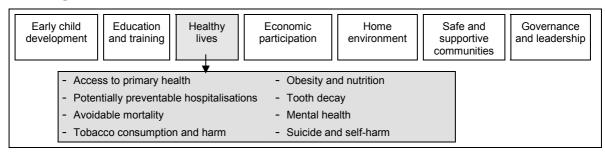
7 Healthy lives

Strategic areas for action



Indigenous people experience very high rates of a variety of physical and mental illnesses, which contribute to poorer quality of life and higher mortality rates. Physical health outcomes can be related to various factors, including a healthy living environment, access to health services, and lifestyle choices. Health risk behaviours, such as smoking and poor diet, are strongly associated with many aspects of socioeconomic disadvantage. Mental health issues can be related to a complex range of medical issues, historical factors, the stressors associated with entrenched disadvantage and drug and substance misuse.

Health outcomes directly affect the quality of people's lives, including their ability to socialise with family and friends and participate in the community, and to work and earn an income. Many COAG targets and headline indicators reflect the importance of healthy lives:

- life expectancy (section 4.1)
- infant mortality (section 4.2)
- disability and chronic disease (section 4.8).

Other COAG targets and headline indicators can be directly influenced by health outcomes:

- employment (section 4.6)
- household and individual income (section 4.9).

Outcomes in the healthy lives strategic area can be affected by outcomes in several other strategic areas for action, or can influence outcomes in other areas:

- early child development (maternal health, birthweight, early childhood hospitalisations, injury and preventable disease, hearing impediments) (chapter 5)
- education and training (school attendance and attainment) (chapter 6)
- economic participation (labour market participation, income support) (chapter 8)
- home environment (overcrowding, poor environmental health, access to functional water, sewerage and electricity) (chapter 9)
- safe and supportive communities (participation in sport, art or community group activities, alcohol, drug and other substance misuse and harm) (chapter 10).
- governance and leadership (engagement with service delivery) (chapter 11).

The indicators in this strategic area for action focus on the key factors that contribute to positive health outcomes (such as access to primary health services), as well as measures of the outcomes themselves:

- access to primary health primary health care is the first point of contact with the health system and enables prevention, early intervention, case management and ongoing care. It can help address and modify health risk behaviours and contribute to improved health outcomes. This section reports expenditure on health care services for Indigenous people, data on Indigenous people accessing primary health care services, information about the Indigenous health workforce and health infrastructure in discrete Indigenous communities (section 7.1)
- potentially preventable hospitalisations in many cases, hospital admissions can be prevented if more effective non-hospital care were available, either at an earlier stage in the disease progression or as an alternative to hospital care. Hospitalisations for injury and poisoning may also be preventable, although not necessarily through better primary health care. This section reports data on hospitalisations for potentially preventable chronic and acute conditions, vaccine-preventable conditions, sexually transmitted infections and injury and poisoning (section 7.2)
- avoidable mortality avoidable mortality counts untimely and unnecessary deaths from diseases for which effective public health, medical and other interventions are available. This section reports avoidable mortality by major causes (section 7.3)
- tobacco consumption and harm tobacco use is a significant contributor to premature death and ill health among Indigenous people. In addition to long term health risks, tobacco use among low income groups can divert scarce family resources away from beneficial uses. This section reports on tobacco consumption, and tobacco-related hospitalisations and deaths (section 7.4)

- obesity and nutrition obesity and poor nutrition are significant contributors to poor health outcomes. Obesity is a risk factor for diseases and conditions such as diabetes, heart disease, high blood pressure, osteoarthritis and some cancers. 'Nutrition', or healthy eating, can contribute to better health outcomes. This section reports limited available data (section 7.5)
- tooth decay healthy teeth are an important part of overall good health. Historically, Indigenous people had less tooth decay due to their traditional diet. The current level of tooth decay reflects changed diet, dental hygiene practices and access to dental care. This section reports available data on tooth decay, as well as data on hospitalisations for dental problems (section 7.6)
- mental health mental health plays an important role in the social and emotional wellbeing of Indigenous people. This section reports available data on the prevalence of psychological distress, treatment rates for mental health related services, death rates for mental and behavioural disorders, information on the mental health of prisoners and juveniles in detention, and the risk of clinically significant emotional and behavioural difficulties in children (section 7.7)
- suicide and self-harm suicide and self-harm cause great grief in both Indigenous and non-Indigenous communities. Studies suggest that Indigenous suicide is influenced by a complex set of factors relating to history of dispossession, removal from family, discrimination, resilience, social capital and socio-economic status. This section reports on suicide rates and hospitalisation rates for self-harm (section 7.8).

Attachment tables

Attachment tables for this chapter are identified in references throughout this chapter by an 'A' suffix (for example, table 7A.1.1). These tables can be found on the Review web page (www.pc.gov.au/gsp), or users can contact the Secretariat directly.

7.1 Access to primary health

Box 7.1.1 **Key messages**

- Expenditure per person on primary health care was 27 per cent higher for Indigenous people than for non-Indigenous people in 2004-05 (table 7.1.2).
- Immunisation rates for one year old Indigenous children (82.7 per cent) were lower than for non-Indigenous children of the same age (91.8 per cent) in 2007. Immunisation rates were similar for all children aged two and six years (table 7.1.3).
- Sixty per cent of Indigenous people reported that they usually went to the same general practitioner or health service. A further 30 per cent reported they usually went to an Aboriginal medical service (AHMAC 2008).
- Indigenous people represent a small proportion (1.0 per cent) of people working in health-related occupations in Australia, and even smaller proportions for occupations such as nurses (0.6 per cent), doctors (0.2 per cent) and dentists (0.2 per cent) (table 7A.1.21).

Indigenous people, like other Australians, experience a variety of physical and mental illnesses. Primary health care services (for example, doctors in private practice and Aboriginal and Torres Strait Islander primary health care services) influence the health status of Indigenous people by detecting and treating illness, managing chronic conditions and managing prevention programs. Access to primary health care can affect outcomes in a range of headline indicators and strategic areas for action, including life expectancy, infant mortality, disability and chronic disease, early child development and growth, substance use and misuse, and functional and resilient families and communities. Poor health can also affect people's educational attainment and ability to work.

Health services can be divided into primary health care services, which include public and community health services and those flowing from a patient-initiated contact (general practitioner consultations, hospital emergency attendances, general practitioner ordered investigations and prescriptions, over the counter medicines) and secondary/tertiary services, which involve a referral within the health system or a hospital admission. Appropriate use of primary health services can reduce the need for secondary/tertiary health services. Section 7.2 includes data on hospitalisations for chronic, acute and vaccine preventable conditions that may be potentially preventable with appropriate primary health care.

From consultations with Indigenous people and health policy makers in the preparation of the 2005 report, there was general agreement that distance is only one aspect influencing access to primary health care and that a more comprehensive

measure was required to reflect the barriers faced by Indigenous people including cultural, language and racism barriers. Cutcliffe (2004) reported examples of racism and cultural insensitivity in mainstream health services and found that these were not uncommon experiences for Indigenous people. Paradies (2007) and Paradies, Harris and Anderson (2008) reviewed a range of research that found that a majority of Indigenous people experience racism during their lives. Racism and cultural barriers lead to some Indigenous people not being diagnosed and treated for disease in the early stages, when it is often more easily and effectively treated. Paradies (2007) and Paradies, Harris and Anderson (2008) found that racism (from all sources and not only related to health care) had negative impacts on Indigenous health outcomes.

This indicator includes data on:

- the incidence and prevalence of disease and injury
- expenditure on health care services for Indigenous people in 2004-05
- immunisation rates
- Indigenous people's use of primary health care services
- the Indigenous health workforce.

In addition to data, this section presents case studies of programs to improve primary health care services for Indigenous people (see box 7.1.2). Other examples of successful health care initiatives are included in sections 5.1, 5.3, and 5.5.

Section 11.3, Engagement with service delivery, examines more broadly Indigenous people's use of services, the barriers they face in accessing services and case studies of programs that are improving accessibility. Section 11.3 also contains data on patients discharged from hospital against medical advice.

Box 7.1.2 'Things that work' — improving access to primary health care

The **Kimberley Satellite Dialysis Centre** (WA) is an Aboriginal Community Controlled Health Service run dialysis unit, which provides a culturally safe environment for Aboriginal patients. Attendance and patient acceptance of the service have been excellent. The Centre treats patients on-site in Broome and teaches patients about home-based dialysis so they do not have to attend the clinic so many times a week (C. Hayward pers. comm. 2009). It was a winner of a 2007 National Excellence Award in Aboriginal and Torres Strait Islander Health (DOHA 2007).

(Continued next page)

Box 7.1.2 (continued)

After the Centre opened in 2002, the proportion of Kimberley haemodialysis patients receiving treatment in the region increased from 10 to 65 per cent. These patients were more likely to correctly follow haemodialysis therapy and care guidelines, and had similar age standardised death rates as non-Indigenous patients in WA and the rest of Australia, excluding the NT (Marley et al. 2008).

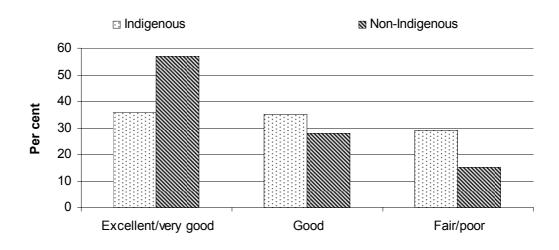
The Healthy Heart Cardiac Rehabilitation Program has been provided by the Wuchopperen Health Service in partnership with the Cardiac Rehabilitation Department of Cairns Base Hospital since July 2006. The Australian Medical Association 2007 Indigenous Health Report Card found that this initiative had had a significant positive impact on Indigenous participation in cardiac rehabilitation programs. Close to 100 Indigenous patients had been referred to the Wuchopperen Cardiac Rehabilitation program within a short period of time, with at least half of these referrals more than 200 km from Cairns. Before the program started, participation of Indigenous people in Cardiac Rehabilitation was poor (2–5 per cent). Since the program started, 100 per cent of referrals receive follow up, with 40 per cent of referrals attending the program requiring further investigation and potential surgery. There has been a 21 per cent participation rate in the exercise component and a 26 per cent participation rate in the cardiac education sessions (AMA 2007).

Incidence and prevalence of preventable diseases and injury

The 2004-05 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS) and the 2004-05 National Health Survey (NHS) collected data on people's self-perceived health status and long term health conditions. The available data do not distinguish between preventable and non-preventable conditions. Section 4.8 contains more information on the burden of disease for Indigenous people.

Administrative data on the incidence and prevalence of disease and injury are difficult to obtain, as some people do not seek treatment and others seek treatment from general practitioners and other primary health care providers who do not provide data to national collections about the conditions treated. Hospitalisation data provide information about the most serious cases of disease and injury. Section 7.2 includes data on hospitalisations for potentially preventable diseases and injury, including chronic, acute, vaccine preventable and sexually transmitted conditions, and injury and poisoning.

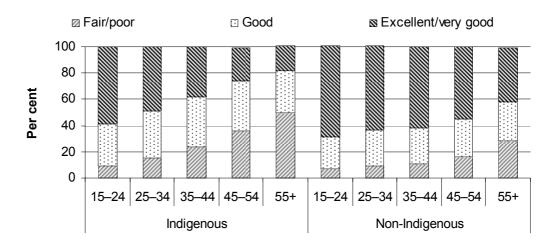
Figure 7.1.1 Age standardised self-assessed health status, people aged 15 years and over, 2004-05



Source: Derived from ABS (2006), ABS 2004-05 NATSIHS and ABS 2004-05 NHS; table 7A.1.1.

- In 2004-05, after adjusting for differences in age structure, Indigenous people were almost twice as likely as non-Indigenous people to report their health as fair or poor (figure 7.1.1).
- Non-age-standardised data for 2004-05, show that 43 per cent of Indigenous people aged 15 years and over reported their health as being very good or excellent, 35 per cent reported their health as being good and 22 per cent reported their health as being poor or fair (AHMAC 2008).

Figure 7.1.2 Self-assessed health status, by age, people aged 15 years and over, 2004-05



Source: AIHW from ABS (2006), ABS 2004-05 NATSIHS and ABS 2004-05 NHS; table 7A.1.1.

In 2004-05:

- the proportions of both Indigenous and non-Indigenous people rating their health as fair or poor increased with age. However, the gap between Indigenous and non-Indigenous people with fair/poor health increased significantly with age, particularly for people aged 35 years and over (figure 7.1.2)
- the proportions of Indigenous people reporting fair/poor or excellent/very good health was similar across states and territories and remoteness areas (tables 7A.1.3–4)
- Indigenous people's reported health status varied according to other socioeconomic characteristics. Those whose highest level of schooling was year 9 or below were more likely to rate their health as fair or poor compared to those who had completed years 11 or 12. A higher proportion of those who were employed rated their health as excellent or very good. Those in the lowest income quintile were more likely to rate their health as fair or poor than those in the highest quintile (table 7A.1.5).

Table 7A.1.6 includes information on how Indigenous people with different numbers of long term health conditions rated their health.

Access to health care compared to need

The data above show that Indigenous people generally have poorer self-perceived health status than non-Indigenous people. Other sections in this report confirm Indigenous people's poorer health outcomes — 4.1 (life expectancy), 4.2 (young child mortality), 4.8 (disability and chronic disease), 5.1 (maternal health), 5.3 (birthweight), 5.4 (early childhood hospitalisations), 5.5 (injury and preventable disease), 5.7 (hearing impediments), 7.2 (potentially preventable hospitalisations), 7.3 (avoidable mortality), 7.7 (mental health) and 9.2 (rates of diseases associated with poor environmental health).

There is no straightforward measure of Indigenous people's access to primary health care services compared to need. Indigenous people use many health services at a higher rate than non-Indigenous people. However, as Indigenous people's health is poorer than non-Indigenous people's health on a range of measures, Indigenous people could reasonably be expected to make greater use of health services than non-Indigenous people. AHMAC (2008) and AIHW (2009) explored Indigenous people's access to health care compared to need in more detail, comparing people's use of health services with their self-reported health status and number of long term health conditions.

Expenditure on health care services for Indigenous people

Expenditure per person on health services by type of service provides an indication of the relative use of health care services by Indigenous and non-Indigenous people. The most recently published data on health expenditure for Indigenous people are for 2004-05 (AIHW 2008).

It is not always possible to make accurate estimates of health expenditure for Indigenous people and their corresponding service use. For example, the Indigenous status of service users is not always clearly stated or recorded. Data on Indigenous status are often unavailable for privately funded services (although they are available for many publicly funded health services). The scope and definition of health expenditures also have some limitations. Other (non-health) agency contributions to health expenditure, such as those incurred within education departments and prisons are not included. There may also be some inconsistencies across data providers resulting from limitations of financial reporting systems and different reporting mechanisms (AIHW 2008).

Table 7.1.1 compares the total expenditure and expenditure per person on all health care services for Indigenous and non-Indigenous people. Data on expenditure split into primary and secondary/tertiary health care services are shown in table 7.1.2. Some of the health goods or services listed in table 7.1.1 fit entirely within either the primary or secondary/tertiary categories but other services are split between the two categories, as shown in table 7.1.2.

