Southern Grampians & Glenelg Shires

COMMUNITY PROFILE

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1. Health Status

Source: Your Health: A report on the health of Victorians, 2005

1.1 Australia:

Nationally, 70% of the disease burden is attributed to:

- asthma
- cardiovascular disease
- cancer
- diabetes mellitus
- illness caused by injury
- mental health
- arthritis and other musculoskeletal conditions

1.2 Victoria:

The highest burden of diseases in Victoria are:

- cancer
- cardiovascular diseases
- injury and posioning
- diabetes mellitus
- asthma
- mental health
- musculoskeletal conditions
- mother's and children's health
- communicable diseases

Based on 2001 Victorian Burden of Disease, cardiovascular disease, cancers and injuries were responsible for 73% of total mortality burden in both men and women.

Mental disorders and neurological conditions contributed most to the non-fatal burden, accounting for over 40% in both men and women.

The top 3 leading causes of ill-health in Victorians are:

- 1. cancer
- 2. cardiovascular disease
- 3. mental disorders

Risk factors per gender

The following risk factors have the greatest impact on the disease burden in Victoria in 2001. They are listed in order of greatest impact.

Male = tobacco; high blood pressure; obesity

Female = intimate partner violence; obesity; high blood pressure; tobacco

1.3 Southern Grampians and Glenelg Catchment

The top 5 Ambulatory Care Sensitive Conditions (ACSC) admissions for Southern Grampians and Glenelg in order of highest admission rate are:

1. Diabetes

- 2. Dehydration/Gastro
- 3. COPD
- 4. Dental
- 5. Asthma (level is reducing)

These admission rates are significantly higher than the Victorian average for all ACSC conditions in 2003-04.

Southern Grampians has the 4th highest rate of preventable hospital admissions in the state

2 Health Behaviours

2.1 Physical Activity:

National Guidelines = 30 minutes of moderate intensity physical activity on most, preferably all, days.

Source of Guidelines = Australian Department of Health and Aged Care, 1999. *National Physical Activity Guidelines for Australians*, Canberra, www.health.gov.au.

Victoria	Less than half the adult population meet national physical activity guidelines - overall physical activity participation = 85.1% - participation by males = 58.6% - participation by females = 55.1%
Barwon South Western	 overall physical activity participation = 77% approx. 58.4% adults are sufficiently active approx. 30% adults are not sufficiently active against the National Physical Activity Guidelines approx. 9% are inactive or sedentary overall males and females had a level of activity similar to the state average but males 25-34 years were significantly lower than the state average (58.8% compared with 64.8%).

2.2 Nutrition

National Health and Medical Research Council's recommended daily intake of fruit and vegetables is: Adults = 2 servings fruit and 3 servings vegetables
Children (12-18 yrs) = 3 servings fruit and 3 servings vegetables

Victoria	7% of adults eat the recommended amount of vegetables per day being less than five serves per day.	
Barwon South Western Region	 Fruit intake: only 39.6% of males consume the recommended amount of fruit each day – compared with state average of 42.8% women consume a higher amount than males, with 55.9% females consuming the recommended amount - state average of 57.3% only 18.9% of young females between 18 to 24 year age group in the Barwon South Western Region consumer recommended amount fruit – significantly below state average of 49.9%. Vegetable intake: vegetable intake was lower than fruit - only 11.5% of males and 18.1% of females consume the minimum recommended number of servings of vegetables. Key facts: There is a high proportion of Males (56.6%) and females (40.8%) who are getting neither the recommended daily servings of fruit nor vegetables. Of particular concern are males between 25-34 years and over 65 years who were 6-7% below the state average for intake of fruit/vegetables and females between 18-24 years who were 9% below the state average. 	

2.3 Mental Health

Source: VicHealth, Beyond Blue, DHS websites

i) Mental Health illness

World Health Organisation predicts that depression will be the second largest cause of disease burden in developed countries

National	- on average 1 in 5 people will experience depression each year.
Victoria	 mental illness responsible for approx.15% of total disease burden in 2001. affective and substance use disorders account for almost 80% of mental health burden males – depression ranks 5th leading cause of overall mental health burden females – depression ranks 4th leading cause of overall mental health burden average mental health contacts/1000 population = 353.1
Southern Grampians	- mental health contacts/1000 population = 848.5
Glenelg	- mental health contacts/1000 population = 801.1

ii) Community Strength

Victorian Public Health Survey, 2003, identified that people who participate in the community and those who obtain help when needed are healthier and feel more positive about the communities in which they live. Participation includes membership of one or more groups, such as sports, school, church, community or professional group—see references for website link.

Barwon South Western	 - Proportion of males and females who reported they could not obtain help from the following sources: - almost 6% of males and females from friends - approx. 5% of males and females from family - approx. 1 in 4 males and females from neighbours These figures were similar to the Victorian average.
	- approx. 70.6% males and 67.1% females were members of a group

2.4 Prevention of Injury

i) Family Violence

• Intimate partner violence is the leading public health issue according to Dr Robert Hall, DHS Director Public Health and Chief Medical Officer – see references.

