculated using the direct method.					
(e)	Although most deaths of Indigenous people are registered, it is likely that some are not accurately identified as Indigenous. Therefore, these data are likely to underestimate the Indigenous 'all causes' mortality rate.					
(f)	Data are reported individually by jurisdiction of residence for NSW, Queensland, WA, SA and the NT only. These five states and territories are considered to have acceptable levels of Indigenous identification in mortality data.					
(g)	Data are presented in five-year groupings due to the volatility of small numbers each year.					
(h)	Data based on reference year. See data quality statements for a more detailed explanation.					
(i)	Census year non-Indigenous and Indigenous estimates are sourced from Experimental Estimates of Aboriginal and Torres Strait Islander Australians (Cat. no. 3238.0.55.001).					
(j)	Non-Indigenous estimates are available for census years only. In the intervening years, Indigenous population figures are derived from assumptions about past and future levels of fertility, mortality and migration. In the absence of non-Indigenous population figures for these years, it is possible to derive denominators for calculating non-Indigenous rates by subtracting the Indigenous population from the total population. Such figures have a degree of uncertainty and should be used with caution, particularly as the time from the base year of the projection series increases.					
(k)	Total includes only those five states and territories of residence that are considered to have acceptable levels of Indigenous identification in mortality data (NSW, Queensland, WA, SA and the NT).					
(l)	Other causes' consist of all conditions excluding the selected causes displayed in the table.					
(m)	Rate ratio is the crude Indigenous rate divided by the non-Indigenous rate.					

Source: ABS (unpublished) *Causes of Death, Australia, 2008*, Cat. no. 3301.0; ABS (unpublished) *Causes of Death, Australia, 2007*, Cat. no. 3301.0.

Table EA.48

Table EA.48 All Australians average life expectancy at birth (years) (a)

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (b)
Males									
2001–2003	77.7	78.2	77.6	78.1	77.7	76.6	79.2	72.0	77.8
2002–2004	78.0	78.5	77.8	78.6	78.0	76.7	79.7	72.3	78.1
2003–2005	78.5	79.0	78.3	78.8	78.1	77.2	79.9	72.5	78.5
2004–2006	78.6	79.3	78.5	79.1	78.6	77.4	80.0	72.1	78.7
2005–2007	79.1	79.5	78.9	79.2	78.8	77.7	80.3	72.4	79.0
2006–2008	79.2	79.6	78.9	79.3	79.2	77.7	80.1	72.6	79.2
2007–2009	79.5	79.7	79.1	79.5	79.3	77.9	80.5	73.3	79.3
Females									
2001–2003	82.9	83.1	82.8	83.0	82.7	81.4	83.8	77.3	82.8
2002–2004	83.3	83.3	82.9	83.3	83.1	81.8	83.9	78.0	83.0
2003–2005	83.3	83.6	83.2	83.8	83.4	82.1	84.0	78.2	83.3
2004–2006	83.4	83.7	83.4	83.8	83.6	82.3	83.9	78.1	83.5
2005–2007	83.8	83.8	83.6	84.0	83.9	82.4	84.0	78.4	83.7
2006–2008	83.9	83.9	83.7	84.0	83.8	82.3	84.0	78.4	83.7
2007–2009	84.3	84.1	83.8	84.1	83.9	82.2	84.3	79.0	83.9
Difference between male and female life expectancies at birth (c)									
2001–2003	5.2	4.9	5.2	4.9	5.0	4.8	4.6	5.3	5.0
2002–2004	5.3	4.8	5.1	4.7	5.1	5.1	4.2	5.7	4.9
2003–2005	4.8	4.6	4.9	5.0	5.3	4.9	4.1	5.7	4.8
2004–2006	4.8	4.4	4.9	4.7	5.0	4.9	3.9	6.0	4.8
2005–2007	4.7	4.3	4.7	4.8	5.1	4.7	3.7	6.0	4.7
2006–2008	4.7	4.3	4.8	4.7	4.6	4.6	3.9	5.8	4.5
2007–2009	4.8	4.4	4.7	4.6	4.6	4.3	3.8	5.7	4.6

(a) Life expectancy is calculated using three years of data.

(b) Figures for Australia include 'Other territories'.