Table 7.1.1 Total expenditure on health services for Indigenous and non-Indigenous people, by type of health good or service, current prices, Australia, 2004-05

	Total expenditure (\$ million)			Expenditure per person (\$)			
Health good or service type	Indigenous	Non- Indigenous	Indigenous share (%)	Indigenous	Non- Indigenous	Ratio	
Hospitals	1 080.7	27 337.6	3.8	2 213	1 386	1.60	
Public hospital ^a	1 048.6	21 042.7	4.7	2 147	1 067	2.01	
Admitted patient services	799.4	16 226.8	4.7	1 637	823	1.99	
Non-admitted patient services	249.2	4 815.8	4.9	510	244	2.09	
Private hospital	32.1	6 295.0	0.5	66	319	0.21	
High-level residential care	41.7	6 283.4	0.7	85	319	0.27	
Patient transport	103.5	1 369.9	7.0	212	69	3.05	
Medical services	164.6	14 483.5	1.1	337	734	0.46	
Community health services	497.8	3 052.7	14.0	1 019	155	6.59	
Dental and other health practitioners	78.0	7 811.8	1.0	160	396	0.40	
Medications	109.4	11 056.4	1.0	224	561	0.40	
Aids and appliances	18.6	2 591.4	0.7	38	131	0.29	
Public health	88.9	1 350.3	6.2	182	68	2.66	
Research	46.0	1 669.0	2.7	94	85	1.11	
Health administration (nec)	74.6	2 254.5	3.2	153	114	1.34	
Total	2 304.0	79 260.4	2.8	4 718	4 019	1.17	

^a Public hospital services exclude any dental services, community health services, patient transport services, public health and health research undertaken by the hospital. .. Not applicable.

Source: AIHW 2008, Expenditures on Health for Aboriginal and Torres Strait Islander Peoples 2004-05, Cat. no. HWE 40, Health and welfare expenditure series no. 33, AIHW, Canberra; table 7A.1.7.

In 2004-05 across all health services:

- total expenditure on health care for Indigenous people was \$4718 per person compared with \$4019 per non-Indigenous person (table 7.1.1)
- expenditure per person was lower for Indigenous people on dental services (\$160 compared to \$396), medical services (\$337 compared to \$734), medications (\$224 compared to \$561) and aids and appliances (\$38 compared to \$131) (table 7.1.1)
- expenditure per person on community health services was 6.6 times greater for Indigenous people than non-Indigenous people (\$1019 compared to \$155) (table 7.1.1).

Table 7.1.2 Expenditure per person on primary and secondary/tertiary health services for Indigenous and non-Indigenous people, by type of health good or service, current prices, Australia, 2004-05a, b

	Primary			Secondary/tertiary			
	Expend	diture per per	son (\$)	Expenditu	ıre per persor	n (\$)	
Health good or service type	Indigenous	Non- Indigenous	Ratio	Indigenous	Non- Indigenous	Ratio	
Hospitals	255	122	2.09	1958	1264	1.55	
Admitted patient services	na	na	na	1703	1142	1.49	
Non-admitted patient services	255	122	2.09	255	122	2.09	
High-level residential care	na	na	na	85	319	.27	
Patient transport	106	14	7.63	106	56	1.91	
Medical services	285	488	0.58	52	246	0.21	
Community health services	1019	155	6.59	na	na	na	
Dental services	116	256	0.45	na	na	na	
Other health practitioners	22	70	0.31	22	70	0.31	
Medications	203	465	0.44	21	96	0.22	
Aids and appliances	35	109	0.32	4	22	0.16	
Public health	182	68	2.66	na	na	na	
Total	2223	1747	1.27	2248	2073	1.08	

^a Excludes expenditure on health administration not elsewhere included and research. ^b Primary health services include public and community health services and those flowing from a patient-initiated contact (general practitioner consultations, hospital emergency attendances, general practitioner ordered investigations and prescriptions, over the counter medicines etc.). Secondary/tertiary services involve a referral within the health system or a hospital admission.

Source: AIHW 2008, Expenditures on Health for Aboriginal and Torres Strait Islander Peoples 2004-05, Cat. no. HWE 40, Health and welfare expenditure series no. 33, AIHW, Canberra; table 7A.1.8.

In 2004-05, for health services excluding research and administration:

- expenditure on primary health care for Indigenous people was \$2223 per person compared with \$1747 per non-Indigenous person (table 7.1.2)
- primary health care expenditure on medical services per Indigenous person was a little over half of the expenditure per non-Indigenous person in 2004-05. For dental services, expenditure per Indigenous person was less than half of the expenditure per non-Indigenous person (table 7.1.2).

¹ Medical services are listed in the Medical Benefits Schedule and are provided by registered medical practitioners. Most medical services attract benefits under Medicare. They include services provided to private patients in hospitals and those funded by injury compensation insurers. Excluded are expenditures on medical services provided to public patients in public hospitals and medical services provided at out-patient clinics in public hospitals (AIHW 2008).

- expenditure per person on pharmaceuticals for Indigenous people was less than half that for non-Indigenous people (\$203 compared to \$465) (table 7.1.2)
- expenditure on secondary/tertiary health services was \$2248 per Indigenous person and \$2073 per non-Indigenous person (table 7.1.2).

Immunisation rates

Immunisation is highly effective in preventing sickness and death from vaccine preventable diseases. The Australian Government provides free childhood vaccines for children up to the age of seven. Burgess (2003) found that since the introduction of vaccination for children in 1932, deaths from vaccine preventable diseases have fallen by 99 per cent despite the Australian population nearly tripling.

Data on immunisation rates for children from the Australian Childhood Immunisation Register (ACIR) are shown in table 7.1.3. Childhood immunisation data are only available for NSW, Victoria, WA, SA and the NT. Indigenous status data are not routinely reported to the ACIR by Queensland, Tasmania or the ACT.

Table 7.1.3 Vaccination coverage estimates for children, NSW, Victoria, WA, SA and the NT combined, 31 December 2007^a

		1 year		2 years			6 years		
Vaccine	Indigen ous	Non- Indigen ous	Ratio ^c	Indigen ous	Non- Indigen ous	Ratio ^c	Indigen ous	Non- Indigen ous	Ratio ^c
	%	%		%	%		%	%	
Hepatitis B	91.8	94.6	1.0	96.7	96.1	1.0			
DTP	83.5	92.3	0.9*	94.0	95.4	1.0	86.1	89.9	1.0
Polio	83.4	92.3	0.9*	93.9	95.4	1.0	86.1	90.0	1.0
HIB	91.2	94.6	1.0	92.2	95.2	1.0			
MMR				93.3	94.4	1.0	86.6	89.9	1.0
All vaccines	82.7	91.8	0.9*	90.6	93.2	1.0	85.2	89.3	1.0

DTP = diphtheria, tetanus, pertussis. HIB = *Haemophilus influenzae* type b. MMR = measles, mumps, rubella. * Represents results with statistically significant differences in the Indigenous/non-Indigenous comparisons.

Source: AIHW (2009) derived from ACIR Medicare Australia data; table 7A.1.9.

• In 2007, immunisation rates for one year old Indigenous children (82.7 per cent) were lower than for non-Indigenous children of the same age (91.8 per cent). Immunisation rates for children aged two years and six years were similar for Indigenous and non-Indigenous children (table 7.1.3).

^a Three-month cohorts, for cohorts born between 1 July and 30 September 2006, 1 July and 30 September 2005, and 1 July and 30 September 2001, respectively. ^bData from the ACT, Queensland and Tasmania have not been included in this measure because Indigenous status data from these jurisdictions are not routinely reported or transferred to the Australian Childhood Immunisation Register. ^cRatio — coverage estimate for Indigenous children divided by coverage estimate for non-Indigenous children. .. Not applicable.

- Between 2001 and 2007, there were no significant changes in the proportions of one year old Indigenous and non-Indigenous children who were fully immunised. Over the same period there was no significant change in the proportion of Indigenous children fully immunised at two years but a significant increase in the proportion of non-Indigenous children. The proportions of both Indigenous and non-Indigenous children who were fully immunised at six years increased significantly (AIHW 2009).
- Data on childhood immunisation rates by State and Territory are shown in tables 7A.2.9–12.

Vaccination against influenza and pneumonia is recommended for Indigenous people aged 50 years and over, Indigenous people aged 15 to 49 years with medical conditions putting them at high risk of disease, and non-Indigenous people aged 65 years and over. Influenza and pneumonia vaccinations for people in these categories are provided free by the Australian Government (AIHW 2009).

Data on immunisation of Indigenous adults aged 50 years and over from the ABS 2004-05 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS) and immunisation of non-Indigenous adults aged 65 years and over from the ABS 2004-05 National Health Survey (NHS) are shown in table 7.1.4.

Table 7.1.4 Immunisation rates, Indigenous people aged 50 years and over and non-Indigenous people aged 65 years and over, 2004-05

	Indigend	ous	Non-Indigenous
_	50–64 years	65 + years	65 + years
		Per cent	
Had influenza vaccination in last 12 months	52	84	73
Had influenza vaccination but not in last 12 months	18	7*	11
Had influenza vaccination but not known if in last 12 months ^a	0*	1**	1*
Never had vaccination for influenza	30	9*	15
Total	100	100	100
Had pneumonia vaccination in last 5 years	30	48	43
Had pneumonia vaccination but not in last 5 years	1*	np	1
Had pneumonia vaccination but not known if in last 5 years ^b	7	np	3
Never had pneumonia vaccination	63	45	53
Total	100	100	100
Total number	36 900	12 200	2 430 300

^{*} Estimate has a relative standard error or 25 to 50 per cent and should be used with caution. ** Estimate has a relative standard error of greater than 50 per cent and is considered too unreliable for general use.

a Includes not known if ever had influenza vaccination.
b Includes not known if ever had pneumonia vaccination.

Source: AIHW (2008), derived from ABS 2004-05 NATSIHS and ABS 2004-05 NHS; table 7A.1.13.

In 2004-05:

- 52 per cent of Indigenous people aged 50–64 years had been vaccinated against influenza in the previous 12 months and 30 per cent had been vaccinated against pneumonia in the previous five years (table 7.1.4)
- 84 per cent of Indigenous people and 73 per cent of non-Indigenous people aged 65 years and over had been vaccinated against influenza in the previous 12 months. Forty-eight per cent of Indigenous people and 43 per cent of non-Indigenous people aged 65 years and over had been vaccinated against pneumonia in the previous five years (table 7.1.4).

Indigenous people accessing primary health care services

Data are available from the ABS 2004-05 NATSIHS on where Indigenous people usually go when they have a health problem. A more detailed presentation of these data was included in the 2007 report. The data compare the use of different primary health care services by Indigenous people in non-remote and remote areas.

- In 2004-05, 91 per cent of Indigenous people reported that they usually went to the same general practitioner or medical service. Sixty per cent of Indigenous people went to a doctor if they had a problem with their health and 30 per cent reported they went to an Aboriginal medical service. Aboriginal medical services were used as the regular source of health care by 15 per cent of Indigenous people in major cities but by 76 per cent in very remote areas. The proportion of Indigenous people using a doctor for their regular health care decreased with remoteness from 80 per cent in major cities to 6 per cent in very remote areas (AHMAC 2008).
- Indigenous people living in remote areas were around four times as likely as those living in non-remote areas to use Aboriginal medical services (66.0 per cent compared with 17.4 per cent) or to go to hospital (16.1 per cent compared with 3.7 per cent) (table 7A.1.14).
- Around two per cent of Indigenous people living in non-remote areas stated that they did not seek health care when they had a health problem, compared with 1.2 per cent in remote areas (table 7A.1.14).

In 2004-05, after taking into account the different age structures of the Indigenous and non-Indigenous populations, the times since Indigenous and non-Indigenous adults had last consulted a general practitioner (GP)/specialist were similar

(7A.1.15). A slightly higher proportion of Indigenous than non-Indigenous adults had visited a GP/specialist in the two weeks prior to the survey (28.7 per cent compared with 25.1 per cent) (table 7A.1.15). A greater proportion of Indigenous than non-Indigenous adults had not consulted a GP/specialist in the past 12 months in 2004-05 (17.8 per cent and 14.5 per cent, respectively) (table 7A.1.15). A higher proportion of Indigenous adults living in remote areas had not consulted a GP/specialist in the past 12 months than Indigenous adults living in non-remote areas, in both 2001 and 2004-05 (table 7A.1.15).

There are various reasons why Indigenous people in remote and non-remote areas did not go to a GP when they had a health problem. More than a third of Indigenous adults living in remote and non-remote areas reported 'personal reasons'² for not visiting a GP when they had a health problem (table 7A.1.17). For Indigenous adults living in remote areas in 2004-05, the most commonly reported reason(s) for not going to a GP were logistical³, more than twice as high as Indigenous adults in non-remote areas (table 7A.1.17).

Table 7A.1.16 compares the length of time since Indigenous and non-Indigenous people last consulted a dentist. A lower proportion of Indigenous than non-Indigenous people had visited a dentist in the two years prior to the survey being completed in 2001 and 2004-05. Further, a greater proportion of Indigenous than non-Indigenous people had not consulted a dentist for two years or more in 2001 and 2004-05. Indigenous people living in remote areas were more likely to have never consulted a dentist compared to Indigenous people living in non-remote areas in 2001 and 2004-05 (table 7A.1.16). Information on dental health outcomes for Indigenous people is included in section 7.6.

Table 7A.1.18 compares the various reasons why Indigenous adults in remote and non-remote areas did not go to a dentist when they had a dental problem. In 2004-05, Indigenous adults in remote areas were twice as likely as those in non-remote areas to report 'logistical reasons' for not going to a dentist (52.9 per cent compared with 26.6 per cent). Indigenous adults in non-remote areas were twice as likely as those in remote areas to report 'cost' as a reason for not seeking dental treatment (33.7 per cent compared with 16.2 per cent).

Data on reasons for not going to 'other health professionals' and to hospital by remoteness are reported in tables 7A.1.19 and section 11.3.

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² Personal reasons include: too busy (work, personal or family responsibilities), discrimination, service not culturally appropriate, language problems, dislikes service or health professional, afraid, embarrassed, or felt service would be inadequate.

³ Logistical reasons includes transport/distance, service not available in area, waiting time too long, or service not available at the time required.

Access to health services in discrete Indigenous communities

The ABS 2006 Community Housing and Infrastructure Needs Survey (CHINS) collected information on the number of Aboriginal primary health care centres and state-funded community health centres located in discrete Indigenous communities.⁴ Information was also collected on access to medical professionals and whether any Indigenous health workers had visited or worked within these communities (ABS 2007). Data were collected from a total of 1187 discrete Indigenous communities with a combined population of approximately 92 960 people.

Aboriginal primary health care centres are community-controlled health facilities that provide health care services and support to Aboriginal and Torres Strait Islander people. In 2006, 107 communities (41 450 people) reported that an Aboriginal primary health care centre was located in their community (45 per cent of the total population participating in the 2006 CHINS). Seventy-one per cent of Aboriginal primary health care centres were located in very remote communities, 9 per cent in remote communities and 20 per cent in non-remote communities.

One hundred and four discrete Indigenous communities (7743 people) had an Aboriginal primary health care centre located within 10 kilometres of their community (8 per cent of the total population participating in the 2006 CHINS). However, a larger number of Indigenous communities (417), with an aggregate population of 25 486, reported being 100 kilometres or more from the nearest Aboriginal primary health care centre (27 per cent of the total CHINS population).

Almost half of all the communities located 100 kilometres or more from the nearest Aboriginal primary health care centre were in the NT, followed by 35 per cent in WA.

Indigenous health workers are trained to certificate III, IV or diploma level, and generally provide a first point of contact for Indigenous people accessing health care services. They provide assistance and information on health issues such as alcohol and mental health, diabetes, ear and eye health, sexual health and hospital education. Indigenous health workers also act as liaison officers with other medical professionals. Table 7A.1.20 presents the number and proportion of discrete Indigenous communities that reported having a female or male Indigenous health worker, registered nurse or doctor visit or work within their community in 2006.

