

# Huon Valley

LOCAL GOVERNMENT AREA



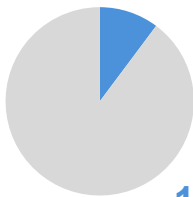
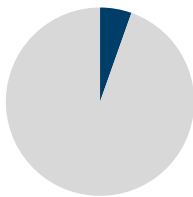
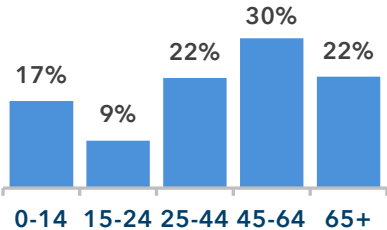
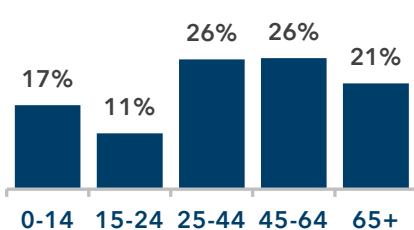
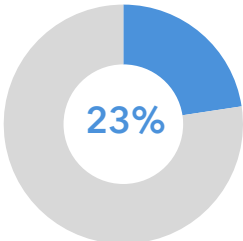
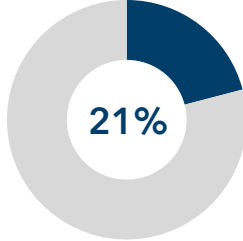
Health is closely tied to our daily environment. This Community Health Check presents information about the environmental, social and economic state of the Huon Valley local government area.

## Community Health Check 2025



# About us



	Huon Valley LGA	Tasmania
Our population	18,259	557,571
Aboriginal population	 10.2%	 5.4%
Population by age		
Population by gender	50% Male 50% Female	51% Male 49% Female
Median age in years	46	42
Born outside Australia	 23%	 21%

Sources: Our population, Aboriginal population, Population by age, Population by gender, Born outside Australia, and Median age in years: Australian Bureau of Statistics, 2021 Census All persons QuickStats, Local Government Areas, Huon Valley

# Social and economic conditions



## Education

The proportion of people in the Huon Valley LGA who have completed Year 12 and above is the same as Tasmania overall.

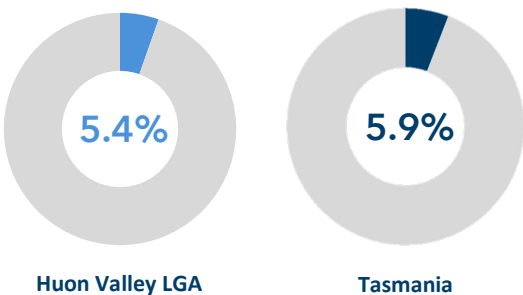
PER CENT OF ELIGIBLE POPULATION WHO HAVE COMPLETED YEAR 12 AND ABOVE



Higher education levels are associated with better health outcomes.

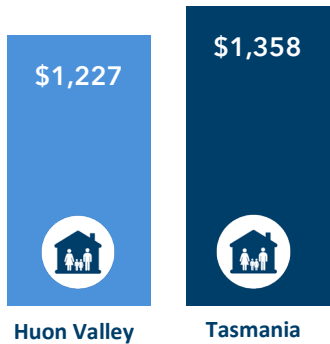
## Unemployment rates

The rate of people in the Huon Valley LGA who are unemployed is less than the rate in Tasmania overall.



## Median weekly income

Weekly income per household is less in the Huon Valley LGA than in the rest of Tasmania.



## Motor vehicles

Ninety-five per cent (95%) of homes in the Huon Valley LGA have one or more motor vehicles.



## Home ownership

More people in the Huon Valley LGA own their homes outright, compared with the rest of Tasmania.