(c) Differences are based on unrounded estimates.

Source: ABS (2009) and (unpublished) *Deaths, Australia, 2009*, Cat. no. 3302.0; ABS *Life Tables, Australia, 2007-2009* (Cat. no. 3302.0.55.001 to 3302.8.55.001).

Table EA.49

Table EA.49 **Estimated life expectancies at birth, by Indigenous status and sex, 2005–2007 (years) (a), (b)**

	<i>NSW</i>	<i>Qld</i>	<i>WA</i>	<i>NT</i>	<i>Aust (b)</i>
Indigenous					
Life expectancy at birth					
Males	69.9	68.3	65.0	61.5	67.2
Females	75.0	73.6	70.4	69.2	72.9
Persons (c)	72.4	70.9	67.6	65.3	70.0
Upper and lower 95 per cent confidence intervals					
Males	68.6–71.2	67.3–69.3	63.8–66.2	60.5–62.5	66.3–68.1
Females	73.9–76.1	72.8–74.4	69.4–71.4	68.4–70.0	72.1–73.7
Persons	na	na	na	na	na
Non-Indigenous					
Life expectancy at birth					
Males	78.7	78.6	79.0	75.7	78.7
Females	82.5	82.5	82.9	81.2	82.6
Difference between Indigenous and non-Indigenous life expectancies at birth					
Males (d)	8.8	10.4	14.0	14.2	11.5
Females (d)	7.5	8.9	12.5	11.9	9.7
Persons (e), (c)	8.2	9.6	13.3	13.1	10.6
Total					
Life expectancy at birth					
Males	78.5	78.4	78.7	72.0	78.5
Females	82.4	82.3	82.5	77.6	82.4

(a) Indigenous estimates of life expectancy are not available for Victoria, SA, Tasmania or the ACT due to the small number of Indigenous deaths in these jurisdictions.

(b) Australian total includes all states and territories.

(c) Life tables are constructed separately for Males and Females. Life tables were not constructed for Persons, therefore life expectancy estimates for Persons are a weighted combination of Male and Female life expectancies.

(d) Based on unrounded estimates.

(e) Based on rounded estimates.

na Not available.

Source: ABS (2009) *Experimental Life Tables for Aboriginal and Torres Strait Islander Australians, Australia, 2005–2007*, Cat. no. 3302.0.

Table EA.50

Table EA.50 Median age at death (years) (a), (b)

	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Aust (c)</i>
All Australians									
Males									
2003	76.3	76.8	75.6	75.6	77.5	75.8	74.3	57.2	76.3
2004	76.9	77.3	75.9	75.6	77.4	76.6	74.9	55.0	76.6
2005	77.0	77.4	76.1	76.0	77.7	76.3	76.0	56.8	76.8
2006	77.7	78.0	76.4	76.4	78.2	76.9	75.9	57.2	77.3
2007	77.9	78.2	76.7	76.2	78.6	76.6	76.7	59.2	77.5
2008 (d)	78.4	78.8	77.1	76.6	79.1	78.2	78.1	62.1	78.1
Females									
2003	82.6	82.7	82.0	82.2	83.0	82.1	81.4	62.8	82.4
2004	82.7	82.9	82.2	82.0	83.2	82.6	81.0	61.4	82.6
2005	83.1	83.2	82.5	82.8	83.7	82.7	82.4	57.1	83.0
2006	83.4	83.6	82.8	82.6	84.0	83.1	82.7	65.1	83.3
2007	83.6	83.9	83.1	83.1	84.2	83.6	82.5	60.3	83.5
2008 (d)	84.1	84.3	83.5	83.8	84.6	83.3	83.0	62.4	84.0
Indigenous (e), (f)									
Males									
2003	56.8	np	51.2	50.2	48.8	np	np	46.3	np
2004	55.8	np	53.7	50.0	49.5	np	np	43.8	np
2005	54.3	np	51.1	52.8	42.4	np	np	45.8	np
2006	59.3	np	55.6	47.9	50.4	np	np	45.4	np
2007	58.1	np	54.7	53.3	50.5	np	np	45.9	np
2008	59.9	np	53.2	51.2	49.0	np	np	52.1	np
Females									
2003	58.9	np	62.1	55.0	50.0	np	np	52.8	np
2004	62.7	np	57.9	63.6	53.5	np	np	54.0	np
2005	65.8	np	59.5	57.8	47.5	np	np	50.4	np
2006	64.8	np	57.0	57.0	59.3	np	np	55.3	np
2007	63.0	np	59.5	59.3	58.3	np	np	55.7	np
2008	63.8	np	62.3	64.0	53.5	np	np	56.0	np
Non-Indigenous (e), (f)									
Males									
2003	76.5	np	75.9	76.1	77.7	np	np	65.9	np
2004	77.0	np	76.2	76.3	77.6	np	np	63.0	np
2005	77.2	np	76.4	76.6	77.9	np	np	63.7	np
2006	77.8	np	76.7	76.9	78.3	np	np	64.7	np
2007	78.1	np	77.1	76.9	78.7	np	np	64.6	np
2008	78.5	np	77.3	77.1	79.2	np	np	66.3	np