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⁴ Discrete Indigenous communities are defined by the ABS as geographic locations inhabited by or intended to be inhabited predominantly (greater than 50 per cent of usual residents) by Aboriginal or Torres Strait Islander peoples, with housing or infrastructure that is managed on a community basis.

- A greater proportion of discrete Indigenous communities reported having had a female Indigenous health worker visit or work within their community on a daily basis than a male Indigenous health worker (10.2 per cent compared with 6.3 per cent) (table 7A.1.20).
- Nearly half of the survey population (49 per cent) reported having had a female Indigenous health worker visit or work within their community on a daily basis (table 7A.1.20).
- A greater proportion of discrete Indigenous communities reported having a registered nurse visit or work within their community on a daily basis than a doctor (10.1 per cent compared with 1.2 per cent) (table 7A.1.20). Doctors were more likely than registered nurses to visit or work within a discrete Indigenous community on a weekly to monthly basis (table 7A.1.20).
- Only 1.0 per cent of the CHINS population reported that registered nurses did not frequently visit or work in their community and 2.0 per cent reported that doctors did not frequently visit or work in their community (less than 3-monthly) (table 7A.1.20).

The Indigenous health workforce

Due to cultural differences, language barriers and racism experienced when accessing some mainstream health services, some Indigenous people feel more comfortable seeing Indigenous health professionals and accessing Indigenous-controlled medical services. However, Indigenous people represent a small proportion (1.0 per cent) of people working in health-related occupations in Australia (ABS and AIHW 2008, 7A.1.21). For some particular occupations this proportion is even lower (for example, nurses — 0.6 per cent, medical practitioners/doctors — 0.2 per cent and dentists — 0.2 per cent) (ABS and AIHW 2008, table 7A.1.21). Consequently, many Indigenous people needing health care will be treated by non-Indigenous health professionals. Therefore, it is important that non-Indigenous health professionals treating Indigenous people to have an awareness and respect for Indigenous culture.

There is potential for the number of Indigenous people in occupations such as nursing to increase where Indigenous health workers have opportunities to progressively upgrade their qualifications with further training. The Marr Mooditj Aboriginal Health Training College in WA provides health worker training at certificate III, IV and diploma levels and a bridging course for those wishing to study nursing (Marr Mooditj 2007).

7.2 Potentially preventable hospitalisations

Box 7.2.1 **Key messages**

- In 2006-07, in NSW, Victoria, Queensland, WA, SA and public hospitals in the NT:
 - the Indigenous hospitalisation rate for potentially preventable chronic conditions was 6.4 times the rate for non-Indigenous people (table 7.2.1). The Indigenous hospitalisation rate in 2006-07 was 21.2 per cent higher than the rate in 2004-05 (186.9 compared to 154.2 hospitalisations per 1000 people) (table 7A.2.1)
 - the Indigenous hospitalisation rate for type 2 diabetes (with and without complications) was 5.2 times the rate for non-Indigenous people (table 7.2.2).
 Complications of diabetes accounted for 88.5 per cent of hospitalisations of Indigenous people for potentially preventable chronic conditions (table 7.2.1)
 - the Indigenous hospitalisation rate for potentially preventable acute conditions was 2.3 times the rate for non-Indigenous people. Hospitalisation rates for vaccine preventable and sexually transmitted diseases were also higher for Indigenous than non-Indigenous people (tables 7.2.3–5).
- Indigenous people were 45.8 times as likely as non-Indigenous people to be hospitalised for injury and poisoning and other external causes in 2005–2007 in NSW, Victoria, Queensland, WA, SA and public hospitals in the NT (table 7.2.6).

Potentially preventable hospitalisations include hospitalisations that could have been prevented if people had received appropriate primary health care, and hospitalisations that result from external causes, such as accidents, assault and poisoning that could potentially have been prevented by other means.

The extent of potentially preventable hospitalisations can indicate whether people are receiving adequate primary health care. In many cases, hospital admissions can be prevented if more effective non-hospital care were available, either at an earlier stage in the disease progression or as an alternative to hospital care (AHMAC 2008). The variation in potentially preventable hospitalisation rates between Indigenous and non-Indigenous people demonstrates considerable potential for improving Indigenous access to non-hospital care.

In addition to data on hospitalisations, this section includes a case study of a successful program working to prevent unnecessary hospitalisations (box 7.2.2).

Box 7.2.2 Things that work —reducing potentially preventable hospitalisations

The **Burns SA** Aboriginal Burns Program brings together government and non-government agencies, Aboriginal and non-Aboriginal organisations and people to address Aboriginal health. The program was developed by the Central Northern Adelaide Health Service and the Children, Youth and Women's Health Service in response to the overrepresentation of Aboriginal people admitted to the South Australian Burns Service.

The Program extends from prevention and pre-hospital care through to acute care and rehabilitation. Burns education and prevention is provided to school children and Aboriginal community members, and clinical burns emergency management training is provided for Aboriginal health workers, nurses and doctors. Appropriate discharge strategies and the delivery of culturally aware training is provided to improve the hospital journey of Aboriginal burns patients and their escorts. Early evaluation of the program indicates that in SA, Aboriginal burns patients admissions to the Burns Service are decreasing (SA Government unpublished).

This section explores preventable illness by looking at hospitalisations for potentially preventable chronic (tables 7.2.1 and 7.2.2) and acute conditions (table 7.2.3), vaccine preventable conditions (table 7.2.4), and infections with a predominantly sexual mode of transmission (table 7.2.5). It also contains data on hospitalisations for injury and poisoning (table 7.2.6).

The availability of hospitalisation data for Indigenous people has significantly increased in the 2009 report compared to the 2007 report. AIHW analysis of the completeness of Indigenous identification in hospital statistics has shown that data from NSW and Victoria now have sufficient identification of Indigenous status. Therefore, data now available for NSW, Victoria, Queensland, WA, SA and the NT. Nevertheless, Indigenous identification in hospitalisation data remains incomplete in most jurisdictions. The AIHW (2005) found that the quality of Indigenous hospitalisation data varied between jurisdictions and hospitals and was poorest in regions where Indigenous people are a small proportion of the population and poor in private hospitals. Tasmania and the ACT are working with the AIHW to improve the quality of their Indigenous hospitalisation data.

Because data for NSW and Victoria only included adequate Indigenous identification for 2004-05 to 2006-07, data from four states and territories (Queensland, WA, SA and the NT) are included in the attachment tables to provide a longer time series from 2001-02 to 2006-07. Hospitalisation data for these four jurisdictions should not be assumed to represent the hospitalisation experience in the other jurisdictions.

In 2006-07, Indigenous people had much higher hospitalisation rates than non-Indigenous people for a range of potentially preventable chronic diseases (diseases that typically persist for at least 6 months) and for complications associated with diabetes (tables 7.2.1 and 7.2.2).

Table 7.2.1 Age standardised hospitalisation rates for potentially preventable chronic conditions, per 1000 people, NSW, Victoria, Queensland, WA, SA and public hospitals in the NT. 2006-07^{a, b, c}

		Indigenous	Non-Indigenous d	Rate ratio
Asthma	rate	4.08	1.74	2.34
Congestive cardiac failure	rate	6.29	2.12	2.97
Diabetes complications	rate	165.42	20.81	7.95
Chronic obstructive pulmonary diseases	rate	12.00	2.64	4.54
Angina	rate	5.71	1.86	3.06
Iron deficiency anaemia	rate	1.79	1.27	1.41
Hypertension	rate	0.80	0.30	2.63
Nutritional deficiencies ^e	rate	0.03	0.01	3.93
Total for potentially preventable chronic conditions ^f	rate	186.94	29.27	6.39
Total hospitalisations for all conditions	rate	833.08	358.06	2.33

a Hospitalisation rates are directly age standardised to the Australian population at 30 June 2001. ^b Data are based on State or Territory of usual residence. ^c See table 7A.2.16 for the ICD-10-AM codes used to classify potentially preventable conditions. ^d Non-Indigenous includes hospitalisations of people identified as not Indigenous as well as those with a 'not stated' Indigenous status. ^e The Indigenous nutritional deficiencies standardised rate is based on only a small number of hospitalisations and should be used with caution. ^f The total is not the sum of the individual conditions because diabetes complications overlap other categories.

Source: AIHW National Hospital Morbidity Database (unpublished); table 7A.2.1.

For NSW, Victoria, Queensland, WA, SA and public hospitals in the NT:

- hospitalisation rates for Indigenous people with potentially preventable chronic conditions were 6.4 times as high as the rates for non-Indigenous people in 2006-07 (186.94 hospitalisations per 1000 Indigenous people compared to 29.27 hospitalisations per 1000 non-Indigenous people) (table 7.2.1)
- hospitalisation rates for Indigenous people with diabetes complications were 8.0 times as high and for chronic obstructive pulmonary diseases 4.5 times as high as the rates for non-Indigenous people. Hospitalisations for complications of diabetes accounted for 88.5 per cent of hospitalisations for potentially preventable chronic conditions (table 7.2.1)
- hospitalisations for potentially preventable chronic conditions were a higher proportion of all hospitalisations for Indigenous people (22.4 per cent) than for

- non-Indigenous people (8.2 per cent), which suggests that inadequate use of, or access to, primary health care services is a major contributor to Indigenous hospitalisation (table 7A.2.1).
- From 2004-05 to 2006-07, hospitalisations for potentially preventable chronic conditions increased every year for Indigenous people (table 7A.2.1). The hospitalisation rate for potentially preventable chronic conditions in 2006-07 was 21.2 per cent higher than the rate in 2004-05 (186.94 hospitalisations per 1000 people compared to 154.2 hospitalisations per 1000 people) (table 7A.2.1).

For Queensland, WA, SA and public hospitals in the NT, for 2001-02 to 2006-07:

- hospitalisation rates for Indigenous people for potentially preventable chronic conditions was 2.6 times as high in 2006-07 as in 2001-02. Hospitalisations for diabetes complications accounted for most of the increase in hospitalisations (tables 7A.2.2-4)
- non-Indigenous hospitalisations for potentially preventable chronic conditions also increased over this period, but, the increase was much lower than that for Indigenous people (82.1 per cent compared with 155.8 per cent) (tables 7A.2.2–4).

Data in table 7.2.2 are different to those relating to diabetes in table 7.2.1. Data in table 7.2.1 show hospitalisation rates for all types of diabetes (Type 1, Type 2 and unspecified) and where diabetes may have been an additional diagnosis (that is, it could be associated with other reasons for going to hospital). Data in table 7.2.2 only include Type 2 diabetes as a principal diagnosis. Thus, the data in table 7.2.2 are more narrowly specified and hospitalisation rates are lower.

Table 7.2.2 Age standardised hospitalisation rates for Type 2 diabetes as principal diagnosis by complication, per 1000 people, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2006-07a, b, c, d, e

	Indigenous	Non-Indigenous ^e	Rate ratio
Circulatory	0.47	0.22	2.09
Renal	2.60	0.22	11.83
Ophthalmic	3.16	1.22	2.59
Other specified	4.75	0.62	7.64
Multiple	3.25	0.45	7.25
No complications	0.14	0.04	3.99
Total ^g	14.40	2.77	5.19

^a Hospitalisation rates are directly age standardised to the Australian population at 30 June 2001. ^b Figures are based on the ICD-10-AM classification. The codes used were E11.x, where x=2 (renal complications), x=3 (ophthalmic complications, x=5 (peripheral circulatory complications), x=7 (multiple complications), x=8 (unspecified complications), x=9 (without complications), and x=0, 1, 4, 6 (other specified complications). ^c Results for individual complications may be affected by small numbers, particularly for Indigenous people, and should be interpreted with caution. ^d Although same day admission for dialysis is not normally coded with a principal diagnosis of Type 2 diabetes, the data contain a significant number in several jurisdictions. ^e Data are based on State or Territory of usual residence. ^f Non-Indigenous includes hospitalisations identified as not Indigenous as well as those with a 'not stated' Indigenous status. ^g Totals include hospitalisations for unspecified complications.

Source: AIHW National Hospital Morbidity Database (unpublished); table 7A.2.5.

For NSW, Victoria, Queensland, WA, SA and public hospitals in the NT:

- hospitalisations for Indigenous people with Type 2 diabetes as a principal diagnosis were 5.2 times the rates for non-Indigenous people in 2006-07 (14.40 hospitalisations per 1000 Indigenous people compared with 2.77 hospitalisations per 1000 non-Indigenous people) (table 7.2.2)
- hospitalisations for renal (kidney-related) complications of diabetes were 11.8 times as high for Indigenous people as non-Indigenous people (table 7.2.2).
- the hospitalisation rate for complications associated with Type 2 diabetes as a principal diagnosis increased for Indigenous people 40.6 per cent from 2004-05 to 2006-07 (from 10.24 per 1000 people in 2004-05 to 14.40 per 1000 people in 2006-07) (table 7A.2.5)
- the hospitalisation rate for type 2 diabetes also increased for non-Indigenous people between 2004-05 and 2006-07 but more slowly than for Indigenous people (19.9 per cent compared with 40.6 per cent (table 7A.2.5).

Queensland, WA, SA and public hospitals in the NT showed similar patterns for type 2 diabetes over a longer period (2001-02 to 2006-07) (tables 7A.2.6–7).

Table 7.2.3 presents hospitalisation rates for a variety of conditions which cause serious short term illness and could possibly be prevented, or their severity minimised, through access to effective primary health care services.

Table 7.2.3 Age standardised hospitalisation rates for potentially preventable acute conditions, per 1000 people, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2006-07^{a, b, c}

	Indigenous	Non-Indigenous ^d	Rate ratio
Dehydration and gastroenteritis	3.36	2.58	1.30
Pyelonephritis ^e	6.33	2.28	2.77
Perforated/bleeding ulcer	0.43	0.24	1.79
Cellulitis	4.58	1.56	2.93
Pelvic inflammatory disease	0.55	0.24	2.31
Ear, nose and throat infections	3.36	1.57	2.14
Dental conditions	3.95	2.62	1.51
Appendicitis	1.53	1.38	1.11
Convulsions and epilepsy	7.08	1.48	4.79
Gangrene	1.08	0.20	5.35
Total ^f	32.18	14.15	2.27

a Hospitalisation rates are directly age standardised using the 2001 Australian population. b Data are based on State/Territory of usual residence. c See table 7A.2.16 for the ICD-10-AM codes used to classify potentially preventable conditions. d Non-Indigenous includes hospitalisations of people identified as not Indigenous as well as those with a 'not stated' Indigenous status. eKidney inflammation caused by bacterial infection. Totals may not equal the sum of the individual conditions due to rounding.

Source: AIHW National Hospital Morbidity Database (unpublished); table 7A.2.8.

For NSW, Victoria, Queensland, WA, SA and public hospitals in the NT:

- hospitalisation rates for Indigenous people with potentially preventable acute conditions were 2.3 times the rates for non-Indigenous people in 2006-07 (32.18 hospitalisations per 1000 Indigenous people compared to 14.15 hospitalisations per 1000 non-Indigenous people) (table 7.2.3).
- hospitalisation rates for Indigenous people with gangrene were 5.4 times as high and for convulsions and epilepsy 4.8 times as high as the rates for non-Indigenous people (table 7.2.3).
- Indigenous and non-Indigenous hospitalisation rates for potentially preventable acute conditions fluctuated from year to year but there was no clear increase or decrease between 2004-05 and 2006-07 (table 7A.2.8). A similar fluctuation with no clear trend is also apparent in data for Queensland, WA, SA and the NT for the six years from 2001-02 to 2006-07 (tables 7A.2.9–11).

Table 7.2.4 presents the hospitalisation rates for influenza and 'other vaccine preventable conditions' from 2004-05 to 2006-07.

