# LACHLAN LGA (PART) Databook

### MPHN HEALTH NEEDS ASSESSMENT 2022-2025











An Australian Government Initiative

# **TABLE OF CONTENTS**

Health Needs Assessment process	3
Data disclaimer	4
Executive summary	6
Population and geography	7
Town based populations and demography	7
Demography	8
Aboriginal and Torres Strait Islander people	11
Mothers, babies and children	
Older people	15
Population health	
Mortality	16
Health conditions	
Health behaviours	_20
Technical notes	22
MPHN LGA Data Prioritisation Tool	22
Socio-Economic Indexes for Areas (SEIFA)	23
Age Standardised Rate (ASR)	23

Murrumbidgee Primary Health Network acknowledges the Traditional Custodians of the land in the Murrumbidgee region. We pay respect to past and present Elders of this land: the Wiradjuri, Yorta Yorta, Baraba Baraba, Wemba Wemba and Nari Nari peoples.

#### Publication date: February 2023

firsthealth Limited trading as Murrumbidgee Primary Health Network (ABN 15 111 520 168).

Murrumbidgee Primary Health Network gratefully acknowledges the financial and other support from the Australian Government Department of Health. The Primary Health Networks Program is an Australian Government Initiative.

While the Australian Government Department of Health has contributed to the funding of this material, the information contained in it does not necessarily reflect the views of the Australian Government and is not advice that is provided, or information that is endorsed by, the Australian Government. The Australian Government is not liable in negligence or otherwise for any injury, loss or damage however arising from the use of or reliance on the information provided in this material.

## **HEALTH NEEDS ASSESSMENT PROCESS**

The Murrumbidgee Health Needs Assessment, in line with the firstHealth Board endorsed framework, with governance provided by Clinical Councils, the Community Advisory Committee and the Planning and Integration sub-committee, uses a population approach to needs assessment using person centred planning with a strong commitment to community input.

Murrumbidgee Primary Health Network (MPHN) analyses data from robust gold standard comparable sources such as the Australian Bureau of Statistics and Australian Institute of Health and Welfare in the first instance supplemented by other sources. A decision-making tool is used at MPHN which identifies and prioritises needs based on variables that score local impact relative to national data, where MPHN is in the lowest third of the nation. Further, a Data Prioritisation Tool (refer page 22 for details) is used at a Local Government Area (LGA) level to identify areas where issues/needs are higher in comparison to the New South Wales (NSW) and Murrumbidgee averages. This highlights the LGAs in the lower half of the Murrumbidgee region and is summarised separately in the region profiles on MPHN's website. The matrix scoring is described at the end of this document in more detail. Throughout this document variables scoring three or greater using the matrix are denoted by their respective colour coding, these variables are likely to have higher impact within this LGA.

The use of an LGA approach ensures we are working in alignment with the Murrumbidgee Local Health District (MLHD) health clusters. This allows a more considered co-ordinated approach to services and reduces on duplication of service delivery.

Inequity in healthcare remains a significant issue for many areas in the Murrumbidgee region. Comprehensive socio-economic profiling allows identification of areas where this may affect uptake of healthcare services and consequent poorer health outcomes for those living in these areas. MPHN emphasises in identification of priorities for the region the particular local government areas where efforts should be concentrated in order to address the inequity. Monitoring of emerging health conditions remains a priority for MPHN with ongoing consultations aimed at identification of emerging issues and subsequent interventions.

MPHN undertakes consultation with key partners, health professionals and community members. Multiple formats are used to undertake these consultations including:

#### **CONVERSATIONS ON THE COUCH**

A community consultation approach to capture the needs of people who would not normally engage through a formal process. Community members are invited to meet in a neutral location with high thoroughfare to allow people to chat MPHN staff in a face-to-face environment to discuss health matters important to them. There is no set agenda or questions and is simply an opportunity for people to let MPHN know about health matters important to them and their community. Information gathered during these conversations is collected and used to help MPHN better understand the health needs of our communities.

#### **YARNS ON THE COUCH**

Yarns on the Couch is an extension of our Conversations on the Couch with a focus on Aboriginal health. Data collected at both activities is used to help guide the Health Needs Assessment.

#### HNA COMMUNITY FEEDBACK

There are two options for survey feedback, one short form survey called HNA Mini, and one longer form survey of 17 questions called HNA Community Feedback. Both these survey mechanisms have also been modified to target Aboriginal and Torres Strait Islander people, or those who care for this population group. All these surveys are available year-round and aim to gather information about emerging health needs.

#### **OTHER FEEDBACK MECHANISMS**

There are several other opportunities for MPHN to capture feedback from our stakeholders. This includes, but not limited to:

- Incidental feedback from community and health care practitioners to MPHN staff during the normal course of business operations.
- An audit annually of general practice and health care providers to inform workforce capacity.
- MPHN co-design and formal consultation with specific population groups as part of commissioned project work.
- Engagement with MPHN's partners in our various consortium, alliance and steering committee groups. These groups cover various issues relating to Aboriginal health; older people and aged care; mental health, alcohol and other drug, and suicide prevention and aftercare; chronic disease; and emergency response.
- Engagement and feedback with Local Health Advisory Committees (LHACS) which are situated in 33 locations throughout the Murrumbidgee region.
- Feedback from MPHN's governance members, including Board Directors, and members the Community Advisory Committee and four Clinical Councils.
- Review of data collected by its commissioned services throughout the year and other internal data sources to confirm service provision and identify service gaps that may exist.
- Media and social media monitoring for local emerging health needs and issues.

Once all information is gathered and analysed by MPHN, data is provided back to communities and health providers for validation of the developed priorities from the data.