Table EA.50

Table EA.50 **Median age at death (years) (a), (b)**

	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Aust (c)</i>
Females									
2003	82.7	np	82.2	82.4	83.2	np	np	74.5	np
2004	82.8	np	82.5	82.3	83.3	np	np	71.3	np
2005	83.1	np	82.6	83.2	83.7	np	np	70.5	np
2006	83.5	np	83.1	83.1	84.1	np	np	75.0	np
2007	83.7	np	83.3	83.4	84.3	np	np	69.3	np
2008	84.2	np	83.7	84.1	84.6	np	np	75.7	np

- (a) Median age at death does not adjust for the age structure of the populations involved.
- (b) Based on deaths registered to 31 December 2008.
- (c) Figures for Australia include 'Other Territories'.
- (d) Data for 2008 are incomplete due to the delay between the occurrence and registration of a death.
- (e) Deaths for whom the Indigenous status was not specified have not been prorated over Indigenous and non-Indigenous deaths. As a result, Indigenous and non-Indigenous deaths may be underestimated.
- (f) Care should be exercised when comparing median age at death of Indigenous Australians and non-Indigenous Australians. For example, higher coverage of Indigenous infant deaths compared with older age groups may result in the median age at death being underestimated.

np Not published.

Source: ABS (2009) *Deaths Australia, 2008*, Cat. no. 3302.0, AusInfo, Canberra.

Table EA.51

Table EA.51 **Age standardised mortality rates of potentially avoidable deaths, under 75 years, by Indigenous status (a), (b), (c), (d), (e), (f)**

	<i>Unit</i>	<i>Total (g)</i>
<i>2008</i>		
Potentially preventable deaths (h)		
Indigenous people		
Number of deaths	no.	864
Rate (a)	per 100 000	321.8
Non-Indigenous people		
Number of deaths	no.	13 442
Rate (a)	per 100 000	91.3
Deaths from potentially treatable conditions (i)		
Indigenous people		
Number of deaths	no.	519
Rate (a)	per 100 000	210.2
Non-Indigenous people		
Number of deaths	no.	8 716
Rate (a)	per 100 000	58.8
All potentially avoidable deaths (b)		
Indigenous people (c)		
Number of deaths	no.	1 383
Rate (a)	per 100 000	532.1
Non-Indigenous people (i)		
Number of deaths	no.	22 158
Rate (a)	per 100 000	150.1
<i>2007</i>		
Potentially preventable deaths (h)		
Indigenous people (c)		
Number of deaths	no.	852
Rate (a)	per 100 000	332.5
Non-Indigenous people (i)		
Number of deaths	no.	13 091
Rate (a)	per 100 000	91.2
Deaths from potentially treatable conditions (i)		
Indigenous people (c)		
Number of deaths	no.	512
Rate (a)	per 100 000	214.7
Non-Indigenous people (i)		
Number of deaths	no.	8 766
Rate (a)	per 100 000	60.9
All potentially avoidable deaths (b)		
Indigenous people (c)		
Number of deaths	no.	1 363

Table EA.51 Age standardised mortality rates of potentially avoidable deaths, under 75 years, by Indigenous status (a), (b), (c), (d), (e), (f)