Table 7.2.4 Age standardised hospitalisation rates for vaccinepreventable conditions, per 1000 people, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NTa, b, c

	Indigenous	Non-Indigenous ^d	Rate ratio
2006-07			
Influenza	0.23	0.08	2.68
Other vaccine preventable conditions	2.32	0.49	4.73
2005-06			
Influenza	0.32	0.12	2.53
Other vaccine preventable conditions	2.49	0.52	4.78
2004-05			
Influenza	0.36	0.10	3.81
Other vaccine preventable conditions	2.35	0.56	4.22

a Hospitalisation rates are directly age standardised using the 2001 Australian population. b Data are based on State or Territory of usual residence. C See table 7A.2.16 for the ICD-10-AM codes used to classify potentially preventable conditions. d Non-Indigenous includes hospitalisations of people identified as not Indigenous as well as those with a 'not stated' Indigenous status.

Source: AIHW National Hospital Morbidity Database (unpublished); table 7A.2.12.

For NSW, Victoria, Queensland, WA, SA and public hospitals in the NT:

- hospitalisation rates for influenza and other vaccine-preventable conditions were higher for Indigenous people than non-Indigenous people in all years (table 7.2.4)
- in 2006-07, hospitalisation rates for influenza and other vaccine-preventable conditions for Indigenous people were 2.7 and 4.7 times the non-Indigenous hospitalisation rates for the same conditions (table 7.2.4)
- hospitalisation rates for influenza decreased for both Indigenous and non-Indigenous people between 2004-05 and 2006-07. However, the extent of the reduction in the hospitalisation rate for influenza was greater for Indigenous people, reducing from 0.36 per 1000 people in 2004-05 to 0.23 per 1000 people in 2006-07 (table 7.2.4)
- for 'other vaccine-preventable conditions', the hospitalisation rate for Indigenous people fluctuated but with no apparent trend between 2004-05 and 2006-07, while the non-Indigenous rate decreased slightly (table 7.2.4).

For Queensland, WA, SA and public hospitals in the NT, between 2001-02 and 2006-07, Indigenous hospitalisation rates for influenza and other vaccine

preventable conditions were much higher than for non-Indigenous people. Both Indigenous and non-Indigenous hospitalisation rates for influenza declined over the period, while hospitalisation rates for other vaccine-preventable conditions fluctuated (table 7A.2.13).

Table 7.2.5 presents data on hospitalisations for infections with a predominantly sexual mode of transmission. Hospitalisations for sexually transmitted infections may be preventable both by appropriate of primary health care and by the adoption of safe sexual practices.

Table 7.2.5 Age standardised hospitalisation rates for infections with a predominantly sexual mode of transmission, per 1000 people, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2006-07^{a, b, c}

	Indigenous	Non-Indigenous ^d	Rate ratio
Syphilis	0.35	0.03	12.50
Gonococcal infection	0.33	0.01	41.95
Chlamydial infection	0.19	0.02	9.63
Other sexually transmitted diseases	0.48	0.20	2.35

a Hospitalisation rates are directly age standardised using the 2001 Australian population. b Data are based on State or Territory of usual residence. C Includes principal or additional diagnosis based on ICD-10-AM classification. D Non-Indigenous includes hospitalisations of people identified as not Indigenous as well as those with a 'not stated' Indigenous status.

Source: AIHW National Hospital Morbidity Database (unpublished); table 7A.2.14.

For NSW, Victoria, Queensland, WA, SA and public hospitals in the NT:

- hospitalisation rates for sexually transmitted infections were greater for Indigenous people than non-Indigenous people in 2006-07 (table 7.2.5)
- hospitalisation rates for Indigenous people with gonococcal infection were 42.0 times as high, for syphilis 12.5 times as high and for chlamydial infections 9.6 times as high as the rates for non-Indigenous people (table 7.2.5)
- for Indigenous people, the hospitalisation rate for syphilis decreased from 2004-05 to 2006-07 (from 0.42 hospitalisations per 1000 people in 2004-05 to 0.35 hospitalisations per 1000 people in 2006-07. Hospitalisation rates for gonococcal infections, chlamydial infections and other sexually transmitted diseases all remained fairly constant over the period (table 7A.2.14).

Similar patterns are apparent for Queensland, WA, SA and public hospitals in the NT, from 2001-02 to 2006-07 — a decrease in hospitalisation rates for syphilis and fluctuations with no apparent trend for other diseases (table 7A.2.15).

Hospitalisations for injury and poisoning

Table 7.2.6 Age standardised hospitalisations of Indigenous people for injury and poisoning and other consequences of external causes, by sex, NSW, Victoria, Queensland, WA, SA, and the NT, July 2005 to June 2007^a

	Males		Females		Persons	
External cause	Rate per 1000 ^b	Rate ratio ^c	Rate per 1000 ^b	Rate ratio ^c	Rate per 1000 ^b	Rate ratio ^c
Assault (X85–Y09)	11.2	10.8	11.5	11.1	11.3	11.1
Falls (W00–W19)	9.9	9.4	9.1	8.6	9.6	9.3
Exposure to inanimate mechanical forces (W20–W49)	6.2	6.0	2.8	2.6	4.4	4.3
Complications of medical and surgical care (Y40–Y84)	7.1	6.6	6.8	6.5	6.9	6.7
Transport accidents (V01–V99)	5.1	4.9	2.4	2.2	3.7	3.6
Other accidental exposures	3.8	3.6	2.4	2.2	3.1	3.0
Intentional self-harm ((X60–X84)	2.6	2.4	2.9	2.8	2.8	2.6
Exposure to animate mechanical forces (W50–W64)	2.0	1.9	1.0	0.9	1.5	1.4
Exposure to electric current/smoke/fire/venomous animals and plants/forces of nature (W85–W99, X00–X39)	1.9	1.7	0.9	0.8	1.4	1.3
Accidental poisoning by and exposure to noxious substances (X40–X49)	0.8	0.7	0.9	0.8	0.9	0.8
Other external causes	0.7	0.6	0.6	0.5	0.6	0.6
Total	51.3	50.4	41.5	40.7	46.4	45.8

a External causes (ICD-10-AM codes V01–Y98) are based on the first external cause reported where the principal diagnosis was 'injury, poisoning and certain other consequences of external causes' (ICD-10-AM codes S00–T98). Data are based on State or Territory of usual residence. b Directly age standardised rate using the Australian 2001 standard population. c Ratio Indigenous rate divided non-Indigenous rate, where non-Indigenous includes people of unknown Indigenous status.

Source: AIHW National Hospital Morbidity Database (unpublished); table 7A.2.17.

From 2005 to 2007, in NSW, Victoria, Queensland, WA, SA and the NT:

- Indigenous people were 45.8 times more likely than non-Indigenous people to be hospitalised for injury and poisoning and other consequences of external causes (table 7.2.6)
- assaults and falls were the most common external causes of hospitalisations of Indigenous people. Indigenous people were 11.1 times more likely to be

hospitalised for assault and 9.3 times more likely to be hospitalised for falls than non-Indigenous people (table 7.2.6).

For Queensland, WA, SA and public hospitals in the NT, hospitalisation rates for injury and poisoning and other consequences of external causes increased between 1998-99 and 2006-07 (table 7A.2.18).

7.3 Avoidable mortality

Box 7.3.1 **Key messages**

- For the period 2002–2006 in Queensland, WA, SA and the NT combined:
 - Indigenous females were 3.8 times as likely as non-Indigenous females and Indigenous males were 4.5 times as likely as non-Indigenous males to die from avoidable causes (table 7.3.2)
 - Indigenous people were 4.6 times as likely to die from heart attack, 1.9 times as likely to time from cancer, 17.7 times as likely to die of diabetes, and 2.4 times as likely to die from suicide as non-Indigenous people (table 7.3.3).
- Mortality rates from avoidable causes declined for both Indigenous and non-Indigenous people, and the Indigenous gap decreased between 1998 and 2006 in Queensland, WA, SA and the NT combined (figure 7.3.1).

Avoidable mortality is an important indicator of Indigenous people's health. Reducing avoidable deaths is a key component of improving Indigenous life expectancy (section 4.1). Avoidable mortality sits alongside potentially preventable hospitalisations (section 7.2) as a measure of health outcomes. Avoidable mortality could potentially be improved with better use of health care. However, factors outside the health system also contribute to health and mortality — including socioeconomic factors (education, employment and income) described in parts of chapters 4, 6 and 11; lifestyle factors (substance use, obesity and nutrition — described in sections 7.4, 7.5, 10.3 and 10.4); environmental factors (sections 9.1, 9.2 and 9.3); functional communities (chapter 10) and interactions with the justice system (sections 4.11, 4.12, 10.5 and 10.6).

This section uses data from the Australian Institute of Health and Welfare (AIHW) National Mortality Database to examine avoidable mortality for Indigenous and non-Indigenous people. Avoidable causes of death used to define avoidable mortality in this section are from Page et al. (2006) who identified conditions causing death that were either preventable or treatable.

Avoidable mortality can be due to conditions that could be potentially prevented from occurring at all (such as conditions caused by substance misuse, injury and poisoning and obesity), and amenable conditions where death could be avoided with early diagnosis and effective treatment (such as various cancers) (AHMAC 2008).

Box 7.3.2 'Things that work' — reducing avoidable mortality

Heart attack survival rates have improved for Indigenous people in the NT. For Indigenous people in the NT incidence of acute myocardial infarction (AMI) (heart attack)

... was similar to the national rates in the early 1990s, but increased over subsequent years at a time when the national rate was falling, to be more than the national rate. The increase in incidence was offset by an improvement [in] AMI survival for [the] NT Indigenous population. This improvement was a result of both a reduction of pre-hospital mortality and improved hospitalised survival rates (death rates reduced by 56 per cent and 50 per cent respectively). The change in pre-hospital survival indicates a substantial improvement in the early management of patients, a combination of patients' response to their condition, initial primary health care management and access to hospital care. Tempering this positive outcome, there remains much room for further improvement, with NT Indigenous AMI cases having 44 per cent higher risk of death than non-Indigenous cases ... the combination of AMI data demonstrates that the increasing IHD [ischaemic heart disease] death rate among the NT Indigenous population was a result of increased incidence, which has been moderated by improvements in survival. (You et al. 2009, p.301)

Avoidable mortality data included in this section are for people aged 0–74 years. People aged 75 years and over often suffer chronic disease or multiple causes of ill health, which make it difficult to assign a cause of death that can be clearly defined as avoidable or unavoidable (Page et al. 2006).

Table 7.3.1 Avoidable mortality, age standardised, by State/Territory, people aged 0–74 years, 2002–2006^{a, b, c, d, e, f}

	Indigenous	Non-Indigenous	Ratio 9
	per 100 000	per 100 000	
Qld	567.3	168.1	3.4
WA	632.6	151.5	4.2
SA	599.6	168.5	3.6
NT	906.3	210.8	4.3
Qld, WA, SA & the NT	656.3	164.5	4.0

Data are reported for Queensland, WA, SA and the NT only. These four states/territories are considered to have adequate levels of Indigenous identification in mortality data.
Data are presented in five year groupings because of the small numbers each year.
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 mortality rate.
Deaths are by year of registration and State/Territory of usual residence.
The ABS calculated the completeness of identification of Indigenous deaths for the period 2002–2006 using population estimates of 51 per cent for Queensland, 72 per cent for WA, 62 per cent for SA and 90 per cent for the NT. The completeness of Indigenous identification for avoidable deaths may differ from the estimates for all causes.
Directly age-standardised using the 2001 Australian standard population.
Rate ratio Indigenous: non-Indigenous.

Source: AIHW (2009), Aboriginal and Torres Strait Islander Health Performance Framework: Detailed Analyses, Cat. no. IHW 22; table 7A.3.1.

• From 2002 to 2006 after adjusting for the different age structures of the populations, Indigenous people in each of Queensland, WA, SA and the NT had higher death rates from avoidable causes than non-Indigenous people (table 7.3.1).

Table 7.3.2 Avoidable mortality, by age and sex, people aged 0–74 years, Queensland, WA, SA and the NT, 2002–2006^{a, b, c, d}

	Males			Females			
	Deaths	per 100 000 <mark>e</mark>		Deaths	per 100 000 ^e		
Age (years)	Indigenous	Non- Indigenous	Rate ratio ^f	Indigenous	Non- Indigenous	Rate ratio ^f	
Less than 1	699.7	239.6	2.9	517.3	217.7	2.4	
1–4	34.1	15.7	2.2	38.2	10.9	3.5	
5–14	15.1	5.9	2.6	12.5	4.4	2.9	
15–24	150.7	55.8	2.7	68.7	19.8	3.5	
25–34	325.5	74.9	4.3	135.2	25.4	5.3	
35–44	606.5	98.5	6.2	330.3	51.1	6.5	
45–54	1066.6	196.9	5.4	616.5	116.1	5.3	
55–64	1891.1	476.0	4.0	1271.3	261.8	4.9	
65–74	3808.0	1313.8	2.9	2699.7	716.8	3.8	
Total ^{g, h}	812.1	214.1	3.8	519.1	115.0	4.5	

Data are reported for Queensland, WA, SA and the NT only. These four states/territories are considered to have adequate levels of Indigenous identification in mortality data. The completeness of identification of Indigenous deaths can vary by age.
Data are presented in five year groupings because of the small numbers each year.
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 mortality rate.
Deaths are by year of registration and State/Territory of usual residence.
Rates per 100 000 population. Total rates have been directly age-standardised using the 2001 Australian standard population.
Rate ratio Indigenous: non-Indigenous.
Directly age-standardised using the 2001 Australian standard population.
Directly age-standardised using the 2001 Australian standard population.

Source: AIHW (2009), Aboriginal and Torres Strait Islander Health Performance Framework: Detailed Analyses, Cat. no. IHW 22; table 7A.3.2.

In the period 2002–2006 in Queensland, WA, SA and the NT:

- Indigenous females were 4.5 times as likely and Indigenous males were 3.8 times as likely as non-Indigenous females and males to die from avoidable causes (table 7.3.2)
- Indigenous males and females of all ages had higher death rates from avoidable causes than non-Indigenous people (table 7.3.2)
- the ratio of Indigenous avoidable deaths over non-Indigenous deaths was greatest for people aged between 25 and 64 years, where the Indigenous avoidable mortality rate was between 4.0 and 6.5 times the non-Indigenous rate (table 7.3.2).

Table 7.3.3 Avoidable mortality, by cause of death, people aged 0–74 years, Queensland, WA, SA and the NT, 2002–06a, b, c, d, e, f

Cause of death	Indigenous	Non-Indigenous	Ratio 9
	per 100 000	per 100 000	
Ischaemic heart disease	149.7	32.7	4.6
Cancer	115.2	60.8	1.9
Lung cancer ^h	47.0	21.3	2.2
Diabetes	94.5	5.3	17.7
Suicide	26.3	11.1	2.4
Road traffic injuries	26.3	8.2	3.2
Alcohol-related disease	37.1	4.1	9.0
Selected invasive bacterial and protozoal infections	27.2	3.6	7.6
Cerebrovascular disease	36.5	9.8	3.7
Chronic obstructive pulmonary disease	39.2	8.0	4.9
Nephritis and nephrosis	27.0	1.6	16.4
Violence	9.0	0.9	10.0
Birth defects	5.9	2.7	2.2
Complications of perinatal period	4.2	1.4	3.1
Rheumatic and other valvular heart disease	10.7	0.5	22.7
Other avoidable ⁱ	47.6	13.6	3.5
Total avoidable	656.3	164.5	4.0

Data are reported for Queensland, WA, SA and the NT only. These four states/territories are considered to have adequate levels of Indigenous identification in mortality data. Data are presented in five year groupings because of the small numbers each year. 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 mortality rate. Deaths are by year of registration and State/Territory of usual residence. Different causes of death may have levels of completeness of identification that differ from the all-cause under-identification (coverage) estimates. Directly age-standardised using the 2001 Australian standard population. Rate ratio Indigenous: non-Indigenous. Data for lung cancer are a subset of data for all cancers presented in this table. Other avoidable includes: tuberculosis; hepatitis, HIV/AIDS, viral pneumonia and influenza, thyroid disorders, illicit drug disorders, epilepsy, hypertensive heart disease, aortic aneurism, obstructive uropathy and prostatic hyperplasia, deep vein thrombosis with pulmonary embolism, asthma, peptic ulcer disease, acute abdomen/appendicitis/intestinal obstruction/cholecystitis/lithiasis/pancreatitis/hernia, chronic liver disease, falls, fires/burns, accidental poisoning, drowning. For a full list of ICD10 codes see Page et al. (2006).