	Huon Valley	Tasmania
Owned outright	44%	37%
Owned with mortgage	37%	33%
Rented	16%	26%

Source: Education, Unemployment rates, Median weekly income, Motor vehicles, Home ownership: Australian Bureau of Statistics 2021, Census All persons QuickStats, Local Government Areas, Huon Valley

# Healthy living



## Self-reported health

Thirty-eight per cent (38%) of Huon Valley LGA residents rated their health as “excellent” or “very good”, which is similar to the rate for Tasmania.








### ADULTS REPORTING THEIR OWN HEALTH AS ‘EXCELLENT’ OR ‘VERY GOOD’



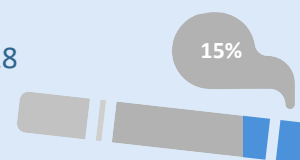
How people feel about their own health, their state of mind and their life in general is a common measure of health. (Australia's Health 2018. AIHW)

## Risk factors

Risk factors are conditions or behaviours that make it more likely people will get a chronic condition or health problem.

	Huon Valley LGA	Tasmania
 Overweight/obese body mass index (BMI)	62%	62%
 Current smoker	15%	15%
 Daily/occasional vaping	2%	3%
 Single occasion risky drinking (>4 alcoholic standard drinks)*	41%	37%
 Insufficient moderate/vigorous activity <sup>†</sup>	21%	24%
 Did not meet recommended daily vegetable intake <sup>^</sup>	91%	91%
 Did not meet recommended daily fruit intake <sup>^</sup>	68%	61%

In the Huon Valley LGA, around 15% of people aged 18 years and over, are daily and current smokers, which is higher than the rate for Tasmania.



Source: Self-reported health and Risk factors: Tasmanian Population Health Survey 2022 Local Government Areas (LGA) Supplementary Data Tables

\*2009 National Health and Medical Research Council alcohol guidelines

<sup>†</sup>2014 National Health and Medical Research Council physical activity guidelines

<sup>^</sup>2013 National Health and Medical Research Council dietary guidelines

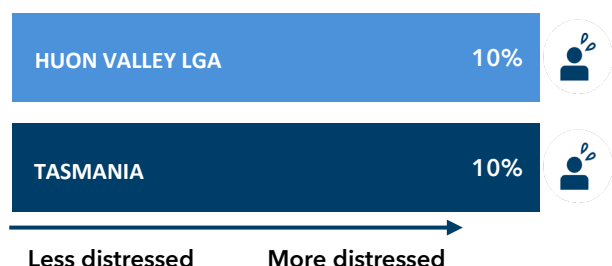
# Healthy living



## Psychological distress

A similar number of adults in the Huon Valley LGA are likely to experience high or very high levels of psychological distress compared with Tasmania overall.

### PEOPLE WITH HIGH OR VERY HIGH LEVELS OF PSYCHOLOGICAL DISTRESS



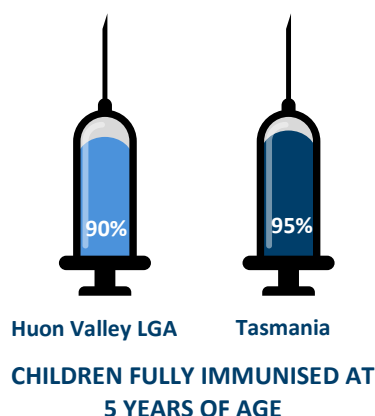
Psychological distress is a term used to describe unpleasant feelings or emotions that can influence how we function in daily life.

## Health care



### Immunisations

Ninety per cent (90%) of children in the Huon Valley LGA are fully immunised by the age of five, which is less than the rate for Tasmania.



### GP and emergency department encounters



In 2022, 83% of people from the Huon Valley LGA visited a general practitioner for their own health in the previous twelve months\*.



On average each year during 2021-2023, 2,123 individuals from the Huon Valley LGA visited an emergency department (110 people per 1,000 population<sup>^</sup>), with an average of 3,808 ED presentations per year (198 ED presentations per 1,000 population<sup>^</sup>).