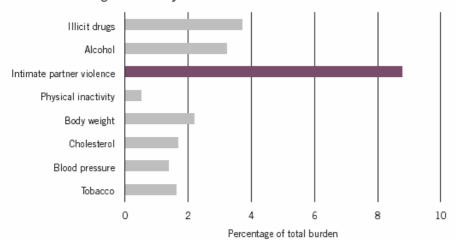
Impact on women:

- 1 in 5 women have experienced intimate partner violence
- leading cause of illness in Victorian women aged 18-44 years and double that of other causes of illness (VicHealth research see below)

Impact on children:

- 1 in 4 children have witnessed intimate partner violence
- domestic violence is a risk factor for child abuse but the number of children who are affected is unknown
- research indicates that children experiencing regular trauma or abuse have a range of impacts, including impaired brain development see references, State of Victoria's Children Report, DHS, p 89.

Figure 2: Top eight risk factors contributing to the disease burden in Victorian women aged 15–44 years



Source: VicHealth, 2004. The Health Costs of Violence: Measuring the Burden of Disease caused by Intimate Partner Violence, www.vichealth.vic.gov.au.

ii) Tobacco

• 8.2% are smokers (51.8% indigenous are smokers)

iii) Alcohol

- 5% males 18-24 are at a risky level of intake of alcohol
- 47.9% of the indigenous population are at a level of alcohol use that will pose a health risk

iv) Farm safety

• on average, 1 farmer dies every 3 days as a result of farm accidents (Australian Centre for Agricultural Health and Safety, 2002 (this includes male and female farmers)

3 Public Health Issues

3.1 Children

i) Some findings from DHS' 'the state of Victoria's children report 2006' - see references

Victorian children doing well in:	 infant mortality rates lower than other states minimum expected level (90%) vaccination coverage at 24-27 mths reached majority of children do not live in a household with a smoker national literacy benchmarks for years three, five and seven either at or above national average increasing pattern of child protection notifications and substantiations not as marked as other states, particularly in NSW and Queensland where child abuse substantiations nearly doubled between 1999-2000 and 2004-2005. parents give very positive ratings to the 'liveability' of their neighbourhoods
Children not doing as well in:	 one fifth of mothers report binge drinking at least once during pregnancy more than 1 in 5 children under two years of age has a mother who reported they had smoked in the early stages of pregnancy minimum vaccination levels at 72-75 months of age are not reached parents rate their children's oral health lower than general health childhood obesity increasing with concerns for nutrition 15.5% of children were part of families had 'unhealthy' family functioning self-harm is second highest cause of injury deaths in 15-18 year olds

Priority Groups: Indigenous –	 indigenous children admitted to care and protection orders was 11 times higher than for non-indigenous children and the rate for indigenous children is increasing.
Disability –	children with a disability are known to be at greater risk of child abuse but insufficient data is available
Children in out-of-home care -	 children in out-of-home care are achieving less well in education, with absence rates higher and employment rates lower on leaving school.
Children suffering chronic disadvantage -	 recent research suggests a link between socioeconomic disadvantage and overweight and obesity in children; parents living in more disadvantaged areas are less likely to give positive ratings to their children's health or liveability of their neighbourhood. estimated that poverty rate in Victoria and NSW is 11.5% compared with Australian average of 11% poverty rate in capital cities estimated to be 10.5% and 12% in rural/regional areas.
Rural vs Metropolitan	 few differences found between outcomes for children living in rural areas and those in metropolitan areas – this is of note, since rural people tend to have poorer health status than metropolitan areas. rural children are more likely to have poorer oral health and higher incidence of behaviour problems that were 'of concern'.

ii) Other Information

- the **best bet** for the expenditure of public health funds to address future health issues. Activity should focus on promoting a good start in life, including:
 - literacy/language promotion; primary and mental health and family networks; smoking cessation; home visits by maternal and child health nurses.

Source - Dr Robert Hall, see References

- British Survey found key factors of contributing to a child's health outcomes in later life include:
 - birth weight; height at 7 years of age; whether mother read between 0-2 years of age; schooling. Source Dr Fiona Stanley, see References
- Engaging children in growing their own food and cooking it is a high effective way of encouraging kids to love healthy food.

Source: Stephanie Alexander, see References

3.2 Youth

- are at highest risk of mental health issues of any age cohort VicHealth.
- Young people need something to do that they are passionate about and someone to admire Rob Moodie, CEO VicHealth presentation to SGG PCP 2003.
- Young people need something productive to do and someone to love National Youth Survey, 2006.

3.3 Males

Nationally - the cause of greatest illness in males in order of importance is tobacco, high blood pressure and obesity.

Southern Grampians - male life expectancy is below the state average and is the 3rd lowest in the state (female life expectancy is on average with the state)

Glenelg - male life expectancy is below the state average and the 2nd lowest in the state (female life expectancy is on average with the state)

Mental Health

• On average, a rural male commits suicide every 4 days – see Beyond Blue website.

3.4 Elderly

Falls prevention:

nationally – on average, 1 in 3 people over the age of 65 years fall each year

Social isolation:

Southern Grampians – 2.53% (75+ year olds) live alone compared with state average of 1.92%

3.5 General

Dr Robert Hall, Director of Public Health and Chief Health Officer, DHS lists the following key public health issues for Victoria (see references).

Key Public Health Issues:	
Health Inequalities	 Indigenous general household income = \$423 per week Non Indigenous general household income = \$657 per week
Environmental Sustainability	
Chronic Disease Prevention	
Promotion of Good Start in Life	Best Bets: - Literary and language promotion - Primary and mental health and family networks Smoking - Home visits- maternal and child health
Intimate Partner Violence*	

^{*}As an addition to his presentation, Dr Robert Hall noted the significant results of the VicHealth research into the impact of Intimate Partner Violence and the major public health issue that this poses.

4 References

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