Source: AIHW (2009), Aboriginal and Torres Strait Islander Health Performance Framework: Detailed Analyses, Cat. no. IHW 22; table 7A.3.3.

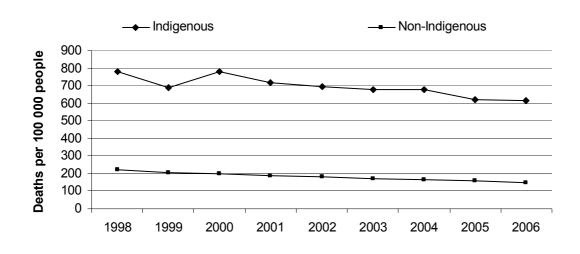
Chronic diseases and injury (including suicide) cause the greatest proportion of avoidable deaths for Indigenous people and are amenable to both prevention and treatment. The greatest reductions in excess deaths could be achieved by reducing deaths from chronic disease and injury.

In 2002 to 2006 in Queensland, WA, SA, and the NT:

• Indigenous people had higher death rates than non-Indigenous people for all of the avoidable causes listed in table 7.3.3

- Indigenous people were 4.6 times as likely to die from ischaemic heart disease (heart attack) than non-Indigenous people (table 7.3.3)
- Indigenous people were 1.9 times as likely to die from cancer than non-Indigenous people (table 7.3.3).
- Indigenous people were 17.7 times as likely to die of diabetes than non-Indigenous people (table 7.3.3)
- Indigenous people were 2.4 times as likely to die from suicide than non-Indigenous people (table 7.3.3).

Figure 7.3.1 Age-standardised avoidable mortality rates, people aged 0-74 years, Queensland, WA, SA and the NT



 $^{^{\}mathbf{a}}$ Rates have been directly age-standardised using the 2001 Australian standard population. $^{\mathbf{b}}$ Rates exclude deaths of people for whom Indigenous status was not stated.

Source: AIHW (2009), Aboriginal and Torres Strait Islander Health Performance Framework: Detailed Analyses, Cat. no. IHW 22; table 7A.3.4.

Between 1998 and 2006, in Queensland, WA, SA and the NT combined:

- mortality rates from avoidable causes declined for both Indigenous and non-Indigenous people (figure 7.3.1)
- The gap between Indigenous and non-Indigenous death rates from avoidable causes decreased from 557.1 per 100 000 in 1998 to 465.6 per 100 000 in 2006 (figure 7.3.1).

7.4 Tobacco consumption and harm

Box 7.4.1 **Key messages**

- In 2004-05, half of Indigenous Australians aged 18 years and over reported that they were current smokers (table 7A.4.10). This figure had not changed significantly since 1995 (table 7A.4.7). It remains twice that of the non-Indigenous population (figure 7.4.1).
- Hospitalisation rates related to tobacco use were consistently higher for Indigenous people than for non-Indigenous people in 2006-07 (table 7.4.1).

Studies have found that smoking tobacco increases the risk of numerous cancers, vascular diseases, and depression (AHMAC 2006, Cunningham et al. 2008; Pasco et al. 2008). Among Indigenous people, tobacco use is the leading risk factor contributing to disease and death (Vos et al. 2007). This section examines patterns of tobacco use and its related harm, including hospitalisations and deaths related to tobacco use. A 2001 review highlighted the problem of tobacco use among Aboriginal and Torres Strait Islander people and identified a lack of evidence on the effectiveness of tobacco control initiatives in Indigenous communities (Ivers 2001, 2003). In 2008, a National Indigenous Tobacco Control Research Roundtable was held. A roundtable report was published which identified research questions and approaches to guide assessment of priorities (CEITC 2008). Programs that have been effective in reducing tobacco use among Indigenous people are discussed in box 7.4.2.

Tobacco use is often associated with other lifestyle related health risk factors, such as excessive alcohol drinking and poor diet. ABS (2006) found that long term risky/high risk drinkers (both males and females) were more likely to be current smokers than those who drank at a low risk level. The effects of alcohol are often worsened by other risk factors, such as smoking and poor diet (NHMRC 2001). See section 10.3 for alcohol consumption and harm.

According to WHO (2004), tobacco and poverty are inextricably linked world wide. Higher incomes and less disadvantage in a range of other areas are associated with being a non-smoker (Thomas et al. 2008).

In addition to the long term health risks, low income groups (such as Indigenous families and communities) are also affected by the financial strain of tobacco use. Expenditure on tobacco can divert scarce family resources away from other needs, such as housing, nutrition and health care (Briggs, Lindorff and Ivers 2003).

Recently published data from the AIHW 2007 National Drug Strategy Household Survey (NDSHS) suggest that, in 2007, Indigenous people were more likely than non-Indigenous people to smoke (34.1 per cent compared with 19.0 per cent) (AIHW 2008; table 7A.4.1). The NDSHS provides comparable data from 2001–2007 on a person's smoking status (never smoked, ex-smoker, smoker) and the average number of cigarettes smoked per week by current smokers (table 7A.4.1). Care should be taken in interpreting these data due to the small size of the Indigenous sample (fewer than 500 respondents) in the NDSHS.

Box 7.4.2 'Things that work' — reducing tobacco use

The Maningrida (NT) 'Smoke-busters' campaign involved the establishment of an Aboriginal steering group of non-smoking community elders and the appointment of a community-based public health officer. The public health officer was responsible for training a non-smoking community-based tobacco support worker and reorienting tobacco cessation services to improve access and support clients through tailored counselling and nicotine replacement therapy (Burgess et al. 2008).

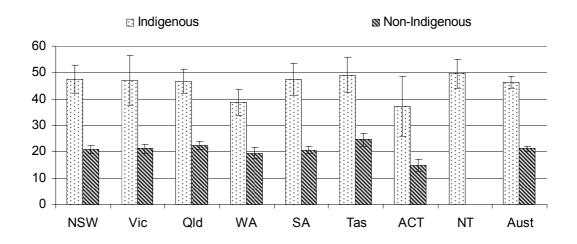
The Menzies School of Health Research evaluated the program and found:

- tobacco consumption declined by 8 per cent over a six-month period
- community awareness increased on issues such as the dangers of tobacco, second hand smoke, strategies to stop smoking, and non-smokers rights (particularly the benefits of not smoking near children)
- children were more aware of their right to a smoke-free environment (Burgess et al. 2008).

Tobacco consumption

Rates of current daily smokers is a performance measure in the National Indigenous Reform Agreement (COAG 2009). The ABS 2004-05 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS) and the 2004-05 National Health Survey (NHS) collected data on current daily adult smokers. Current daily smokers are people who smoked one or more cigarettes (or pipes or cigars) per day at the time of interview.

Figure 7.4.1 Current daily smokers aged 18 years or over, age standardised, 2004-05^{a, b, c}



^a This refers to smoking of tobacco, including manufactured (packet) cigarettes, roll-your-own cigarettes, cigars and pipes, but excludes chewing tobacco and smoking of non-tobacco products. Current daily smokers refers to people who smoked one or more cigarettes (or pipes or cigars) per day at the time of interview. ^b The sample size in the NT was considered too small to produce reliable non-Indigenous estimates for the NT in the ABS 2004-05 NHS, but NT records in the survey have been attributed appropriately to national estimates. ^c Error bars represent 95 per cent confidence intervals around each estimate (see chapter 2 for more information).

Source: ABS 2004-05 NATSIHS and NHS (unpublished); table 7A.4.8.

After adjusting for age, in 2004-05:

- Indigenous adults were more than twice as likely as non-Indigenous adults to be current daily smokers (46.3 per cent compared to 21.1 per cent) (figure 7.4.1 and table 7A.4.5).
- Across all states and territories, and remoteness areas, rates of current daily smokers were higher for Indigenous people than non-Indigenous people (figure 7.4.1; table 7A.4.5).
- Non-age-standardised data show that, in 2004-05, half of Indigenous adults smoked daily (table 7A.4.10) and the prevalence of smoking in Indigenous adults was high across all age groups (although lower after 55 years of age) (table 7A.4.9).
- There has been no apparent decline in smoking among Indigenous adults from 1995 to 2004-05 (tables 7A.4.6-7).

The 2008 National Aboriginal and Torres Strait Islander Social Survey (NATSISS) will provide information on current daily adult smokers. The NATSISS results are expected to be available from late 2009.

Tobacco related hospitalisations and deaths

Tobacco smoking is the primary cause of premature and preventable death and disease for all people in Australia. There is a strong causal relationship between tobacco consumption and multiple chronic diseases, including coronary heart disease, stroke and chronic respiratory tract diseases. Smoking in pregnancy can lead to miscarriage, stillbirth or premature birth (Graham et al. 2007). See section 5.1 for rates on mothers reporting smoking during pregnancy.

Data on hospitalisations related to tobacco use reported for this indicator are sourced from the AIHW National Hospital Morbidity Database. These data only cover tobacco related illnesses resulting in admission to a hospital. Further, data are only available for conditions directly attributable to tobacco and do not include most conditions where tobacco may be a contributing factor but where the link is not direct and immediate.

The availability of hospitalisation data for Indigenous people has significantly improved in the 2009 report compared with the 2007 report. AIHW analysis of the quality of Indigenous identification in hospital statistics has shown that the quality of data from NSW and Victoria has improved and data are now available for NSW, Victoria, Queensland, WA, SA and the NT. Nevertheless, Indigenous identification in hospitalisation data remains incomplete in most jurisdictions. The AIHW (2005) found that the quality of Indigenous hospitalisation data varied between jurisdictions and hospitals. Tasmania and the ACT are working with the AIHW to improve the quality of their Indigenous hospitalisation data.

Most hospitalisation data used in this section are for six jurisdictions: NSW, Victoria, Queensland, WA, SA, and the NT. These data have sufficient levels of Indigenous identification for 2004-05 to 2006-07. Longer time series data for Queensland, WA, SA and the NT from 2001-02 to 2006-07 are included in attachment table 7A.4.2. Hospitalisation data for these four jurisdictions should not be assumed to represent the hospitalisation experience in the other jurisdictions.

Non-Indigenous data from the AIHW include hospitalisations of people with a 'not stated' Indigenous status as well as those identified as non-Indigenous.

Table 7.4.1 Age standardised hospitalisations related to tobacco use in NSW, Victoria, Queensland, WA, SA and public hospitals in the NT, 2006-07 (per 1000 population)^{a, b, c, d, e}

	Males		Females		People	
	Indigenous	Non- Indigenous	Indigenous	Non- Indigenous	Indigenous	Non- Indigenous
NSW	4.3	1.4	4.2	0.8	4.2	1.1
Victoria	1.4	1.2	6.8	0.7	4.1	0.9
Queensland	2.1	0.7	1.1	0.4	1.6	0.5
WA	2.8	1.3	2.7	0.7	2.7	1.0
SA	4.0	1.1	7.6	1.7	5.7	1.4
NT (public hospitals only)	8.2	5.7	4.6	1.1	6.2	3.3
Total	3.7	1.2	3.5	0.8	3.6	1.0

^a The hospital separation rates (per 1000 population) were directly age standardised to the Australian population as at 30 June 2001. ^b A hospitalisation is the discharge, transfer, death or change of episode of care of an admitted patient (see glossary for a detailed definition). ^c Principal diagnoses of hospitalisations are based on codes of the International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification (ICD-10-AM). ^d Non-Indigenous data include separations where Indigenous status was not reported. ^e Data are based on state of usual residence.

Source: AIHW National Hospital Morbidity Database (unpublished); table 7A.4.3.

In 2006-07, for NSW, Victoria, Queensland, WA, SA and public hospitals in the NT:

- the rate of hospitalisations related to tobacco use for Indigenous people was almost 4 times as high as that for non-Indigenous people (3.6 per 1000 for Indigenous people compared with 1.0 per 1000 for non-Indigenous people) (table 7.4.1)
- the hospitalisation rate for Indigenous males was three times as high as for non-Indigenous males (3.7 per 1000 for Indigenous males compared with 1.2 per 1000 for non-Indigenous males); and Indigenous females had a rate more than four times as high as non-Indigenous females (3.5 per 1000 for Indigenous females compared with 0.8 per 1000 for non-Indigenous females)
- over the period 2004-05 to 2006-07, hospitalisation rates related to tobacco use for both Indigenous and non-Indigenous people remained stable (table 7A.4.3).

Between the 1970s and 1990s, in the NT, Indigenous mortality for lung and other smoking-related cancers more than doubled (Cunningham et al. 2008). No comparable Indigenous and non-Indigenous data on smoking related deaths are available for inclusion in this report.

7.5 Obesity and nutrition

Box 7.5.1 **Key messages**

- In non-remote areas in 2004-05, 30.9 per cent of Indigenous adults were obese and, after adjusting for differences in the age structure of the two populations, Indigenous adults were twice as likely to be obese as non-Indigenous adults (table 7.5.2).
- In non-remote areas in 2004-05, after adjusting for age, similar proportions of Indigenous and non-Indigenous people aged 12 years and over were eating the recommended usual daily intake of vegetables; 45 per cent of Indigenous people were eating the recommended usual daily intake of fruit compared with 54 per cent of non-Indigenous people, and 71 per cent of Indigenous people usually consumed whole milk compared with 45 per cent of non-Indigenous people (figure 7.5.1).

Obesity and nutrition is a new indicator in the revised indicator framework endorsed by COAG for the 2009 report. Addressing issues of obesity (and nutrition) can contribute to the achievement of COAG's life expectancy target. The National Indigenous Reform Agreement (COAG 2009) includes obesity — body mass index as an indicator. This section includes data on body mass index (BMI) and dietary behaviours.

Public health nutrition is designated a national health priority area for Australia, and Indigenous nutrition is the subject of a national strategy and action plan, the *National Aboriginal and Torres Strait Islander Nutrition Strategy and Action Plan* 2000–2010⁵ (National Aboriginal and Torres Strait Islander Nutrition Working Party 2001).

Among Indigenous people, high body mass is the second leading risk factor contributing to disease and death (Vos et al. 2007). Body fat distribution for Indigenous people is significantly different to that for non-Indigenous people. Indigenous people have a naturally lighter build than non-Indigenous people (O'Dea 2008). Having a lighter build means Indigenous people have a tendency for central obesity and a greater concentration of fat around their stomach means an increased risk of developing certain chronic diseases such as type 2 diabetes and heart disease (O'Dea 2008; Piers et al. 2003). See section 4.8 for rates of disability and chronic disease.

O'Dea (2008) found that a traditional Indigenous lifestyle can protect against obesity and chronic diseases. A 1982 study involving Indigenous people returning

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⁵ Approved by the Australian Health Ministers Conference August 2001.

to traditional country showed that after just seven weeks there were improvements in risk factors for type 2 diabetes and cardiovascular disease (O'Dea 1984). See section 10.2 for more information on access to traditional lands.