## **DATA DISCLAIMER**

This report is presented for the purpose of disseminating information for the benefit of people living in Murrumbidgee communities. The report includes data freely available on public websites such as the Australian Institute of Health and Welfare and the Australian Bureau of Statistics.

Data in this report remain confidential and primarily for MPHN's internal use. This report may be shared externally with express permission at the discretion of MPHN's CEO. If the latter is the case data may be used by an external organisation for planning purposes but should not be shared outside that organisation.

Data from Commonwealth secure confidential websites have not been included in this report. Data have not been interpreted.

MPHN has taken all steps to ensure the information in this report is as accurate as possible and correct at time of report. Data may vary to other publically available sources due to differing sources accessed.

MPHN does not guarantee, and accepts no legal liability whatsoever arising from, or connected to, the use of any material contained in this report. MPHN recommends users exercise their own skill and care with respect to use of this report.

Contact for data queries: <u>hna@mphn.org.au</u>

NB: According to the Australian Bureau of Statistics Local Government Area classifications, Lachlan Local Government Area is divided into two parts: (1) Lachlan - part a; and (2) Lachlan - part b. Lachlan - part a is considered part of the Western Primary Health Network, and Lachlan - part b is considered part of the Murrumbidgee Primary Health Network. The data presented here are from Lachlan - part b only. In the 2021 ABS Census, it was estimated that the total population of the Lachlan - part b only LGA is 1,434. Among those living in Lachlan - part b only, almost all live in the suburb/locality of Lake Cargelligo.

# LACHLAN LGA (PART)

Lachlan (part)

LAKE CARGELLIGO

## WAGGA WAGGA 274KM

Nearest Regional Referral Hospital

POSTCODE	TOWNS
2707	Argoon, Coleambally (in Murrumbidgee LGA)
2706	Darlington Point (in Murrumbidgee LGA)
2672	Lake Cargelligo

## **EXECUTIVE SUMMARY**

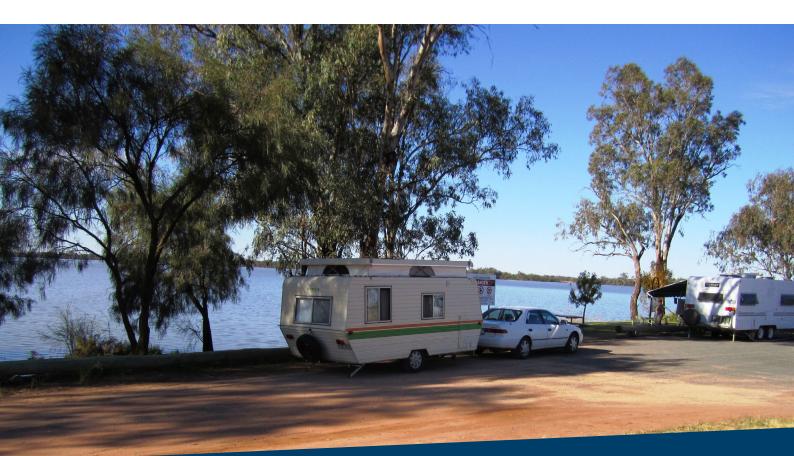
Lachlan Local Government Area (LGA) is ranked last out of 21 LGAs in population size within the Murrumbidgee Primary Health Network (MPHN) (population = 1,734). The Lachlan LGA has a land area of 14,964 square kilometres (second largest in MPHN) with a population density of 0.4 people per square kilometre (third lowest density in MPHN). Between 2021 to 2041 the total population of Lachlan LGA is expected to decrease by -18.2 per cent.

Compared to MPHN's average, Lachlan LGA has a lower socioeconomic index. This LGA has a higher rate of people receiving an unemployment benefit than the NSW and MPHN average, as well as higher than MPHN's average of households with a weekly income in the lowest bracket (\$650 per week). Compared to the NSW and MPHN average, the Lachlan LGA has a percentage of those aged 65 years and over, and age pensioners.

The proportion of Lachlan LGA population who identify as Aboriginal and Torres Strait Islander (23 per cent) is significantly higher than the MPHN average (5.8 per cent). The Lachlan LGA has a higher total fertility rate than the MPHN average. While the absolute numbers are low, this LGA has a higher rate of smoking during pregnancy, in comparison to the NSW and MPHN.

The median age of death for both females and males in the Lachlan LGA is comparable to the NSW and MPHN average. However, the rate of premature death among males and females aged zero to 74 years is higher, compared to MPHN's average. Causes of premature death in the Lachlan LGA include a higher than NSW and MPHN rate from deaths from all cancers, circulatory system diseases. The Lachlan LGA has a high prevalence estimate of those with living with diabetes, asthma and with heart, stroke and vascular disease. In comparison to MPHN's average, Lachlan LGA has a higher rate of incidence for prostate cancer, breast cancer and melanoma.

Prevalent risk factors in Lachlan LGA include a higher than the NSW and MPHN average number of females and males aged 18 years and over who report low to very low or no exercise in the previous week, males and females who are both current smokers and report risky alcohol consumption. This LGA has a higher estimated number of males and females who are obese. Rates of sexual assault, domestic assault and liquor offenses are higher than the NSW and MPHN average.