	<i>Unit</i>	<i>Total (g)</i>
Rate (a)	per 100 000	547.2
Non-Indigenous people (i)		
Number of deaths	no.	21 856
Rate (a)	per 100 000	152.1

- (a) Age standardised death rates enable the comparison of death rates between populations with different age structures by relating them to a standard population. The current ABS standard population is all persons in the Australian population at 30 June 2001. Standardised death rates (SDRs) are expressed per 1000 or 100 000 persons. SDRs in this table have been calculated using the direct method. Rates calculated using the direct method are not comparable to rates calculated using the indirect method.
- (b) Avoidable mortality has been defined in the Public Health Information Development Unit's (PHIDU) report, *Australian and New Zealand Atlas of Avoidable Mortality (2006)*, and in reports by NSW Health and Victorian Department of Human Services as mortality before the age of 75 years, from conditions which are potentially avoidable within the present health system.
- (c) Non-Indigenous estimates are available for census years only. In the intervening years, Indigenous population figures are derived from assumptions about past and future levels of fertility, mortality and migration. In the absence of non-Indigenous population figures for these years, it is possible to derive denominators for calculating non-Indigenous rates by subtracting the Indigenous population from the total population. Such figures have a degree of uncertainty and should be used with caution, particularly as the time from the base year of the projection series increases.
- (d) Data based on reference year. See data quality statements for a more detailed explanation.
- (e) Scope is persons aged less than 75 years.
- (f) Data are reported by jurisdiction of residence for NSW, Queensland, WA, SA and the NT only. These five states and territories are considered to have adequate levels of Indigenous identification in mortality data.
- (g) Total includes only those five states and territories of residence that are considered to have acceptable levels of Indigenous identification in mortality data (NSW, Queensland, WA, SA and the NT).
- (h) Preventable deaths are those which are amenable to screening and primary prevention such as immunisation, and reflecting the effectiveness of the current preventative health activities of the health sector).
- (i) Deaths from potentially treatable conditions are those which are amenable to therapeutic interventions, and reflecting the safety and quality of the current treatment system.

Source: ABS (unpublished) *Causes of Death, Australia, 2008*; ABS (unpublished) *Causes of Death, Australia, 2007*.

Table EA.52

Table EA.52 Age standardised mortality rates of potentially avoidable deaths, under 75 years, by Indigenous status, by State and Territory (a), (b), (c), (d), (e), (f), (g), (h)

	<i>Unit</i>	<i>NSW</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>NT</i>	<i>Total (i)</i>
<i>2004–2008</i>							
Potentially preventable deaths (j)							
Indigenous people							
Number of deaths	no.	952	1 021	848	266	907	3 993
Rate (a)	per 100 000	239.5	291.3	439.9	332.4	491.5	325.9
Non-Indigenous people							
Number of deaths	no.	30 130	18 124	8 503	7 539	830	65 126
Rate (a)	per 100 000	91.9	95.2	89.4	95.8	144.5	93.3
Deaths from potentially treatable conditions (k)							
Indigenous people							
Number of deaths	no.	543	688	519	176	588	2 513
Rate (a)	per 100 000	138.7	202.6	295.8	245.8	342.4	215.6
Non-Indigenous people							
Number of deaths	no.	21 127	11 996	5 321	5 080	379	43 903
Rate (a)	per 100 000	64.2	63.0	55.9	63.7	70.5	62.7
All potentially avoidable deaths (b)							
Indigenous people							
Number of deaths	no.	1 494	1 708	1 366	442	1 495	6 505
Rate (a)	per 100 000	378.2	493.9	735.7	578.2	833.9	541.6
Non-Indigenous people							
Number of deaths	no.	51 257	30 120	13 823	12 619	1 209	109 028
Rate (a)	per 100 000	156.1	158.2	145.4	159.4	215.0	156.0
<i>2003–2007</i>							
Potentially preventable deaths (j)							
Indigenous people							
Number of deaths	no.	937	1 045	743	265	896	3 884
Rate (a)	per 100 000	249.0	310.0	410.7	346.4	513.4	334.1
Non-Indigenous people							
Number of deaths	no.	30 469	17 892	8 338	7 681	780	65 158
Rate (a)	per 100 000	94.2	96.9	90.2	99.0	143.5	95.3
Deaths from potentially treatable conditions (k)							
Indigenous people							
Number of deaths	no.	545	696	477	183	588	2 487
Rate (a)	per 100 000	144.6	212.6	283.4	259.4	361.7	222.0
Non-Indigenous people							
Number of deaths	no.	21 434	12 066	5 396	5 245	386	44 525
Rate (a)	per 100 000	66.1	65.3	58.4	66.8	77.1	65.1

