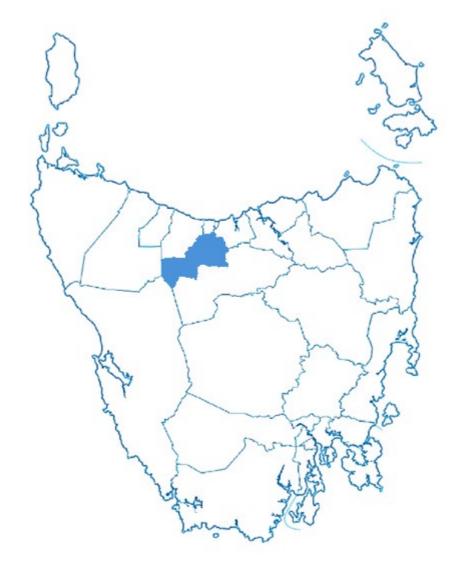




Meander Valley

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 Meander Valley local government area.

Community Health Check 2022



About us



	Meander Valley	Tasmania
Our population	20,709	557,571
Aboriginal population	3.7%	5.4%
Population by age	27.8% 21.8% 23.6% 10.2% 0-14 15-24 25-44 45-64 65+	25.6% 25.9% 16.6% 11% 0-14 15-24 25-44 45-64 65+
Born outside Australia	17.1%	20.9%
Median age in years	46	42

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

Social and economic conditions



Education

The proportion of people in the Meander Valley LGA who have completed Year 12 and above is less than the proportion for Tasmania overall.

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



Higher education levels are associated with better health outcomes.

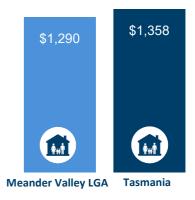
Unemployment rates

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



Median weekly income

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



Motor vehicles

Ninety-five per cent (94.8%) of households in the Meander Valley LGA have one or more motor vehicles.



Home ownership

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

	Meander Valley	Tasmania
Owned outright	42.8%	37.1%
Owned with mortgage	33.6%	33%
Rented	20.5%	26.4%

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

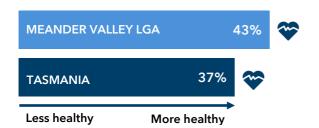
Healthy living



Self-reported health

Forty-three per cent (43%) of Meander Valley LGA residents rated their health as "excellent" or "very good". This is higher than the rate for Tasmania.

ADULTS REPORTING THEIR OWN HEALTH AS 'EXCELLENT' OR 'VERY GOOD'



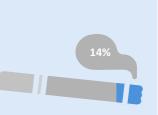
How people feel about their own health, their state of mind and their life in general is a common measure of health. (Australia's Health 2018. AIHW)

Risk factors

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

	Meander Valley	Tasmania
Overweight/obese body mass index (BMI)	47%	58%
Current smoker	14%	12%
Consumes 2 or more drinks per day*	21%	19%
Insufficient moderate/vigorous activity+	20%	11%
Less than two serves of vegetables per day^	88%	91%
Less than two serves of fruit per day^	54%	53%

In the Meander Valley LGA, around 14% 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: Department of Health and Human Services Report on the Tasmania Population Health Survey 2019

^{*2009} National Health and Medical Research Council alcohol guidelines

⁺2014 National Health and Medical Research Council physical activity guidelines

^{^2013} National Health and Medical Research Council dietary guidelines

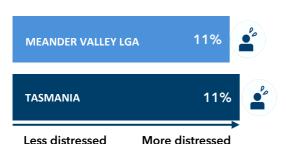
Healthy living



Psychological distress

Adults in the Meander Valley LGA are likely to experience similar levels of psychological distress, compared with Tasmania overall.

PEOPLE WITH HIGH OR VERY HIGH LEVELS OF PSYCHOLOGICAL DISTRESS



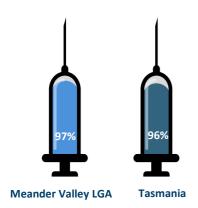
Psychological distress is a term used to describe unpleasant feelings or emotions that can influence how we function in daily life.

Health care



Immunisations

Ninety-seven percent (96.5%) of children in the Meander Valley LGA are fully immunised by the age of five, which is higher than the rate for Tasmania.



CHILDREN FULLY IMMUNISED AT 5 YEARS OF AGE

GP and emergency department encounters



During 2019-2021, 19,965 individuals in the Meander Valley LGA had an encounter with a general practitioner*



On average each year during 2019-2021, 3,814 individuals from the Meander Valley LGA visited an emergency department (183 people per 1,000 population^), with an average of 5,660 ED presentations per year (272 people per 1,000 population^)

^Estimated average annual population for 2019-21 =20.804

Sources: Psychological distress: Department of Health and Human Services Report on the Tasmanian Population Health Survey 2013 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, 2018. GP encounters: Primary Health Information Network (PHIN) dataset (General Practice dataset), Analysed by Primary Health Tasmania; accessed October 2022 Emergency department encounters: Department of Health and Human Services, Health Central Data Warehouse, Tasmania. Analysed by Primary Health Tasmania; accessed October 2022 *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 2017-18 to 2021-22 there were 25,546 admissions to Tasmanian public hospitals from the Meander Valley LGA area, with 11,971 overnight stays.

TOP FIVE CAUSES FOR OVERNIGHT ADMISSIONS



Factors influencing health status and contact with health services*



Women giving birth



Other chronic obstructive pulmonary disease



Heart failure



Pneumonia

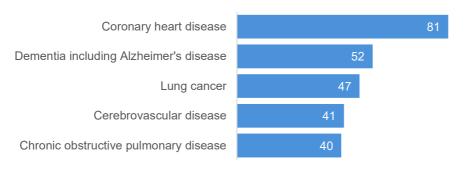
Causes of death

During 2016-2020 coronary heart disease (10.5%), dementia including Alzheimer disease (6.8%), lung cancer (6.1%), cerebrovascular disease (5.3%), and chronic obstructive pulmonary disease (5.2%) were the leading causes of the 760 deaths in the Meander Valley LGA area.

TOP CAUSES OF DEATH 2016-2020, BY NUMBER

ALL CAUSES

760



Sources: Public hospital admissions: Department of Health and Human Services, Health Central Data Warehouse, Tasmania. Analysed by Primary Health Tasmania; Accessed October 2022; *Includes i) examination and investigation, ii) communicable diseases, iii) related to socioeconomic and psychosocial circumstances, iv) health services in other circumstances and v) related to family and personal history and certain conditions influencing health status. Causes of death: Mortality over Regions and Time (MORT) book, LGA, 2016-2020, accessed November 2022.

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 and search for Community Health Checks or email 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 November 2022. For the most current information, please go to www.phnexchange.com.au.