### **POPULATION AND GEOGRAPHY**

ESTIMATED RESIDENT Population	POPULATION CHANGE Between 2021-2041	LGA AREA KM <sup>2</sup>	POPULATION DENSITY Persons/km²			
2021 — ABS						
N=246,073 6,094	-373 (-18.2%)	14,964	0.4			

ESTIMATED POPULATION CHANGE 2021-2041						
2021 — NSW PLANNING & ENVIRONMENT						
UNDER 19 YEARS	20-64 YEARS	65+ YEARS	TOTAL YEARS			
2021 N=527 2041 N=326 -201 (-31.1%)	2021 N=823 2041 N=617 -206 (-25.0%)	2021 N=384 2041 N=418 34 (8.8%)	2021 N=1,734 2041 N=1,361 -373 (-18.2%)			

### **TOWN BASED POPULATIONS AND DEMOGRAPHY**

	POPULATION	MEDIAN AGE	NUMBER PRIVATE Dwellings	AVERAGE PEOPLE Per Household	NUMBER OF Families	AVERAGE Children Per Family
			2021 — ABS			
Lake Cargelligo	1,479	40	707	2.4	348	2.0

	MEDIAN WEEKLY Household income	MEDIAN MONTHLY Mortgage Repayment	MEDIAN WEEKLY Rent			
2021 – ABS						
Lake Cargelligo	\$1,158	\$867	\$170			

### DEMOGRAPHY

SEIFA						
2016 – ABS						
INDEX SCORE (BASED ON MINIMUM SCORE FOR MAXIMUM SCORE FOR Australian score of 1000) sais in Area sais in Area						
NSW	1,001.7	323	1184			
MPHN 969.9 478 1144						
Lachlan LGA 924 711 1081						
Lake Cargelligo	926					

AGE GROUPS								
	2020 – ERP							
PERSONS   PERSONS <t< th=""></t<>								
NSW	18.5%	12.8%	28.0%	24.6%	15.7%	10.7%	7.0%	2.2%
MPHN	19.6%	12.0%	22.6%	25.7%	18.9%	13.3%	8.7%	2.7%
Lachlan	401 (23.3%)	174 (10.1%)	388 (22.6)	403 (23.4%)	353 (20.6%)	210 (15.0%)	170 (9.9%)	48 (2.8%)

GENDER					
2021 – ABS					
MALES FEMALES					
	N % N %				
NSW	3,984,166	49.4	4,087,995	50.6	
MPHN	125,500	50.3	126,798	49.7	
Lachlan	3,046	50.0	3,048	50.0	

EDUCATION						
2020 – ABS						
People who left school at Full-time participation Participation in vocational School leaver   Year 10 or below, or did in secondary school Education and training - Participation in higher   Not go to school Education at age 16 Non-indigenous population Education						
NSW	33.0 per 100	84.1%	17.8 per 100	28.3%		
MPHN	42.0 per 100	74.2%	18.6 per 100	10.9%		
Lachlan	43.8 per 100	80.5%	12.6 per 100	NR		

EMPLOYMENT					
2020 – ABS					
LEARNING OR EARNING AT AGES 15 TO 19 UNEMPLOYMENT					
NSW	85.0%	4.9%			
MPHN	81.7%	4.8%			
Lachlan	136 (71.3%)	48 (5.3%)			

WEEKLY INCOME						
2021 – ABS						
LESS THAN \$650 TOTAL MORE THAN \$3,000 TOTAL Household weekly income household weekly income						
NSW	16.3%	26.9%				
MPHN	22.3%	13.9%				
Lachlan	24.9%	11.3%				

INCOME SUPPORT							
2020 – ABS							
	AGE PENSIONERS		DISABILITY SUPPO	ORT PENSIONERS	FEMAL	FEMALE SOLE PARENT PENSIONERS	
NSW	59.0%		4.6	5%		3.1%	
MPHN	60.3%		6.3	8%		5.4%	
Lachlan	219 (62.1%)		72 (4	.2%)		33 (8.8%)	
	PEOPLE RECEIVING AN UNEMPLOYMENT PEOPL Benefit			PEOPLE RECEIVING AN UNEMPLOYMENT YO Benefit Long-term		YOUNG PEOPLE AGED 16 TO 24 RECEIVING An unemployment benefit	
NSW	6.2%	5.6		5%		5.0%	
MPHN	7.1%		6.4	4%		6.1%	
Lachlan	108 (11.4%)		97 (10	).3%)		12 (5.3%)	
	LOW INCOME, WELFARE- Dependent families (with Children)	HEALTH CARE CARD Holders		PENSIONER CONCESS Holders	SION CARD	SENIORS HEALTH CARD Holders	
NSW	4.6%	6.7%		21.1%		10.9%	
MPHN	5.4%	7.3%		27.3%		10.3%	
Lachlan	201 (7.4%)		600 (6.5%)	2,429 (27.1%)		208 (10.1%)	

	HOUSEHOLDS						
2020 – ABS							
	HOUSEHOLDS IN DWELLINGS RECEIVING RENT ASSISTANCE FROM The Australian Government	DWELLINGS RENTED FROM THE GOVERNMENT HOUSING Authority					
NSW	18.3%	4.7%					
MPHN	17.9%	3.4%					
Lachlan	102 (15.6%)	46 (7.3%)					

HOUSEHOLDS					
2020 – ABS					
	*MORTGAGE STRESS	*RENTAL STRESS			
NSW	9.6%	27.9%			
MPHN	8.2%	25.7%			
Lachlan	11 (7.5%)	175 (19.2%)			

\*Low income households (households in bottom 40% of income distribution)

	FAMILIES					
2018 – ABS						
	SINGLE PARENT FAMILIES WITH CHILDREN Aged Less Than 15 years	JOBLESS FAMILIES WITH CHILDREN Aged Less Than 15 years	*CHILDREN IN FAMILIES WHERE THE Mother has low educational Attainment			
NSW	19.9%	12.0%	19.6%			
MPHN	23.5%	13.2 %	25.0%			
Lachlan	44 (25.5%)	31 (17.7%)	97 (25.4%)			

\*Children aged less than 15 years living in families where the female parent's highest level of schooling was year 10 or below/ female parent did not attend school