Table EA.52 Age standardised mortality rates of potentially avoidable deaths, under 75 years, by Indigenous status, by State and Territory (a), (b), (c), (d), (e), (f), (g), (h)

	<i>Unit</i>	<i>NSW</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>NT</i>	<i>Total (i)</i>
All potentially avoidable deaths (b)							
Indigenous people							
Number of deaths	no.	1 481	1 740	1 219	448	1 483	6 371
Rate (a)	per 100 000	393.6	522.6	694.1	605.7	875.1	556.1
Non-Indigenous people							
Number of deaths	no.	51 902	29 957	13 733	12 925	1 165	109 682
Rate (a)	per 100 000	160.3	162.2	148.7	165.8	220.6	160.4

* Some totals and figures may not compute due to the effects of rounding.

- (a) Age standardised death rates enable the comparison of death rates between populations with different age structures by relating them to a standard population. The current ABS standard population is all persons in the Australian population at 30 June 2001. Standardised death rates (SDRs) are expressed per 1000 or 100 000 persons. SDRs in this table have been calculated using the direct method. Rates calculated using the direct method are not comparable to rates calculated using the indirect method.
- (b) Avoidable mortality has been defined in the Public Health Information Development Unit's (PHIDU) report, Australian and New Zealand Atlas of Avoidable Mortality (2006), and in reports by NSW Health and Victorian Department of Human Services as mortality before the age of 75 years, from conditions which are potentially avoidable within the present health system.
- (c) Census year non-Indigenous and Indigenous estimates are sourced from Experimental Estimates of Aboriginal and Torres Strait Islander Australians (Cat. no. 3238.0.55.001).
- (d) Non-Indigenous estimates are available for census years only. In the intervening years, Indigenous population figures are derived from assumptions about past and future levels of fertility, mortality and migration. In the absence of non-Indigenous population figures for these years, it is possible to derive denominators for calculating non-Indigenous rates by subtracting the Indigenous population from the total population. Such figures have a degree of uncertainty and should be used with caution, particularly as the time from the base year of the projection series increases.
- (e) Data based on reference year. See data quality statements for a more detailed explanation.
- (f) Scope is persons aged less than 75 years.
- (g) Data are reported by jurisdiction of residence for NSW, Queensland, WA, SA and the NT only. These five states and territories are considered to have adequate levels of Indigenous identification in mortality data.
- (h) Data are presented in five-year groupings due to the volatility of small numbers each year.
- (i) Total includes only those five states and territories of residence that are considered to have acceptable levels of Indigenous identification in mortality data (NSW, Queensland, WA, SA and the NT).
- (j) Preventable deaths are those which are amenable to screening and primary prevention such as immunisation, and reflect the effectiveness of the current preventative health activities of the health sector).
- (k) Deaths from potentially treatable conditions are those which are amenable to therapeutic interventions, and reflect the safety and quality of the current treatment system.

Source: ABS (unpublished) *Causes of Death, Australia, 2008*; ABS (unpublished) *Causes of Death, Australia, 2007*.

Table EA.53

Table EA.53 Birthweights, live births, all mothers, 2008 (a)