Regular exercise and an intake of fibre-rich foods, such as fruit and vegetables, can have a protective effect against obesity related diseases (AMA 2005; NHMRC 2003a). Section 10.1 provides more information on participation in organised sport, arts or community group activities. Good nutrition is important during pregnancy (see section 5.1, Maternal health) because pathways to chronic diseases can begin in utero (O'Dea 2008; WHO 2005). Low birthweight (see section 5.3) is associated with a higher risk of central obesity, type 2 diabetes, kidney failure, high blood pressure, and heart disease in later life. Good nutrition is also important for infant and childhood growth and development and for establishing healthy habits for life (ARACY 2008; Tomkins 2001; WHO 2008).

Studies have found links between obesity and factors such as poverty and diet (WHO 2008; Harrison et al. 2007). (Section 4.9 provides more information on individual incomes.) Poverty is a key driver of food choice within remote Aboriginal communities, where the cost of fresh food is typically high. The 2006 Queensland Healthy Food Access Basket (HFAB) survey found that extra expenditure was needed to purchase basic healthy food by families living in outer regional, remote and very remote areas compared to those living in major cities and inner regional centres (Queensland Health 2006). In 2006, in Queensland, the price of fruit, vegetables and legumes was 20.6 per cent higher in very remote locations than in major cities (Queensland Health 2006).

Box 7.5.2 provides an example of a program that has improved nutrition and health outcomes for Indigenous people.

Box 7.5.2 'Things that work' — improving nutrition

The **Outback Stores** model in remote and very remote communities has improved food availability and food security in the communities, enhanced health outcomes, increased awareness of healthy food, provided employment, and supported the long term sustainability of the community store as a business enterprise.

For people living in remote communities and outstations, the local store is often the only source for food and other basic commodities. A study on community stores by the Desert Knowledge Cooperative Research Centre found that the Outback Stores model operates successfully in remote and very remote communities. In the three communities included in the study, respondents indicated that the availability and quality of fresh foods increased since Outback Stores managed the community stores. Prices were also reported to have fallen for fresh food products. In one community, the health worker commented that children were healthier and that the incidence of a nutrition-related disease in children had decreased in the past year (Ferguson, Rola-Rubzen and McGregor 2009).

Obesity

Obesity is most commonly measured using the body mass index (BMI). The BMI is calculated using the formula weight (kg) divided by the square of height (m). BMI values are grouped according to World Health Organization and National Health and Medical Research Council (NHMRC) guidelines (WHO 2000; NHMRC 2003a). Among adults, a person with a BMI of 25 to less than 30 is considered overweight, while a BMI of 30 or more is considered obese (table 7.5.1).

Table 7.5.1 Body mass index categories for adults in Australia

Category	BMI range (kg/m2)
Underweight	Less than 18.5
Normal range	20.0 to less than 25.0
Overweight	25.0 to less than 30.0
Obese	30.0 and greater

Source: WHO (2000); NHMRC (2003a).

The ABS 2004-05 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS) collected self-reported height and weight information from Indigenous people and, using the BMI formula, grouped them into BMI ranges as defined in table 7.5.1.

Table 7.5.2 Body mass index groups for people aged 18 years and over, by age, non-remote areas, 2004-05 (per cent)^a

	-					ν-	•
	18–24	25–34	35–44	45–54	55+	Total non-age- standardised	Total age standardised ^b
Indigenous							
Underweight	7.4	3.9	4.1 ^C	3.2* d	2.3	4.4	3.8*
Normal range	49.4*	37.6 [*]	31.0*	28.0*	24.1*	35.5	32.1*
Overweight	25.1	29.4*	28.1*	32.1*	34.2*	29.2	30.5*
Obese	18.0 [*]	29.1*	36.8*	36.7*	39.4 [*]	30.9	33.6 [*]
Non-Indigenou	s						
Underweight	6.5	2.7	2.0	1.2*	2.2	2.6	2.6*
Normal range	61.9 [*]	47.9 [*]	41.6 [*]	38.1*	39.0*	43.9	44.0*
Overweight	24.0	33.7*	36.8*	38.2*	39.1*	35.5	35.5 [*]
Obese	7.5	15.7 [*]	19.6 [*]	22.5*	19.8*	17.9	17.9 [*]
Rate ratio ^c							
Underweight/							
Normal range	0.8	8.0	8.0	8.0	0.6		0.8
Overweight/							
Obese	1.4	1.2	1.2	1.1	1.2		1.2

^{*} Represents results with statistically significant difference in Indigenous and non-Indigenous comparisons.

Source: ABS 2004-05 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS) and National Health Survey (NHS) cited in AIHW (2009); table 7A.5.1.

- In non-remote areas in 2004-05, 30.9 per cent of Indigenous adults were obese and after adjusting for age:
 - Indigenous adults were 1.2 times as likely as non-Indigenous adults to be overweight/obese
 - 33.6 per cent of Indigenous adults had a BMI greater than 30 (which is considered obese) compared with 17.9 per cent of non-Indigenous adults, and the overall proportion of Indigenous adults who were overweight or obese was 64.1 per cent compared with 53.4 per cent of non-Indigenous adults
 - around one third (32.1 per cent) of Indigenous adults were in the normal BMI range compared with 44.0 per cent of non-Indigenous adults (table 7.5.2).
- In 2004-05, overweight and obese Indigenous men and women had higher rates of smoking and short-term risky/high risk alcohol consumption than overweight and obese non-Indigenous men and women (ABS 2008). Section 7.4 provides more information on tobacco consumption and harm and section 10.3 provides more information on alcohol consumption and harm.

^a Proportions exclude those for whom BMI was unknown (39 583 or 15 per cent for Indigenous and 1 175 132 or 8 per cent for non-Indigenous).
^b Directly age standardised proportions using the 2001 Australian population.
^c The rate ratio is calculated by dividing the Indigenous rate by the non-Indigenous rate.
^d Estimate has a relative standard error of between 25 per cent and 50 per cent and should be used with caution.
... Not applicable.

- Generally, for both Indigenous and non-Indigenous adults, obesity levels increased with age (table 7A.5.1).
- Between 2001 and 2004-05, the proportion of Indigenous adults who were overweight or obese did not change significantly (59 per cent in 2001 and 60 per cent in 2004-05) (AIHW 2009).
- There are no current data on the prevalence of obesity among Indigenous children.

Nutrition

The NHMRC's Australian dietary guidelines recommend eating a wide variety of nutritious food and drinking plenty of water. This means eating plenty of vegetables, legumes and fruits, cereals, lean meat, fish, poultry, milks, yoghurts, cheeses (reduced-fat varieties should be chosen, where possible) (NHMRC 2003a). The guidelines also recommend limiting consumption of saturated fat, salt, alcohol and sugars (NHMRC 2003a).

Insufficient fruit and vegetable consumption contributed to 3.5 per cent of the total burden of disease in Indigenous people in 2003 (Vos et al. 2007). Poor nutrition increases the risk of obesity-linked diseases such as cancer, diabetes and heart attack, and compromises children's development (AHMAC 2008; Tomkins 2001).

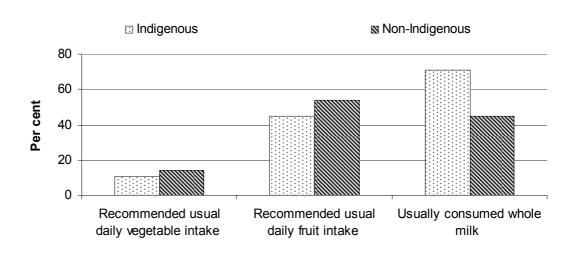
For adults, the NHMRC's Australian dietary guidelines recommend a minimum of five serves of vegetables and two serves of fruit per day (NHMRC 2003a). For children, the daily food consumption guidelines for fruit and vegetable intake recommend one serve of fruit and two serves of vegetables for children aged 4–7 years, one serve of fruit and three serves of vegetables for children aged 8–11 years and three serves of fruit and three serves of vegetables for adolescents aged 12–18 years (NHMRC 2003b).

The Western Australian Aboriginal Child Health Survey, conducted in 2000-01, found that an estimated 70 per cent of Aboriginal children were reported to usually eat fresh fruit every day, but that most Aboriginal children were not even approaching the recommended vegetable intake, and for the majority this was not because fresh vegetables were unavailable (Zubrick et al. 2004). In 2004-05, in non-remote, areas 24 per cent of Indigenous children aged 12–14 years met the recommended daily fruit intake and 59 per cent met the recommended daily vegetable intake (ABS and AIHW 2008). Twenty per cent of Indigenous children aged 15–17 years met the daily recommended fruit intake and 61 per cent met the recommended daily vegetable intake (ABS and AIHW 2008). There was no statistically significant difference in the proportion of Indigenous and

non-Indigenous children who met the daily fruit and vegetable consumption guidelines (ABS and AIHW 2008).

Survey data provide information on consumption of recommended daily vegetable and fruit intake and whole milk consumption, but data for Indigenous and non-Indigenous people are for non-remote areas only. Dietary behaviours by remoteness for Indigenous people can be found in table 7A.5.5, but are not disaggregated by recommended usual daily intake of vegetables and fruit.

Figure 7.5.1 Dietary behaviours for people aged 12 years and over, non-remote areas, age-standardised, 2004-05^{a, b}



^a The National Health and Medical Research Council's (NHMRC) Australian dietary guidelines recommend a minimum of five serves of vegetables and two serves of fruit per day (NHMRC 2003a). ^b The NHMRC's Australian dietary guidelines for adults has been applied to adolescents aged 12–18 years. For adults, the NHMRC's Australian dietary guidelines recommend a minimum of five serves of vegetables and two serves of fruit per day (NHMRC 2003a). For adolescents aged 12–18 years, the daily food consumption guidelines for fruit and vegetable intake recommend three serves of fruit and three serves of vegetables (NHMRC 2003b).

Source: ABS 2004-05 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS) and ABS 2004-05 National Health Survey (NHS) cited in AIHW (2009); table 7A.5.2.

- After adjusting for age, in 2004-05, in non-remote areas:
 - similar proportions of Indigenous and non-Indigenous people were eating the recommended usual daily intake of vegetables
 - 45 per cent of Indigenous people were eating the recommended usual daily intake of fruit compared with 54 per cent of non-Indigenous people
 - 71 per cent of Indigenous people usually consumed whole milk compared with 45 per cent of non-Indigenous people (figure 7.5.2).
- Between 2001 and 2004-05, the dietary behaviours of Indigenous people did not change significantly (table 7A.5.3).

More data by age groups can be found in attachment table 7A.5.2. The 2008 ABS National Aboriginal and Torres Strait Islander Social Survey (NATSISS) will provide information on child nutrition. The NATSISS results are expected to be available from late 2009.

- The cost of fresh food can be high in remote areas, which may make fruit and vegetables less accessible to Indigenous people. In remote areas, in 2004-05:
 - 15 per cent of Indigenous people had no daily vegetable intake compared with 2 per cent of Indigenous people in non-remote areas
 - 20 per cent of Indigenous people had no daily fruit intake compared with 12 per cent in non-remote areas (table 7A.5.5).

7.6 Tooth decay

Box 7.6.1 **Key messages**

- The proportion of adults with untreated tooth decay was significantly higher for Indigenous than for non-Indigenous people across all age groups for 2004–2006 (figure 7.6.5).
- Potentially preventable hospitalisations for dental conditions were higher for Indigenous people than non-Indigenous people from 2004-05 to 2006-07 (figure 7.6.6).

Healthy teeth are an important part not only of oral health, but of overall health and wellbeing. The prevention and early treatment of tooth decay is central to the maintenance of healthy teeth. Unless treated early, tooth decay may result in pain, infection and destruction of soft tissue in the mouth. This may contribute to the development or exacerbation of other diseases. In addition, eating difficulty or pain may lead to modification of eating habits and subsequent nutritional problems. Poor dental health can affect speech and language development, as well as school attendance and performance, self-esteem, employment and social wellbeing (NACOH 2004).

Indigenous children generally have more decay than non-Indigenous children, and that decay is less likely to have been treated (AHMAC 2008). The prevalence of untreated tooth decay is also significantly higher among Indigenous adults than among non-Indigenous adults (AIHW 2009; Roberts-Thomson and Do 2007). The need to improve access to appropriate and affordable dental health services among Indigenous people is reflected in one of seven specific action areas in *Healthy Mouths Healthy Lives: Australia's National Oral Health Plan 2004–2013*

(NACOH 2004). The plan emphasises the need for services that are culturally appropriate and accessible, in order to address inequities in oral health.

Factors in the prevention of tooth decay include diet, dental hygiene and environmental factors, such as water fluoride levels. Access to dental services is also a factor in prevention, as well as in the treatment of tooth decay (AHMAC 2008).

Historically, traditional diets of Indigenous people were associated with low levels of tooth decay. A marked rise in the consumption of food and drinks containing high levels of sugar and other refined carbohydrates over recent decades — particularly in remote communities and among children — has occurred at the same time as an increase in levels of tooth decay among Indigenous people (Jamieson, Armfield and Roberts-Thomson 2007; NACOH 2004).

Preventative oral health behaviours such as tooth brushing and flossing are developed mainly through education and modelling by adults in the home environment, and/or education outside the home (for example, in schools) (Jamieson, Armfield and Roberts-Thomson 2007). Among Indigenous children, levels of preventative oral health behaviours are relatively low. A survey of children in remote Indigenous communities found that fewer than 20 per cent brushed their teeth (Jamieson, Armfield and Roberts-Thomson 2007). Of children aged five years or under, fewer than five per cent brushed their teeth.

Regular dental check-ups are an important element in both prevention and early treatment of tooth decay. A national survey of adult oral health conducted between 2004 and 2006 found that Indigenous adults were less likely than non-Indigenous adults to have visited a dentist in the last five years (Spencer and Harford 2007). Cost, geographic and cultural barriers to accessing dental services are experienced by Indigenous Australians. For example, the national survey found that Indigenous adults were 1.6 times more likely to have foregone recommended dental treatment due to cost than non-Indigenous adults (Spencer and Harford 2007).

Box 7.6.2 'Things that work' — Dental care services

The Wuchopperen Health Service provides care to approximately 20 000 Aboriginal and Torres Strait Islander people in and around Cairns (far north Queensland). In response to a severe, long-term shortage of dentists and waiting lists of more than a year for basic dental care prior to 2005, the 'Filling the Gap' Indigenous Dental Program was developed. The privately funded program supplies volunteer dental health professionals from around Australia to Wuchopperen's Oral Health Care

(Continued next page)

Box 7.6.2 (continued)

Unit, and operates as a partnership between Wuchopperen, the community it serves, the 'Filling the Gap' Steering Committee, and dental volunteers. It commenced operation in January 2006.

The program, evaluated by the University of NSW's Muru Marri Indigenous Health Unit for the period January 2006 to November 2007, was found to greatly improve access to services:

- 24 weeks of service were provided by 20 volunteer dentists in 2006
- 55 weeks of service were provided by 40 volunteer dentists in 2007, in addition to 15 weeks provided by other dental health professionals and dental students
- services were provided to 1088 patients, including 133 new patients, in 2006
- services were provided to 1485 patients, including 163 new patients, in 2007
- community members were confident to use the service and accepted the turnover of dental volunteers, in part because:
 - the dental unit is part of the community's own health service
 - the long-term Indigenous Practice Manager and Dental Assistants provide continuity and support culturally appropriate, effective communication between volunteers and patients
 - the program was able to recruit highly skilled dental volunteers because it provided professional and personal satisfaction as well as a car and accommodation making it an attractive working holiday (Jackson Pulver et al. 2009).