	ETHNICITY					
2018 – ABS						
	AUSTRALIAN-BORN POPULATION	PEOPLE BORN (OVERSEAS) IN Predominantly English speaking Countries	PEOPLE BORN IN PREDOMINANTLY NON- English speaking countries			
NSW	65.5%	6.7%	21.1%			
MPHN	82.2%	3.2%	5.4%			
Lachlan	1,477 (83.2%)	30 (1.7%)	39 (2.2%)			

ETHNICITY					
	2018 – ABS				
	PEOPLE BORN IN A PREDOMINANTLY Non-English speaking (NES) country Resident in Australia for five years or More	PEOPLE BORN IN A PREDOMINANTLY Non-English speaking (NES) country Resident in Australia for Less Than Five Years	PEOPLE BORN OVERSEAS REPORTING Poor proficiency in English		
NSW	16.1%	4.1%	3.4%		
MPHN	3.6%	1.4%	0.9%		
Lachlan	23 (1.3%)	13 (0.8%)	4 (0.2%)		

ETHNICITY						
	2020 — ABS					
COUNTRY	LACHLAN	NSW	MPHN			
China	3 (0.2%)	(3.1%)	(0.2%)			
India	6 (0.3%)	(1.9%)	(0.9%)			
Italy	0	(0.7%)	(0.6%)			
Vietnam	0	(1.1%)	(0.1%)			
Philippines	10 (0.6%)	(1.2%)	(0.5%)			
Malaysia	0	(0.4%)	(0.1%)			
Germany	3 (>0.1%)	(0.4%)	(0.2%)			
Greece	0	(0.4%)	(0.0%)			
Sri Lanka	1 (0.1%)	(0.4%)	(0.1%)			

DWELLINGS WITH NO MOTOR VEHICLE				
2016 – ABS				
NSW	9.2%			
MPHN	MPHN 5.4%			
Lachlan	38 (5.9%)			

### **ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLE**

INDIGENOUS STATUS					
2020 — ERP					
ABORIGINAL POPULATION AS PROPORTION OF TOTAL POPULATION					
	NUMBER %				
NSW	288,565	3.5			
MPHN	15,408	5.8			
Lachlan	436	23.0			

INDIGENOUS STATUS								
			2020 — ER	P (NON-ABS)				
	0-4 Y	EARS	5-9 YI	ARS	10-14	10-14 YEARS 15-19 YEARS		YEARS
	NUMBER	%	NUMBER	%	NUMBER	%	NUMBER	%
NSW	35,878	12.4	32,475	11.3	30,562	10.6	27,034	9.4
MPHN	2,036	13.2	1,809	11.7	1,754	11.4	1,421	9.2
Lachlan	53	12.1	49	11.3	53	12.2	38	8.7
	20-24	YEARS	25-29 \	'EARS	30-34 \	YEARS	35-39	YEARS
	NUMBER	%	NUMBER	%	NUMBER	%	NUMBER	%
NSW	25,822	8.9	23,468	8.1	18,297	6.3	15,880	5.5
MPHN	1,330	8.6	1,127	7.3	981	6.4	852	5.5
Lachlan	43	9.8	22	5.0	32	7.4	20	4.7
	40-44	YEARS	45-49	/EARS	50-54	YEARS	55-59	YEARS
	NUMBER	%	NUMBER	%	NUMBER	%	NUMBER	%
NSW	13,315	4.6	14,480	5.0	13,599	4.7	11,881	4.1
MPHN	679	4.4	678	4.4	708	4.6	662	4.3
Lachlan	18	4.0	16	3.7	21	4.9	24	5.4
		60-64 YEARS				65+ \	/EARS	
	NUN	<b>ABER</b>	%		NUMBER		%	
NSW	9,5	585	3.3		16,290		5.6	
MPHN	4	86	3.2		88	5	5.	7
Lachlan	1	6	3.7		32	2	7.3	3

VOCATIONAL EDUCATION					
2020 – ABS					
PARTICIPATION IN VOCATIONAL EDUCATION AND TRAINING - ABORIGINAL POPULATION					
	NUMBER	ASR PER 1,000			
NSW	50,250	17.8			
MPHN	2,715	18.6			
Lachlan	90	12.3			

### **MOTHERS, BABIES AND CHILDREN**

TOTAL FERTILITY RATE				
2020 – ABS				
	BIRTHS	TOTAL FERTILITY RATE		
NSW	95,459	1.73		
MPHN	2,949	2.26		
Lachlan	31	3.03		

MOTHERS AND BABIES					
2017 TO 2019 — ABS					
	SMOKING DURING PREGNANCY				
	SMOKING DURING PREGNANCY	% SMOKING DURING PREGNANCY			
NSW	25,876	9.0			
MPHN	1,488	17.1			
Lachlan	20	25.5			

IMMUNISATION						
2018 — ABS						
	CHILDREN FULLY IMMUNISED At 1 year of Age		CHILDREN FULLY IMMUNISED At 2 years of age		CHILDREN FULLY IMMUNISED At 5 years of age	
	NUMBER	%	NUMBER	%	NUMBER	%
NSW	90,965	94.0	90,512	90.2	97,477	94.6
MPHN	2,770	95.2	2,777	93.2	2,696	96.0
Lachlan	25	96.9	32	95.2	29	97.3

CHILD CARE					
2016 – ABS					
		ILD CARE TO D/ Children	UNPAID CHILD CARE TO Other Child/ Children		
	NUMBER	%	NUMBER	%	
NSW	1,194,612	19.6	423,262	6.9	
MPHN	34,939	18.3	14,389	7.5	
Lachlan	254	18.3	102	7.3	