Unit	NSW	Vic	Qld	WA	SA	Tas	ACT (b)	NT	Aust
Mean birthweight	3 382	3 377	3 388	3 357	3 359	3 395	3 381	3 317	3 377
Number of babies by birthweight									
Less than 1000g	385	348	298	109	100	20	26	29	1 315
1000–1499g	488	409	384	198	109	33	39	22	1 682
1500–1999g	1 185	879	791	388	266	95	87	50	3 741
2000–2499g	3 516	2 799	2 366	1 183	791	290	214	204	11 363
2500–2999g	14 105	10 791	8 610	4 795	3 042	913	797	654	43 707
3000–3499g	34 566	25 775	21 414	11 146	7 182	2 141	2 006	1 356	105 586
3500–3999g	29 866	21 976	19 328	9 328	6 086	2 011	1 790	1 064	91 449
4000–4499g	9 877	7 476	6 602	2 855	1 931	757	574	377	30 449
4500g and over	1 714	1 387	1 219	447	308	137	115	56	5 383
Not stated	50	3	4	–	3	–	2	–	62
All births	95 752	71 843	61 016	30 449	19 818	6 397	5 650	3 812	294 737
Less than 1500g	873	757	682	307	209	53	65	51	2 997
Less than 2500g	5 574	4 435	3 839	1 878	1 266	438	366	305	18 101
Proportion of babies by birthweight									
Less than 1000g	0.4	0.5	0.5	0.4	0.5	0.3	0.5	0.8	0.4
1000–1499g	0.5	0.6	0.6	0.7	0.6	0.5	0.7	0.6	0.6
1500–1999g	1.2	1.2	1.3	1.3	1.3	1.5	1.5	1.3	1.3
2000–2499g	3.7	3.9	3.9	3.9	4.0	4.5	3.8	5.4	3.9
2500–2999g	14.7	15.0	14.1	15.7	15.3	14.3	14.1	17.2	14.8
3000–3499g	36.1	35.9	35.1	36.6	36.2	33.5	35.5	35.6	35.8
3500–3999g	31.2	30.6	31.7	30.6	30.7	31.4	31.7	27.9	31.0
4000–4499g	10.3	10.4	10.8	9.4	9.7	11.8	10.2	9.9	10.3
4500g and over	1.8	1.9	2.0	1.5	1.6	2.1	2.0	1.5	1.8

Table EA.53

Table EA.53 Birthweights, live births, all mothers, 2008 (a)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT (b)	NT	Aust
Not stated	%	0.1	—	—	—	—	—	—	—	—
All births	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
<i>Less than 1500g</i>	%	0.9	1.1	1.1	1.0	1.1	0.8	1.2	1.3	1.0
<i>Less than 2500g</i>	%	5.8	6.2	6.3	6.2	6.4	6.8	6.5	8.0	6.1

(a) This table cannot be compared with birthweight for all births in previous reports.

(b) In the ACT, 15.7 per cent of women who gave birth were non-ACT residents. Care must be taken when interpreting percentages. For example, the percentage of live births of ACT residents who gave birth in the ACT where the birthweight was less than 1500 grams was 0.7 per cent and where the birthweight was less than 2500 grams the percentage was 4.9 per cent.

— Nil or rounded to zero.

Source: Laws P. & Sullivan E. (2010) *Australia's Mothers and Babies 2008*, AIHW Cat. No. PER 50, AIHW National Perinatal Statistics Unit (Perinatal Statistics Series no. 24), Sydney.

Table EA.54

Table EA.54 Birthweights of babies of Indigenous mothers, live births, by State and Territory, 2008 (a)

Unit	NSW	Vic	Qld	WA	SA	Tas	ACT (b)	NT	Aust
Mean birthweight	grams	3 241	3 184	3 232	3 113	3 116	3 012	3 156	3 196
Number of babies by birthweight									
Less than 1500g	no.	56	14	73	38	20	6	30	242
1500–2499g	no.	268	88	278	212	82	21	161	1 141
2500–2999g	no.	601	139	661	394	145	17	312	2 322
3000–3499g	no.	996	245	1 184	576	193	32	470	3 788
3500–3999g	no.	761	168	884	367	132	23	298	2 720
4000–4499g	no.	251	56	259	86	46	np	98	825
4500g and over	no.	48	9	50	15	8	<5	25	164
Not stated	no.	1	–	1	–	–	–	–	2
All births	no.	2 982	719	3 390	1 688	626	106	1 394	11 204
Less than 2500g	no.	324	102	351	250	102	27	191	1 383
Proportion of babies by birthweight									
Less than 1500g	%	1.9	1.9	2.2	2.3	3.2	5.7	2.2	2.2
1500–2499g	%	9.0	12.2	8.2	12.6	13.1	19.8	11.5	10.2
2500–2999g	%	20.2	19.3	19.5	23.3	23.2	16.0	22.4	20.7
3000–3499g	%	33.4	34.1	34.9	34.1	30.8	30.2	33.7	33.8
3500–3999g	%	25.5	23.4	26.1	21.7	21.1	21.7	21.4	24.3
4000–4499g	%	8.4	7.8	7.6	5.1	7.3	np	7.0	7.4
4500g and over	%	1.6	1.3	1.5	0.9	1.3	np	1.8	1.5
Not stated	%	–	–	–	–	–	–	–	–
All births	%	100.0	100.0	100.0	100.0	100.0	93.4	100.0	100.0
Less than 2500g	%	10.9	14.2	10.4	14.8	16.3	25.5	13.7	12.3