<sup>^</sup>Estimated population for June 2022=19,215

Sources: Psychological distress and GP encounters: Tasmanian Population Health Survey LGA Supplementary Data Tables 2022

Immunisations: Primary Health Information Development Unit, Social Health Atlas of Australia: Local Government Areas; Compiled based on data provided by Australian Childhood Immunisation Register, Medicare Australia, 2021.

Emergency department encounters: Department of Health and Human Services, Health Central Data Warehouse, Tasmania. Analysed by Primary Health Tasmania; accessed March 2025

\*Individual totals may be higher due to patients potentially visiting more than one practice outside an LGA area or possible de-identification linkage errors from patient administration extraction software.

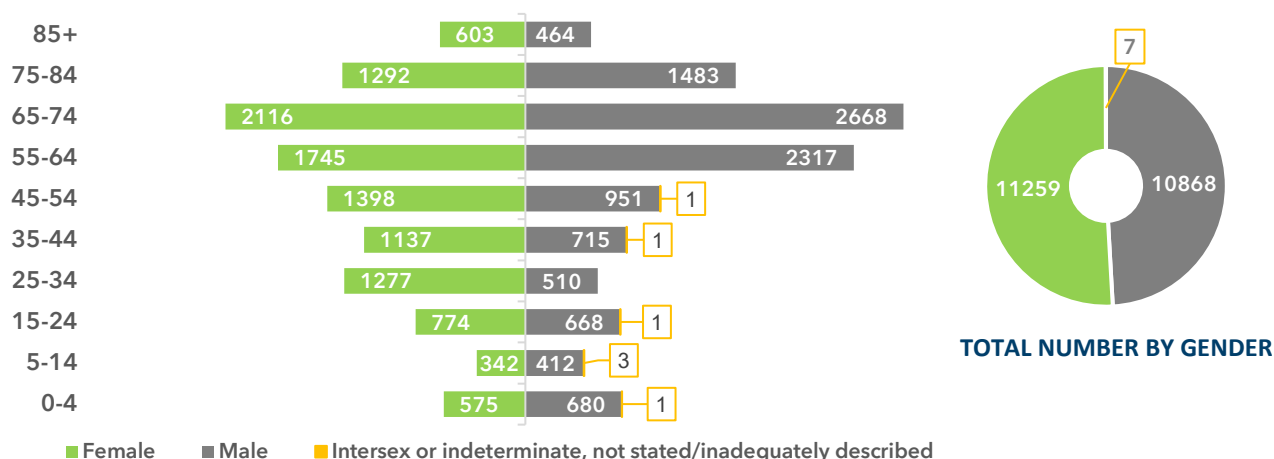
# Health outcomes



## Public hospital admissions

During the five years from 2019-20 to 2023-24 there were 22,134 admissions to Tasmanian public hospitals from the Huon Valley LGA, with 11,002 overnight stays.

### NUMBER OF PUBLIC HOSPITAL ADMISSIONS BY AGE GROUP AND GENDER 2019-20 TO 2023-24



TOP 10 PRIMARY HOSPITAL DIAGNOSIS <sup>*A</sup>	TOP 10 CHARLSON COMORBIDITIES <sup>AA</sup>	TOP 10 POTENTIALLY PREVENTABLE HOSPITALISATIONS
Care involving dialysis	Renal disease	Asthma
Pain in throat and chest	Any malignancy, including lymphoma and leukaemia, except malignant neoplasm of skin	Chronic obstructive pulmonary disease
Liveborn infants according to place of birth	Chronic pulmonary disease	Diabetes complications
Other cataract	Cerebrovascular disease	Cellulitis
Single spontaneous delivery	Congestive heart failure	Type 2 diabetes
Abdominal and pelvic pain	Myocardial infarction	Congestive heart failure
Adjustment and management of drug delivery or implanted device	Diabetes with chronic complication	Urinary tract infections
Other symptoms and signs involving the digestive system and abdomen	Metastatic tumour	Iron deficiency anaemia
Atrial fibrillation and flutter	Dementia	Convulsions epilepsy
Problems related to medical facilities and other health care	Diabetes without chronic complication	Ear, nose and throat infections

<sup>\*</sup>Excludes diagnoses coded as "persons encountering health services in other circumstances" and "other medical care" which cover a wide range of diverse categories and are as such less useful in understanding reasons for hospitalisations.