RISK FACTORS CHILDREN								
			2020	– ABS				
	ESTIMATED NUMBER OF MALES AGED 2-17 YEARS WHO WERE Overweight (but not obese) (modelled estimates)*		ESTIMATED NUMBER OF Females Aged 2-17 Years Who were overweight (But not obese) (Modelled estimates)*		ESTIMATED NUMBER OF Females Aged 2-17 Years who were obese (Modelled estimates)*			
	NUMBER	ASR PER 100	NUMBER	ASR PER 100	NUMBER	ASR PER 100	NUMBER	ASR PER 100
NSW	137,863	17.4	59,650	7.5	125,141	16.6	54,849	7.3
MPHN	4,889	18.8	2,866	11.1	4,423	17.7	2,668	10.7
Lachlan	35	17.2	22	10.9	30	15.2	20	10.2

VULNERABLE CHILDREN							
2021 — AEDC							
	DEVELOPMENTALL	Y VULNERABLE ON ON	E OR MORE DOMAINS	DEVELOPMENTALLY	VULNERABLE	ON TWO	OR MORE DOMAINS
	NUMBER		%	NUMBER			%
NSW	19,067		21.2	9,510			10.5
MPHN	647		23.5	336			12.2
Lachlan	9		32.0	5			18.6
		AND WELLBEING - Lly vulnerable	PHYSICAL HEALTH Developmen				AND WELLBEING - Ally on track
	NUMBER	%	NUMBER	%	NUMBE	R	%
NSW	8,513	9.4	11,246	12.4	70,67	'1	78.1
MPHN	278	10.1	314	11.4	2,168	3	78.5
Lachlan	5	16.5	3	11.3	20		72.2
	SOCIAL COM Developmenta	MPETENCE - Lly vulnerable	SOCIAL COMPETENCE - Developmentally at Risk			SOCIAL COMPETENCE - Developmentally on track	
	NUMBER	%	NUMBER	%	NUMBE	R	%
NSW	8,458	9.4	13,175	14.6	68,78	19	76.1
MPHN	293	10.6	396	14.4	2,070	2	75.0
Lachlan	5	18.6	5	19.6	17		61.9
	EMOTIONAL MATURITY - Developmentally vulnerable			EMOTIONAL MATURITY - Developmentally at Risk			MATURITY - Ally on track
	NUMBER	%	NUMBER	%	NUMBE	R	%
NSW	6,550	7.3	12,300	13.7	71,20	3	79.1
MPHN	235	8.5	424	15.4	2,09	3	76.1
Lachlan	5	16.5	5	19.6	18		63.9

VULNERABLE CHILDREN 2021 — AEDC					
	LANGUAGE AND COGNITIVE SKILLS (Schools-based) - developmentally at risk		LANGUAGE AND COGNITIVE SKILLS (Schools-based) - Developmentally on track		
	NUMBER	%	NUMBER	%	
NSW	8,092	9.0	76,676	84.9	
MPHN	271	9.8	2,256	81.8	
Lachlan	7	24.7	17	59.8	

	COMMUNICATION SKILLS AND GENERAL KNOWLEDGE - Developmentally at Risk		CHILDREN DEVELOPMENTALLY ON TRACK IN Communication Domain	
	NUMBER	NUMBER %		%
NSW	14,068	15.6	68,741	76.0
MPHN	377	13.6	2,148	77.8
Lachlan	5	16.5	21	74.2

HPV						
2021						
		LES AGED 12-13 YEARS IN MID- Ed dose 3 by 2016	HPV VACCINE COVERAGE: MALES AGED 12-13 YEARS IN MID- 2013, who received dose 3 by 2016			
	NUMBER	%	NUMBER	%		
NSW	36127	83.0	35834	78.2		
MPHN	1342	87.4	1313	86.2		
Lachlan	69	60.6	64	57.9		

### **OLDER PEOPLE**

OLDER PERSONS 2016 – ABS					
		ALONE, YEARS	LIVING ALONE; WITH DISABILITY; Low income, 65+ years		
	NUMBER	%	NUMBER	%	
NSW	275,196	24.4	29,883	2.6	
MPHN	11,625	25.0	1,088	2.3	
Lachlan	91	27.2	9	2.8	
		ALONE, Years	LIVING ALONE; WITH DISABILITY; Low income, 85+ years		
	NUMBER	%	NUMBER	%	
NSW	52,065	41.8	3,677	2.9	
MPHN	11,625	33.2	85	1.3	
Lachlan	91	46.1	0	0.0	

OLDER PERSONS						
2016 — ABS						
		EVERE DISABILITY AND LIVING IN Ity, 65+ years	MODELLED ESTIMATES OF PERSONS WITH ONE OR MORE Activities for which assistance is needed, 65+ years			
	NUMBER	%	NUMBER	ASR PER 100		
NSW	170,636	14.9	414,338	36.7		
MPHN	5,293	12.3	15,435	35.4		
Lachlan	40	12.6	108	34.3		

OLDER PERSONS						
2018 — ABS						
		NILD CORE ACTIVITY LIMITATION, Delled Estimates	PEOPLE WITH SEVERE CORE ACTIVITY LIMITATION, 65+ years — Modelled Estimates			
	NUMBER	%	NUMBER	ASR PER 100		
NSW	234,212	29.5	98,912	11.8		
MPHN	15,650	33.6	6,101	13.0		
Lachlan	404	34.4	147	12.5		

#### **POPULATION HEALTH** Mortality

MEDIAN AGE OF DEATH					
2016 TO 2020 — ABS					
	MA	ILES	FEMALES		
	NUMBER OF DEATHS	MEDIAN AGE (YEARS)	NUMBER OF DEATHS	MEDIAN AGE (YEARS)	
NSW	138,921	79.0	129,720	85.0	
MPHN	5,976	78.0	5,161	84.0	
Lachlan	59	79.0	40	84.0	

'Premature mortality' refers to deaths that occur at an age earlier than a selected cut-off. For this analysis, deaths among people aged under 75 are considered premature.