The SA Dental Service Aboriginal Liaison Program was established in late 2005 to improve oral health outcomes for Aboriginal and Torres Strait Islander people through improving access to dental care. Five Aboriginal Liaison Officers are working with local Aboriginal Health Services and Aboriginal communities to develop sustainable pathways for referring clients to dental services and to increase knowledge about oral health care. One of the barriers to care identified was the two-year waiting list for general dental care at community dental clinics. Aboriginal people attending diabetes camps in the Northern Adelaide suburbs during 2007-08 received an oral health assessment. Of the 142 Aboriginal people who received an oral health assessment 133 were identified as needing a dental visit. Of those people, 96 began a course of care in 2008 (SA government unpublished).

The **Great Southern Aboriginal Health** — **Dental Health Program** in WA was developed to improve the dental health of children and the access to dental services of 0–4 year olds. The program comprises tooth brushing programs in the Noongar pre-schools and playgroups in the towns of Albany, Mount Barker, Tambellup, Gnowangerup, Katanning and Kojonup (which has reached 62 per cent of Aboriginal children aged 3–5 years); dental health checks and treatment for 0–4 year olds; which

(Continued next page)

Box 7.6.2 (continued)

enables community initiatives to improve oral health by improving diet and personal dental care; and cultural awareness programs for dentists and dental students.

The success of the program is underpinned by its response to needs identified by the community, the collaboration between key support groups, and the willingness of the local dentist to bulk bill or charge a minimal fee (WA unpublished 2008).

Data are presented for Indigenous children and adults. Children's data are from the Child Dental Health Survey, conducted by State and Territory School Dental Services. Statistically reliable Indigenous data were available for NSW, SA and the NT only (Jamieson, Armfield and Roberts-Thomson 2007).

National adult data are from the National Survey of Adult Oral Health, conducted between 2004 and 2006.

Indigenous children's dental health in NSW, SA and the NT

Data are reported for tooth decay among Indigenous and non-Indigenous children in metropolitan and rural/remote areas of NSW, SA and the NT combined. The most recent data available are from the Child Dental Health Survey (CDHS) and are for the calendar years 2000 (NSW), 2003 (SA) and 2002 (NT).⁶ Of the 326 099 children examined, 10 743 (3.2 per cent) were Indigenous (Jamieson, Armfield and Roberts-Thomson 2007).

CDHS data are available only for children who are both enrolled in, and attend, the School Dental Service (SDS) (Jamieson, Armfield and Roberts-Thomson 2007). Dental health attitudes and school attendance affect SDS enrolment and attendance. Eligibility criteria, such as age, may vary across jurisdictions (AIHW 2008).

Three measures of tooth decay in children by Indigenous status and geographical location are reported:

- mean number of teeth affected by decay
- proportion of children with no tooth decay
- mean proportion of decayed teeth that are untreated.

The mean (average) number of teeth affected by decay reflects how effectively tooth decay is prevented (figure 7.6.1).

HEALTHY LIVES

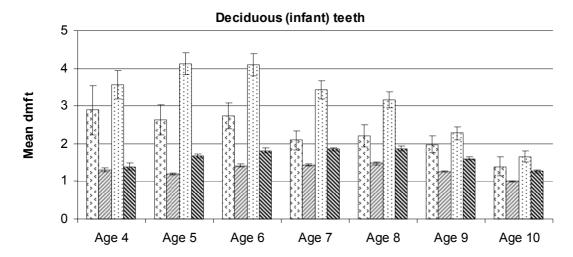
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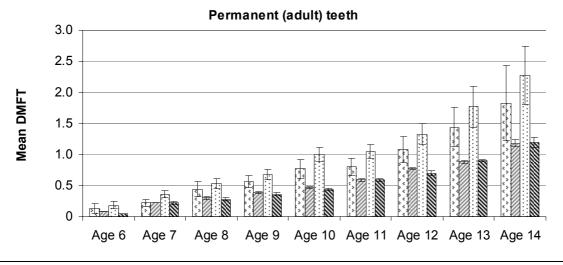
⁶ Additional data for SA and the NT were reported in the 2007 report, and are provided in tables 7A.6.7–7A6.11.

Figure 7.6.1 Mean number of teeth affected by decay, by age and location, NSW, SA and the NT, selected years between 2000 and 2003^{a, b, c}



□ Rural/remote Indigenous





a Geographical locations are based on the Rural, Remote and Metropolitan Areas (RRMA) classification. Data for rural and remote areas have been combined.
 b dmft=d+m+f and refers to deciduous (infant) teeth, where: d=number of untreated decayed teeth; m=number of missing teeth; f=number of filled teeth. Uppercase letters denote permanent (adult) teeth.
 c Error bars represent 95 per cent confidence intervals around each estimate and are computed by multiplying the standard error by 1.96 (see chapter 2 for more information).

Source: Jamieson, Armfield and Roberts-Thomson (2006); tables 7A.6.1 and 7A.6.2.

Between 2000 and 2003 in NSW, SA and the NT:

• the mean number of decay-affected deciduous (infant) teeth was significantly higher for Indigenous children than for non-Indigenous children across all ages (from 4 to 10 years) and in both metropolitan and rural/remote areas — in some age groups, more than twice as high (figure 7.6.1)

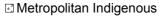
- levels of deciduous tooth decay were higher in rural/remote than in metropolitan areas for Indigenous children
- levels of deciduous tooth decay were higher for Indigenous children in metropolitan areas than for non-Indigenous children in both metropolitan and rural/remote areas (figure 7.6.1)
- the mean number of decay-affected permanent (adult) teeth was significantly higher for Indigenous children than for non-Indigenous children across all ages (from 6 to 14 years) in rural/remote areas, and across most ages in metropolitan areas (figure 7.6.1).

The proportion of children with teeth free of decay is a measure of how effectively tooth decay is prevented (figure 7.6.2).

Between 2000 and 2003:

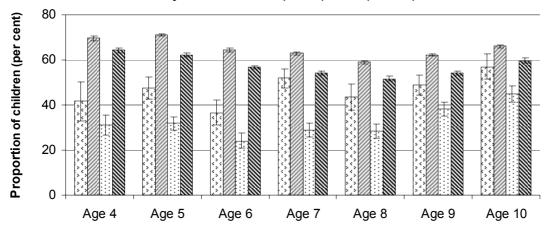
- the proportion of children with decay-free deciduous (infant) teeth was lower for Indigenous children than for non-Indigenous children, across all age groups (from 4 to 10 years) and in both metropolitan and rural/remote areas (figure 7.6.2)
- the proportion of children with decay-free permanent (adult) teeth was lower for Indigenous children than for non-Indigenous children across all age groups (from 6–14 years) in rural/remote areas (figure 7.6.2)
- the proportion of children with decay-free permanent (adult) teeth was lower for Indigenous children than for non-Indigenous children in metropolitan areas for children aged 8–14 years (figure 7.6.2).

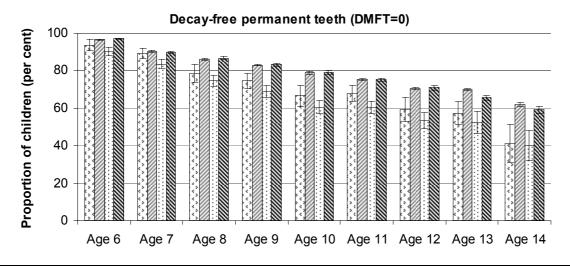
Figure 7.6.2 Children with decay-free teeth by location and age, NSW, SA and the NT, selected years between 2000 and 2003^{a, b, c}



□ Rural/remote Indigenous

Decay-free deciduous (infant) teeth (dmft=0)



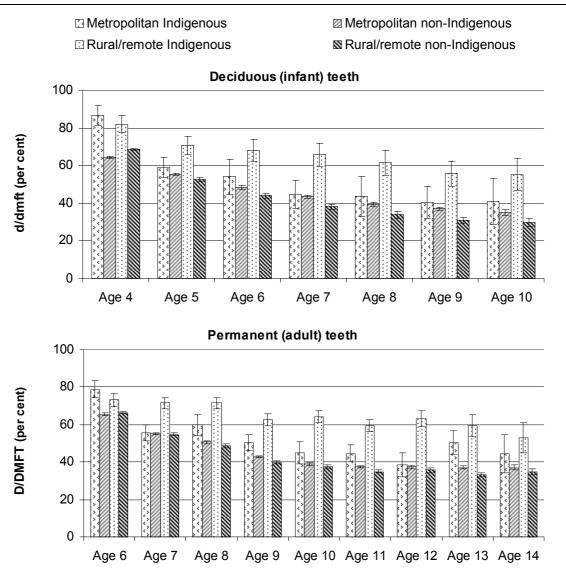


a Geographical locations are based on the Rural, Remote and Metropolitan Areas (RRMA) classification. Data for rural and remote areas have been combined.
 b dmft=d+m+f and refers to deciduous (infant) teeth, where: d=number of untreated decayed teeth; m=number of missing teeth; f=number of filled teeth. Uppercase letters denote permanent (adult) teeth.
 c Error bars represent 95 per cent confidence intervals around each estimate and are computed by multiplying the standard error by 1.96 (see chapter 2 for more information).

Source: Jamieson, Armfield and Roberts-Thomson (2006); tables 7A.6.1 and 7A.6.2.

The proportion of decay-affected teeth that are untreated provides a measure of unmet need for dental services. Where more decay-affected teeth have been treated (extracted or filled), treatment services may be more accessible. Where the proportion of decayed teeth that are untreated is high, access to services may be more difficult. Figure 7.8.3 contains data are presented for Indigenous and non-Indigenous children in metropolitan and rural/remote areas (figure 7.6.3).

Figure 7.6.3 Proportion of untreated decay-affected teeth, NSW, SA and the NT, selected years between 2000 and 2003^{a, b, c, d}



^a Geographical locations are based on the Rural, Remote and Metropolitan Areas (RRMA) classification. Data for rural and remote areas have been combined. ^b dmft=d+m+f and refers to deciduous (infant) teeth, where: d=number of untreated decayed teeth; m=number of missing teeth; f=number of filled teeth. Uppercase letters denote permanent (adult) teeth. ^c The proportion of decay-affected teeth that are untreated is computed as the number of untreated decayed teeth (d) divided by the total number of decayed teeth (dmft). ^d Error bars represent 95 per cent confidence intervals around each estimate and are computed by multiplying the standard error by 1.96 (see chapter 2 for more information).

Source: Jamieson, Armfield and Roberts-Thomson (2006); tables 7A.6.1 and 7A.6.2.

Between 2000 and 2003:

• the proportion of decayed deciduous (infant) teeth that were untreated was significantly higher for Indigenous children than for non-Indigenous children across all ages (from 4 to 10 years) in rural/remote areas and for four-year-olds in metropolitan areas (figure 7.6.3)

- the proportion of decayed permanent (adult) teeth that were untreated was higher for Indigenous children than for non-Indigenous children across all ages (from 6–14 years) in rural/remote areas, and for children aged 6, 8, 9, 11 and 13 years in metropolitan areas (figure 7.6.3)
- in several age groups, particularly in rural/remote areas, more than 50 per cent of decay-affected teeth in Indigenous children were untreated.

A study of the oral health of 831 Indigenous children in remote communities in all jurisdictions was conducted between 2000 and 2003 (Jamieson, Armfield and Roberts-Thomson 2007; tables 7A.6.3 and 7A.6.4). Results were compared with CDHS data for Indigenous children in all areas of NSW, SA and the NT (figure 7.6.4).

Between 2000 and 2003:

- The proportion of six year old Indigenous children with deciduous teeth affected by decay was higher in remote communities across Australia, than in all areas of NSW and SA (table 7A.6.4)
- For both six and 12 year olds, the proportion of Indigenous children with teeth affected by decay in remote communities across Australia was similar to that in all areas of the NT (table 7A.6.4).

Indigenous adults' dental health

Adult dental health data are from the National Adult Oral Health Survey, conducted between 2004 and 2006. Of 14 123 people aged 15 years or over who participated in telephone interviews, 229 were Indigenous (AIHW 2009). Of 5505 people who also underwent an oral examination, 87 were Indigenous (Slade, Spencer and Roberts-Thomson 2007).

The proportion of the population with untreated tooth decay is a measure of unmet need for treatment (figure 7.6.5). A lower proportion is suggestive of better access to dental treatment services.

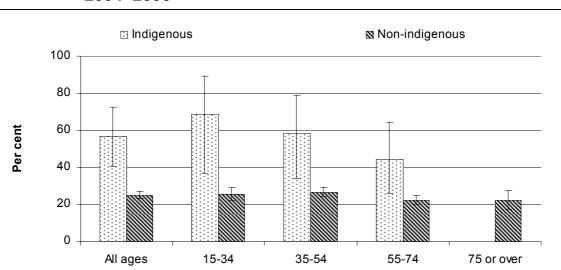


Figure 7.6.4 Proportion of the population with untreated tooth decay, 2004–2006^a

Source: Roberts-Thomson, K.F. and Do, L. (2007); table 7A.6.5.

- The proportion of people aged 15–54 years with untreated tooth decay was more than twice as high for Indigenous people than non-Indigenous people (figure 7.6.4).
- The average number of teeth affected by decay, a measure of prevention, was similar for Indigenous and non-Indigenous adults (table 7A.6.5).

Potentially preventable hospitalisation for dental conditions

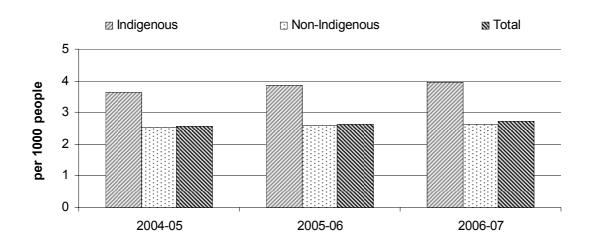
Hospitalisation may be required to treat complications arising from preventable dental conditions such as untreated tooth decay (AIHW 2009).

In the two year period July 2004 to June 2006 there were 65 633 hospitalisations for dental problems in NSW, Victoria, Queensland, WA, SA and the NT combined. Of these, 2495 (3.8 per cent) were for Indigenous people (AIHW 2009).

In 2005-06, 54 per cent of admissions of Indigenous people for diseases of the oral cavity, salivary glands and jaw were for treatment of tooth decay (ABS and AIHW 2008).

^a Error bars represent 95 per cent confidence intervals around each estimate (see chapter 2 for more information).

Figure 7.6.5 Potentially preventable hospitalisations for dental conditions^{a, b, c, d, e}



 ^a Hospitalisation rates are directly age standardised using the 2001 Australian population.
 ^b Data are based on State/Territory of usual residence.
 ^c Separations for which care type was reported as newborn with no qualified days, and records for hospital boarders and posthumous organ procurement have been excluded.
 ^d Includes ICD-10-AM codes K02, K03, K04, K05, K06, K08, K09.8, K09.9, K12 and K13.
 ^e Non-Indigenous includes hospitalisations identified as 'not Indigenous' as well as those with a 'not stated' Indigenous status.
 Source: AIHW National Hospital Morbidity Database (unpublished); table 7A.6.6.

• Potentially preventable hospital admissions for dental conditions were higher for Indigenous people than for non-Indigenous people from 2004-05 to 2006-07 (figure 7.6.5).

Data on hospitalisation rates for Indigenous and non-Indigenous children for dental procedures in 2002-03 were reported in the 2007 OID Report (SCRGSP 2007) and are provided in attachment tables 7A.6.12–7A.6.15.