# Health outcomes



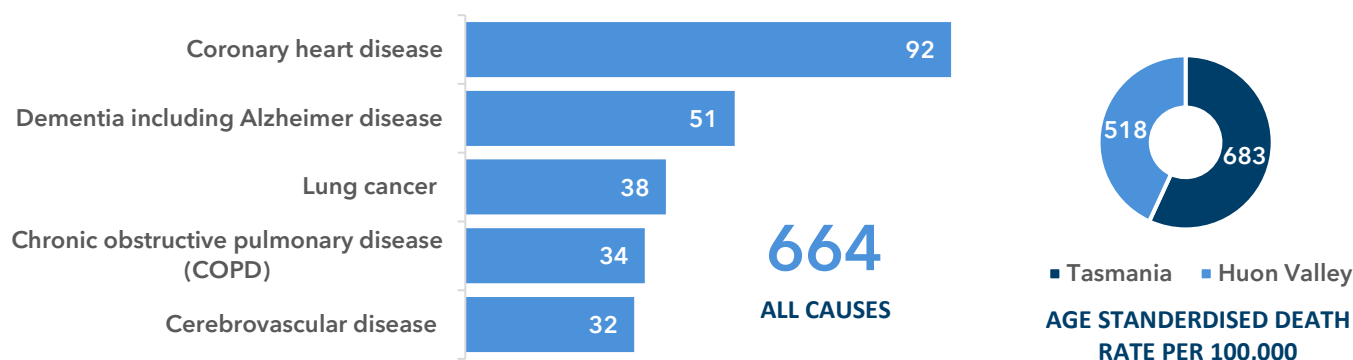
<sup>^</sup>The *primary hospital diagnosis* is the diagnosis established after study (for example, at the completion of the episode of care) to be chiefly responsible for causing the episode of admitted patient care. It is essentially the main reason someone needed to be admitted to hospital.

<sup>^^</sup>Patients admitted to hospital often have other comorbid conditions, which may or may not be related to their diagnosis. The *Charlson Comorbidities Index* classifies 17 comorbid conditions which may influence mortality risk.

## Causes of death

During 2018-2022 coronary heart disease (14%), dementia including Alzheimer disease (7%), lung cancer (6%), chronic obstructive pulmonary disease (5%) and cerebrovascular disease (5%) were the leading causes of the 664 deaths in the Huon Valley LGA. The age standardised death rate in 2022 was 518 per 100,000 compared with the overall aged standardised rate of 683 for Tasmania.

### TOP CAUSES OF DEATH 2017-2021, BY NUMBER



Sources: Public hospital admissions: Department of Health and Human Services, Health Central Data Warehouse, Tasmania. Analysed by Primary Health Tasmania; Accessed March 2025; Charlson Comorbidities: Charlson, Mary E., et al. "A new method of classifying prognostic comorbidity in longitudinal studies: development and validation." *Journal of chronic diseases* 40.5 (1987): 373-383  
Causes of death: Mortality over Regions and Time (MORT) book, LGA, 2017-2021, accessed March 2025.

The Tasmanian Community Health Checks feature information about the 29 Local Government Areas (LGAs) in Tasmania. For reports on the other 28 LGAs, please visit [primaryhealthtas.com.au](https://primaryhealthtas.com.au) and search for [Community Health Checks](#) or email [info@primaryhealthtas.com.au](mailto:info@primaryhealthtas.com.au).

*This data is sourced as part of Primary Health Tasmania's ongoing provider support activity. While extensive efforts have been made to ensure this information is as accurate as possible, the data is gleaned from multiple public and private organisations via visits and web searches, and Primary Health Tasmania cannot attest to the continued veracity of this dataset as practice and practitioner details change continually. The information presented is accurate as of March 2025. For the most current information, please go to [www.phnexchange.com.au](https://www.phnexchange.com.au).*