	PREMATURE DEATHS								
2016 TO 2020 — ABS									
	MA	ILES	FEMALES						
	NUMBER OF DEATHS	ASR PER 100,000	NUMBER OF DEATHS	ASR PER 100,000					
NSW	54,579	292.0	33,272	178.1					
MPHN	2,426	370.3	1,291	205.8					
Lachlan	23	598.4	11	321.8					

	PREMATURE DEATHS BY CAUSE								
2016 TO 2020 – ABS									
		FROM CANCER, D 74 Years		DEATHS FROM LUNG CANCER, 0 to 74 years			DEATHS FROM BREAST CANCER (Females), 0 to 74 years		
	NUMBER OF Deaths	ASR PI 100,0		NUMBER OF Deaths	ASR PER 100,000	NUMB Dea		ASR PER 100,000	
NSW	36,591	97.7	7	7,425	19.8	2,7	'57	14.8	
MPHN	1,451	110.	1	265	19.8	10	)4	16.7	
Lachlan	12	166.	1	0	-	(	)	-	
	DEATHS FROM System D 0 to 74	ISEASES,	HEA	DEATHS FROM ISCHAEMIC Heart Disease, 0 to 74 years		RESPIRATORY Diseases, I years		S FROM EXTERNAL Causes, To 74 years	
	NUMBER OF Deaths	ASR PER 100,000	NUMBER O Deaths	F ASR PER 100,000	NUMBER OF Deaths	ASR PER 100,000	NUMBER Death:		
NSW	15,586	41.7	7,338	19.6	6,259	16.7	10,09.	2 27.2	
MPHN	680	52.0	340	26.1	305	22.7	451	41.1	
Lachlan	6	78.1	0	-	0	-	0	-	

	AVOIDABLE DEATHS BY CAUSE							
2016 TO 2020 — ABS								
	DEATHS FROM SELECTED External causes of Mortality (falls; fires, Burns; suicide and self- Inflicted injuries; etc.) aged 0 to 74 years		DEATHS FROM SUICIDE AND Self-inflicted injuries Aged 0 to 74 years		DEATHS FROM OTHER External Causes of Mortality (transport Accidents; Accidental Drowning and Submersion; Etc.) Aged 0 to 74 years		DEATHS FROM TRANSPORT Accidents aged 0 to 74 Years	
	NUMBER OF Deaths	ASR PER 100,000	NUMBER OF Deaths	ASR PER 100,000	NUMBER OF Deaths	ASR PER 100,000	NUMBER OF Deaths	ASR PER 100,000
NSW	4,738	12.8	4,115	11.1	5,354	14.5	1,678	4.5
MPHN	215	19.4	192	17.9	236	21.7	115	10.5
Lachlan	0	-	0	-	0	-	0	-

\*NW = number withheld due to small sample size causing issues with identification/anonymity.

	DEATHS FRO 0 to 74	DM CANCER, I Years		LORECTAL CANCER, 4 Years	DEATHS FROM BREAST CANCER (Females), 0 to 74 years		
	NUMBER OF Deaths	ASR PER 100,000	NUMBER OF Deaths	ASR PER 100,000	NUMBER OF DEATHS	ASR PER 100,000	
NSW	10,601	28.3	3,878	10.4	2,757	14.8	
MPHN	458	35.1	163	12.5	104	16.7	
Lachlan	0	-	0	-	0	-	

		DM DIABETES, 4 years	DEATHS FROM CIRCULATORY System Diseases, 0 to 74 years		DEATHS FROM ISCHAEMIC Heart Disease, 0 to 74 years		DEATHS FROM Cerebrovascular diseases, 0 to 74 years	
	NUMBER OF Deaths	ASR PER 100,000	NUMBER OF Deaths	ASR PER 100,000	NUMBER OF Deaths	ASR PER 100,000	NUMBER OF Deaths	ASR PER 100,000
NSW	2,638	7.0	12,557	33.6	7,338	19.6	3,044	8.1
MPHN	118	9.0	557	42.4	340	26.1	110	8.3
Lachlan	0	-	0	-	0	-	0	-

Potentially avoidable deaths, a subset of all premature mortality (deaths under 75 years), and include deaths considered to be potentially preventable (those amenable to screening and primary prevention) and potentially treatable (those amenable to therapeutic interventions).

AVOIDABLE DEATHS BY CAUSE						
2016 TO 2020 — ABS						
	DEATHS FROM RESPIRATI 0 to 74		DEATHS FROM CHRONIC OBSTRUCTIVE PULMONARY DISEASE, 0 to 74 years			
	NUMBER OF DEATHS	ASR PER 100,000	NUMBER OF DEATHS	ASR PER 100,000		
NSW	4,128	11.0	3,833	10.2		
MPHN	217	16.0	195	14.2		
Lachlan	0	-	0	-		