(a) This table cannot be compared with birthweight for all births to Indigenous mothers in previous reports.

Table EA.54 **Birthweights of babies of Indigenous mothers, live births, by State and Territory, 2008 (a)**

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT (b)	NT	Aust
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(b) In the ACT, 29.1 per cent of Indigenous women who gave birth were non-ACT residents. Care must be taken when interpreting percentages. For example, the percentage of live born babies born in the ACT to ACT resident Indigenous women in 2008 where the birthweight was less than 2500 grams the percentage was 13.5 per cent.

– Nil or rounded to zero. **np** Not published.

Source: Laws P. & Sullivan E. (2010) *Australia's Mothers and Babies 2008*, AIHW Cat. no. PER 50, AIHW National Perinatal Statistics Unit (Perinatal Statistics Series no. 24), Sydney.

Table EA.55

Table EA.55 Proportion of live-born singleton babies of low birthweight, by maternal Indigenous status, 2008 (a), (b), (c), (d)

Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
	%	%	%	%	%	%	%	%	%
Indigenous status									
Indigenous	10.4	13.1	8.9	14.0	12.4	9.2	10.0	13.7	11.2
Non-Indigenous	4.3	4.5	4.4	4.3	4.6	5.0	3.7	4.1	4.4
Total	4.5	4.6	4.6	4.9	4.8	5.2	3.8	7.6	4.7
Indigenous status									
Indigenous	no. 314	85	294	233	75	26	7	184	1 218
Non-Indigenous	no. 3 947	3 067	2 445	1 213	849	298	166	98	12 083
Total number (e)	no. 4 280	3 155	2 742	1 446	924	324	174	282	13 327

(a) Low birthweight is defined as less than 2500 grams.

(b) Disaggregation by State/Territory is by place of usual residence of the mother.

(c) Data excludes Australian non-residents, residents of external territories and where State/Territory of residence was not stated.

(d) Excludes stillbirths and multiple births. Births were included if they were at least 20 weeks gestation or at least 400 grams birthweight.

(e) Total includes number of babies for which Indigenous status of the mother was not stated.

Source: AIHW (unpublished) *National Perinatal Data Collection*.

Table EA.56

Table EA.56 Proportion of live-born singleton babies of low birthweight, by maternal Indigenous status, 2006–2008 (a), (b), (c), (d)

Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
	%	%	%	%	%	%	%	%	%
Indigenous status									
Indigenous	10.6	11.6	9.5	13.8	12.8	7.6	9.5	13.2	11.2
Non-Indigenous	4.3	4.6	4.5	4.4	4.7	5.1	4.1	4.5	4.5
Total	4.5	4.7	4.8	5.0	4.9	5.2	4.2	7.7	4.7
Indigenous status									
Indigenous	no.	204	878	709	224	55	20	538	3 531
Non-Indigenous	no.	9 242	7 312	3 577	2 536	886	543	301	36 092
Total number (e)	no.	9 457	8 196	4 286	2 760	941	566	839	39 714

(a) Low birthweight is defined as less than 2500 grams.

(b) Disaggregation by State/Territory are by place of usual residence of the mother.

(c) Data excludes Australian non-residents, residents of external territories and where State/Territory of residence was not stated.

(d) Excludes stillbirths and multiple births. Births were included if they were at least 20 weeks gestation or at least 400 grams birthweight.

(e) Total includes number of babies for which Indigenous status of the mother was not stated.

Source: AIHW (unpublished) *National Perinatal Data Collection*.