#### **HEALTH CONDITIONS**

	HEALTH CONDITIONS										
			2017	7 TO :	2018 — ABS						
	ESTIMATED NUMBER OF People with respiratory System diseases			ESTIMATED NUMBER OF PEOPLE With Asthma		ESTIMATED NUMBER OF People with Chronic Obstructive Pulmonary Disease		ESTIMATED NUMBER OF People with mental and Behavioural problems			
	NUMBER	ASR PER 100	NUMBE	R	ASR PER 100	NUMBER	ASR	PER 100	NUMBER		ASR PER 100
NSW	1,465,620	18.8	827,91	0	10.6	175,425		2.2	813,094		20.9
MPHN	47,533	20.0	31,35	5	13.0	6,690		2.5	25,718		21.8
Lachlan	363	21.0	288		16.2	56		2.8	191		22.2
		NUMBER OF PEOP (E and vasculaf		ES	STIMATED NUMBE Arth		TH	ESTIM	ATED NUMBER Osteopo		
	NUMBER	ASR P	ER 100		NUMBER	ASR PER 10	)0	NU	MBER	A	SR PER 100
NSW	385,093	4	.9		1,216,498	15.5		334	4,562		4.2
MPHN	15,044	5	5.3		52,723	19.2		10	),262		3.6
Lachlan	121	5	5.7		381	18.9			67		3.1

CANCER INCIDENCE							
2014 TO 2018 — NSW CANCER REGISTRY							
	PROSTATE CANCER DSER PER 100,000	BREAST CANCER DSER PER 100,000	BOWEL CANCER Dser Per 100,000	LUNG CANCER DSER PER 100,000	MELANOMA Dser Per 100,000		
NSW	70.8	63.3	37.6	43.1	52.9		
MPHN	79.4	65.9	38.8	46.0	56.0		
Lachlan	87.3	107.4	29.3	39.2	96.1		

MENTAL HEALTH PREVALENCE						
2021 – ABS						
	PEOPLE AGED 15 YEARS AN Had a mental f (including depri	PEOPLE AGED 0-14 YEARS WHO REPORTED THEY had a mental health condition (including depression or anxiety)				
	NUMBER	ASR PER 100	NUMBER	ASR PER 100		
NSW	617,947	9.4	28,463	1.9		
MPHN	21,873	<i>11.0</i>	1,140	2.4		
Lachlan	114	8.4	8	2.1		

	2017 TO 2018 — AIHW							
	HIGH OR VERY HIGH PSYCHOLO Kessler 10	AGED 18 YEARS AND OVER WITH Gical Distress, based on the Scale (K 10) Destimates)	ESTIMATED NUMBER OF FEMALES AGED 18 YEARS AND OVER WITH HIGH OR VERY HIGH PSYCHOLOGICAL DISTRESS, BASED ON The Kessler 10 Scale (K10) (Modelled Estimates)					
	NUMBER	ASR PER 100	NUMBER	ASR PER 100				
NSW	321,815	10.8	427,731	14.0				
MPHN	9,217	10.3	11,852	13.1				
Lachlan	436	10.5	546	13.6				
		NT PRESENTATIONS: TOTAL And Behavioural disorders	ADMISSIONS FOR MENTAL HEALTH RELATED CONDITIONS, Persons - All Hospitals					
	NUMBER	ASR PER 100	NUMBER	ASR PER 100				
NSW	103,101	1,283.8	2,601	1,077.9				
MPHN	12,626	5,428.7	89	1,002.2				
Lachlan	34	2,132.9	122	1,108.2				

DISABILITY							
2016 — ABS							
		: TO PERSONS WITH A Bility	PEOPLE WITH A PRO Disability (include term accom All a	S PEOPLE IN LONG- Modation),	PEOPLE WITH A PROFOUND OR SEVERE Disability and living in the Community, all ages		
	NUMBER	%	NUMBER	%	NUMBER	%	
NSW	709,415	11.6	398,746	5.6	346,451	4.9	
MPHN	22,985	12.0	12,717	5.7	10,906	4.9	
Lachlan	156	11.2	91	5.8	79	5.0	

	SELF ASSESSED HEALTH				
	2017 TO 2018 — ABS				
ESTIMATED NUMBER OF PEOPLE AGED 15 YEARS AND OVER WITH FAIR OR POOR SELF-ASSESSED HEALTH					
	NUMBER	ASR PER 100			
NSW	897,768	14.1			
MPHN	31,578	15.3			
Lachlan	249	16.5			

CANCER SCREENING						
2015 TO 2016 — NSW CANCER COUNCIL						
	BREAST SCREENING RATE Women 50 - 69 years		CERVICAL SCREENING Women 20 - 69 years		BOWEL SCREENING People 50 - 74 years	
	NUMBER	%	NUMBER	%	NUMBER	%
NSW	491,605	42.9	2,153,768	44.1	512,013	38.3
MPHN	18,913	53.8	63,082	52.3	28,837	40.7
Lachlan	NR	-	481	42.4	214	30.9

#### **HEALTH BEHAVIOURS**

RISK FACTORS										
2017 TO 2018 – ABS										
	ESTIMATED POPULATION, AGED 18 Years and over, who undertook Low, very low or no exercise in the Previous week (modelled estimates)		ESTIMATED NUMBER OF PEOPLE AGED 18 Years and over with adequate fruit Intake (modelled estimates)				ESTIMATED NUMBER OF PEOPLE AGED 18 Years and over who had high blood Pressure			
	NUMBER	ASR PE	R 100	NUMBER		ASR PER 100	) NUI	NUMBER		SR PER 100
NSW	900,743	65	.3	2,204,749		55.3 1,400		0,529 23.		23.1
MPHN	30,300	70	.2	63,082		52.3	52.3 47,2		297 23.6	
Lachlan	1,019	76.	.0		715	52.8	3	59		24.6
	MALES AGED Over who wef	NUMBER OF 18 YEARS AND Re overweight T obesej	ARS AND AGED 18 Erweight		ESTIMATED NUMBER OF MALES Aged 18 Years and over who Were obese				ESTIMATED NUMBER OF Females Aged 18 years and Over who were obese	
	NUMBER	ASR PER 100	NUME	BER	ASR PER 10	0 NUMBER	ASR PER 100	NUMBE	R	ASR PER 100
NSW	1,226,016	41.1	952,0	093	32.1	890,104	29.0	917,64	43	29.9
MPHN	38,354	42.5	34,8	877	37.4	27,538	29.6	33,26	57	34.9
Lachlan	277	42.0	30	3	44.7	187	27.9	278		40.7
	ESTIMATED NUMBER OF MALES AGED 18 YEARS A Who were current smokers (modelled esti									
	NUN	<b>IBER</b>	A	ASR PER 100		NUM	NUMBER		ASR PER 100	
NSW	511,	511,157		17.2		355,	355,337		11.7	
MPHN	18,8	8,807		21.9		12,4	12,499		14.1	
Lachlan	165			26.8		108		17.2		
	ESTIMATED NUMBER OF MALES AGED 18 YEARS A Who consumed more than two standard al Drinks per day on average (modelled esti			.COHOLIC						
	NUMBER		ļ	ASR PER 100		NUMBER		ASR PER 100		
NSW		676,575		22.7		258,306		8.5		
MPHN	27,	133			29.7		10,222		11.1	
Lachlan	2	50			37.6		94		14.5	

CRIME STATISTICS				
2021 — BOSCAR				
	SEXUAL ASSAULT ASR PER 100,000	DOMESTIC ASSAULT Asr Per 100,000	LIQUOR OFFENCES ASR PER 100,000	
NSW	81.1	382.1	106.9	
MPHN	100.8	429.2	197.1	
Lachlan	166.2	933.1	544.6	

CRIME STATISTICS					
2021 — BOSCAR					
USE/POSSESS					
	COCAINE Asr Per 100,000	AMPHETAMINES Asr Per 100,000	ECSTASY Asr Per 100,000	CANNABIS Asr Per 100,000	NARCOTICS Asr Per 100,000
NSW	270.9	92.2	25.2	217.7	14.2
MPHN	16.0	96.7	17.2	257.5	2.3
Lachlan	0.0	45.6	6.5	168.9	NR

## **TECHNICAL NOTES** MPHN LGA DATA PRIORITISATION TOOL

MPHN's Data Prioritisation Tool applies a score based on the LGA result in relation to the state average and Murrumbidgee average results.

A score of zero to four is applied based on the difference between the LGA proportion or Age Standardised Rate (ASR) (see page 23 for explanation) result compared to the NSW average score.

Within the list of LGA scores, a score of one is given to the LGAs with either a higher or lower score than the average for the Murrumbidgee region.

The two scores are summed to give a total score.

To highlight the impacts, colour coding is applied to the range of 0 - 5 totals of both the NSW and Murrumbidgee averages combined.

MPHN's LGA Data Prioritisation Tool is also applied to socio-demographic variables such as age, gender etc.

MATRIX SCORING SYSTEM COMPARED TO THE NSW AVERAGE					
PROPORTION	ASR (TWO DIGIT RESPONSE)	ASR (Three Digit Response)	SCORE		
Less than 0 or negative score	Less than 0 or negative score	Less than 0 or negative score	0		
0 and 10%	0 -10	0 - 100	1		
10.1% - 29.9%	11 – 30	101-300	2		
30% - 49.9%	31 - 50	301 - 500	3		
>50%	51 +	501 +	4		
Higher or lower than Murrumbidgee average dependent on orientation of response					

(positive or negative)

all values above/below average

IMPACT SCORE				
0	LOW impact			
1				
2				
3				
4				
5	HIGH impact			

1

The following notes provide a definition for terms used in this report that may not be familiar to readers.

#### **SOCIO-ECONOMIC INDEXES FOR AREAS (SEIFA)**

The SEIFA score in this report is an index score that allows geographical ranking in Australia. The score measures socioeconomic advantage and disadvantage, information is obtained from the five-yearly Australian Census.

SEIFA is a group of four indexes, which are used to rank areas broadly by their level of advantage or disadvantage. It consists of four measures:

- Index of Relative Socio-Economic Advantage-Disadvantage
- Index of Relative Socio-Economic Disadvantage
- Index of Education and Occupation
- Index of Economic Resources

Some examples of variables that are measured and form the indexes are (this is limited, there are more variables that are considered):

- · Percentage of low-income households
- Unemployment rate
- Percentage of low-skilled occupations and people without qualifications
- Percentage of households without a car
- Percentage of people living overcrowded dwellings
- Percentage of people under 70 with a disability
- Percentage of children with jobless parents
- Percentage of people with poor English proficiency

SEIFA scores are expressed on a scale where lower numbers always mean more disadvantage and less advantage, while higher numbers mean less disadvantage and more advantage. They are standardised so that the average for Australia is always close to 1,000.

#### AGE STANDARDISED RATE (ASR)

A method of adjusting the crude rate to eliminate the effect of differences in population age structures when comparing crude rates for different periods of time, different geographic areas and/or different population sub-groups (e.g. between one year and the next and/or States and Territories, Indigenous and non-Indigenous populations).

Adjustments are usually undertaken for each of the comparison populations against a standard population (rather than adjusting one comparison population to resemble another). Sometimes a comparison population is referred to as a study population.

ASRs are usually used for valid comparisons of rates in different populations, such as incidence rates, prevalence rates, mortality rates and health service utilisation rates.

An example of why they are used is because the numbers of deaths per 100,000 population are influenced by the age distribution of the population. Two populations with the same age-specific mortality rates for a cause of death will have different overall death rates if the age distributions of their populations are different. Age standardized mortality rates adjust for differences in population age distribution by applying the observed age-specific mortality rates for each population to a standard population. The age-standardised mortality rate is a weighted average of the age-specific mortality rates per 100,000 persons, where the weights are the proportions of persons in the corresponding age groups of the standard population.











An Australian Government Initiative