7.7 Mental health

Box 7.7.1 **Key messages**

- Indigenous people had higher treatment rates for mental health issues in community clinics, residential care facilities and hospitals compared with non-Indigenous people in 2005-06 (table 7.7.1).
- 'Life stress events' have been identified as the factor most strongly associated with a high risk of clinically significant emotional or behavioural difficulties in Aboriginal children (Zubrick et al. 2005). In WA, in 2000-01, more than one in five Aboriginal children aged 0–17 years were living in families that had been exposed to 7 to 14 major life stress events, such as death, incarceration, violence and severe hardship, in the previous 12 months (Silburn et al. 2006).

The Indigenous view of health, including mental health, is holistic — 'health does not just mean the physical wellbeing of the individual but refers to the social, emotional and cultural wellbeing of the whole community' (Swan and Raphael 1995, p. 7). However, this indicator focuses on the mental health of individuals as data on the mental wellbeing of Indigenous communities are not available.

Mental health data, in combination with other health data presented in this report, provide a comprehensive picture of Indigenous health. This indicator includes data on the:

- prevalence of psychological distress
- treatment rates for mental health related services (including hospitals, community mental health care clinics, and doctors)
- death rates for mental and behavioural disorders
- mental health of prisoners and juveniles in detention
- risk of clinically significant emotional and behavioural difficulties in Aboriginal children.

Within the mental health domain, diverse views exist and terms are used in different ways. This report uses terms that are consistent with the *National Mental Health Plan 2003–2008* (Australian Health Ministers 2003). Broadly, mental health is defined as an individual's ability to negotiate the daily challenges and social interactions of life without experiencing undue emotional or behavioural incapacity (DHAC and AIHW 1999). Mental health encompasses a spectrum from:

• mental wellbeing (a person may have diminished cognitive, emotional and/or social abilities, but not to the extent that the criteria for a mental illness are met)

• mental illness (a diagnosable illness that significantly interferes with an individual's cognitive, emotional and/or social abilities (DHA 2002)).

Mental wellbeing problems are distinct from mental illness, although the two interact and influence each other:

- Mental wellbeing covers a broad range of problems which can be the result of
 domestic violence, substance misuse, physical health problems, incarceration,
 family breakdown and social disadvantage (AHMAC 2004). For Indigenous,
 people there are also broader social and historic issues, such as forced separation
 or forced relocation, which influence mental wellbeing (Blair, Zubrick and Cox
 2005; Procter 2005).
- Mental illness includes anxiety and depression, post traumatic stress, suicidal
 ideation and self-harm behaviour, as well as psychotic disorders, affective
 disorders, and organic and degenerative disorders (DHA 2002). Suicide and selfharm are explored in more detail in section 7.8. Mental illness clearly impacts
 upon and can contribute to the wellbeing of individuals, families and
 communities.

Co-occurrence of depression and anxiety along with substance use are risk factors for suicide in all age groups (Harris and Barraclough 1997; Moscicki 1997; Rajkumar and Hoolahan 2004). A number of studies have found that the use of inhalants is a particular mental health concern among young Indigenous people (James 2004; NT Select Committee on Substance Abuse 2004, 2007; Siegel 2003). More information on substance use is included in sections 10.3 and 10.4.

Mental health is designated a national health priority area for Australia, and Indigenous mental health is the subject of a national strategy and action plan, the National Strategic Framework for Aboriginal and Torres Strait Islander Health (NATSIHC 2003) and the National Strategic Framework for Aboriginal and Torres Strait Islander Mental Health and Social and Emotional Wellbeing 2004–2009 (NATSIHC 2004). Box 7.7.2 provides examples of programs that have been successful in improving Indigenous mental health and wellbeing.

Box 7.7.2 'Things that work' — improving mental wellbeing

The school-based **Family Wellbeing Program** was included in the 2007 report. The program was piloted in primary schools in Hope Vale and Wujul Wujul in far north Queensland. The program aimed to develop the analytical and problem solving skills of the students, to enhance psychosocial development and, in particular, to build personal identity and to encourage students to recognise their future potential.

A program evaluation noted the significant social and emotional growth for the participating students. Other outcomes included greater ability to think for oneself and set goals, less teasing and bullying in the school environment, and enhanced friendships and social relatedness (Tsey et al. 2005). On the basis of these findings, Apunipima and James Cook University worked with Queensland Department of Education, Training and the Arts to develop a curriculum focusing on the family wellbeing empowerment principles for Year 7 students over a school term. This led to the establishment of the Making My Way Through unit within the Cape York Bound for Success Education Strategy. This strategy is aimed at preparing remote area primary students for transition to high school away from home (Queensland unpublished).

The Aboriginal Mental Health Worker Training Program in NSW aims to develop the Aboriginal mental health workforce and increase the education, retention and representation of Aboriginal people in specialist mental health service delivery. At the end of their training, the graduates are fully qualified Aboriginal mental health professionals in mainstream mental health services. Ten trainee positions were offered in 2006-07 and another nine positions will be offered in 2008-09. This will increase the number of Aboriginal Mental Health Workers in NSW to 70 — in addition to the 15 Aboriginal Mental Health Workers in Aboriginal Community Controlled Health Services.

In late 2007, an evaluation by the Cooperative Research Centre for Aboriginal Health found that the program is building a sustainable workforce by coordinating work and study for the trainees within a system of peer support, supervision and mentoring (Harrison and Watson 2009).

Prevalence of psychological distress

The ABS 2004-05 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS) collected data for the first time on mental wellbeing. The 2007 report included detailed findings on these data. Some of the findings from the NATSIHS reveal that in 2004-05:

- after adjusting for age, 26.6 per cent of Indigenous adults had experienced a high to very high level of psychological distress compared with 13.1 per cent of non-Indigenous adults (table 7A.7.1)⁷
- in almost all age groups Indigenous people were twice as likely as non-Indigenous people to have experienced high to very high levels of distress. For 18–24 year olds, Indigenous people were 1.6 times as likely as non-Indigenous people to have experienced high to very high levels of distress (table 7A.7.3).

More data on psychological distress, positive mental wellbeing and psychological distress according to selected health characteristics (such as alcohol consumption) by State and Territory, by sex, by age groups and remoteness areas can be found in attachment tables 7A.7.4–17.

Treatment rates in mental health related services

This section reports information on the use of mental health services such as hospitals, doctors, emergency departments and community clinics. Table 7.7.1 includes 2005-06 treatment rates in mental health related services (except for general practitioners) and 2006-07 treatment rates by general practitioners and hospitals.

Treatment rates are not comparable across mental health services. The rates presented in table 7.7.1 are derived from survey data and various administrative data sets. See tables 7A.7.42, 7A.7.45 and 7A.7.51–54 for more information.

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⁷ The 2004-05 NATSIHS included five Kessler 10 (K10) questions. The Kessler 10 (K10) is a 10-item questionnaire which provides a measure of psychological distress based on questions about the level of anxiety and depressive symptoms in the most recent four-week period.

Table 7.7.1 Treatment rates in mental health related services^a

	Unit	Indigenous	Non-Indigenous b	Rate ratio ^c
2005-06				
General practitioners ^d	crude rate (per 100 encounters)	na	na	na
Emergency departments in public hospitals	% of total mental health related occasions ^e	5.0	96.5	
Community mental health service ^f	rate (per 1000 population) 9	531.7	270.3	2.0
Residential mental health care service ^e	rate (per 10 000 population) 9	1.9	1.1	1.7
Hospitalisations ^h	rate (per 1000 population) 9	24.7	13.9	1.8
2006-07				
General practitioners ^d	crude rate (per 100 encounters)	17.6	10.6	1.5
Hospitalisations ^h	rate (per 1000 population)	25.4	14.1	1.8

^a Treatment rates are not comparable across mental health services. Rates are derived from survey data and various administrative data sets. See tables 7A.7.42, 7A.7.45 and 7A.7.51 – 54 for more detail. ^b Includes non-Indigenous patients and patients for whom Indigenous status was 'not stated' ^c The rate ratio is calculated by dividing the Indigenous rate by the non Indigenous rate. ^d Classified according to ICPC-2 codes: P01–P13, P15–P20, P22–P25, P27–P29, P70–P82, P85–P86, P98–P99. ICPC-2 = International Classification of Primary Care, 2nd edition, Oxford. ^e Includes emergency department occasions of service that had a principal diagnosis based on ICD-10-AM codes F00–F99 or the equivalent ICD-9-CM codes. ICD–10–AM = International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification. ICD-9-CM = International Classification of Diseases, Ninth Revision, Clinical Modification. ^f These data should be interpreted with caution due to likely under identification of Indigenous people. ^g Rates were directly age standardised. ^h Data are reported for NSW, Victoria, Queensland, WA, SA and public hospitals in the NT. Hospitalisation rates are for all mental and behavioural disorders (ICD–10–AM codes F00–F99). na Not available. .. Not applicable.

Source: AIHW (Australian Institute of Health and Welfare) 2008, *Mental Health Services in Australia 2005–06*, Cat. no. HSE 56, Canberra; AIHW 2009, *Measuring the Social and Emotional Wellbeing of Aboriginal and Torres Strait Islander Peoples*, Cat. no. IHW 24, Canberra; tables 7A.7.42, 7A.7.45 and 7A.7.51 – 54.

In 2005-06:

- 5.0 per cent of mental health related emergency department visits were by Indigenous people (for comparative purposes, 4.3 per cent of emergency department visits for all causes were by Indigenous people) (table 7A.7.52)
- after adjusting for age, Indigenous people were twice as likely to be treated by a community mental health service as non-Indigenous people (531.7 and 270.3 per 1000 population respectively) (table 7A.7.53)
- after adjusting for age, Indigenous people had a slightly higher rate of residential care episodes than non-Indigenous people (1.7 and 1.1, respectively) (table 7A.7.54).

Table 7.7.1 also includes 2006-07 treatment rates for general practitioners and hospitals.

• In 2006-07, Indigenous people had a higher rate of mental health related general practitioner encounters than non-Indigenous people (17.6 per cent compared with 10.6 per cent) (table 7.7.1).

The general practitioner data are based on a small sample of general practitioner encounters involving Indigenous Australians. A much larger sample, which produces more reliable results, can be achieved by combining data for a five year period. Combined financial year data for 2002-03 to 2006-07 show that:

- after adjusting for age, the rate of mental health related problems managed by general practitioners was similar for Indigenous and non-Indigenous people (table 7A.7.51)
- Indigenous patients were around three time as likely as non-Indigenous patients to have alcohol misuse, drug abuse and tobacco misuse managed by a general practitioners (AIHW 2009).

After adjusting for age, for NSW, Victoria, Queensland, WA, SA and public hospitals in the NT:

- the hospitalisation rate ratio for mental and behavioural disorders was the same in 2005-06 and 2006-07, that is, Indigenous people were 1.8 times as likely to be hospitalised for mental and behavioural disorders as non-Indigenous people (table 7.7.1)
- from 2004-05 to 2006-07, in NSW, Victoria, Queensland, WA, SA and public hospitals in the NT, the hospitalisation rate for mental and behavioural disorders for both Indigenous and non-Indigenous people remained stable (tables 7A.7.39, 7A.7.42, 7A.7.45).

More hospital data by sex and age groups, for 2004-05 to 2006-07 in NSW, Victoria, Queensland, WA, SA and public hospitals in the NT can be found in tables 7A.7.39-7A.7.50. Longer time series data for Queensland, WA, SA and the attachment NT from 2001-02 2006-07 are included the to in tables 7A.7.18–7A.7.38. Hospitalisation data for these four states and territories should not be assumed to represent the hospitalisation experience in the other jurisdictions.

Death rates for mental and behavioural disorders

Table 7.7.2 Average annual deaths from mental and behavioural disorders, 2003–2007 (per 100 000 population)^{a, b, c}

	Under 25	25–34	35–44	45 and over
Indigenous				
NSW	_	2.0	10.1	36.7
Queensland	_	7.8	11.8	25.7
WA	1.0	1.9	17.7	72.4
SA	_	_	28.7	41.3
NT	_	9.7	20.3	108.3
Non-Indigenous ^e				
NSW	0.2	1.1	2.1	56.4
Queensland	0.1	0.8	1.0	42.8
WA	0.1	0.8	1.2	42.2
SA	0.1	0.7	1.2	65.2
NT	_	_	1.6	24.1

ICD-10 = International Classification of Diseases, 10th Revision.

Source: ABS Causes of Death, Australia, Cat. no. 3303.0 (unpublished); table 7A.7.61.

- For NSW, Queensland, WA, SA and the NT, in 2003–2007, death rates for mental and behavioural disorders were highest for both Indigenous and non-Indigenous people aged 45 years and over (table 7.7.2).
- In 2003–2007, for those jurisdictions for which data are available, death rates for mental and behavioural disorders were higher for Indigenous people aged 25–44 years than non-Indigenous people (except in SA for people aged 25–34 years) (table 7.7.2).
- From the data available in 2003–2007, compared to non-Indigenous rates, mental and behavioural disorders accounted for:
 - 2.4 times as many deaths as expected in NSW
 - 2.1 times as many deaths as expected in Queensland
 - 4.1 times as many deaths as expected in WA

^a These data are based on ICD–10 codes F00–F99. ^b Care should be taken when using these data as the rates are based on a small number of deaths. ^c Denominators used in the calculation of rates for the Indigenous population are from ABS 2004, *Experimental Estimates and Projections, Aboriginal and Torres Strait Islander Australians*, Cat. no. 3238.0 (low series). There are no comparable population data for the non-Indigenous population. Denominators used in the calculation of rates for comparison with the Indigenous population have been derived by subtracting Indigenous population estimates/projections from total estimated resident population and should be used with care, as these data include population units for which Indigenous status were not stated. ^d Data on deaths of Indigenous people are affected by differing levels of coverage of deaths identified as Indigenous across states and territories. Care should be exercised in analysing these data, particularly in making comparisons across states and territories and between the Indigenous and non-Indigenous data. ^e Non-Indigenous includes deaths with a 'Not stated' Indigenous status. – Nil or rounded to zero.

- 2.4 times as many deaths as expected in SA
- 6.0 times as many deaths as expected in the NT (table 7A.7.64).

More data on death rates for mental and behavioural disorders by age and gender can be found in tables 7A.7.55–64.

Mental health of prisoners and juveniles in detention

Prisoners

Data on the health of prisoners (including mental health) in Australia is sporadic, inconsistent and incomplete (AIHW 2001; AMA 2006). Comprehensive Indigenous prisoners' health data (including mental health) are almost nonexistent.

No comparable Indigenous and non-Indigenous data on rates of mental illness and emotional or mental health problems among prisoners are available for inclusion in this report. From the few Australian and international surveys that have been conducted on prisoner health, the common finding is that prisoners have high rates of mental illness and emotional or mental wellbeing problems (ABS 1998; ABS 2008; Brooke et al. 1996; Butler 1997; Butler and Allnutt 2003; Butler and Milner 2003; Fazel and Danesh 2002; Hockings et al. 2002; Victorian Department of Justice 2003). These surveys do not take into account how the prison environment influences the mental health of prisoners.

The 2007 report included findings from a WA study on prisoner health and mental health (Hobbs et al. 2006). The study found that rates of hospital admissions for mental disorders were approximately twice as high for Indigenous male prisoners and three times as high for Indigenous female prisoners as in the Indigenous population of WA (Hobbs et al. 2006). The high prevalence of mental health problems in prisoners highlighted in the study by Hobbs et al. (2006) is consistent with studies of prisoners in the United Kingdom (Brooke et al. 1996).

The Australian Institute of Criminology (AIC) National Deaths in Custody Program (NDICP) database collects information on the prevalence of mental illness reported among people who die in custody. There were 1344 deaths recorded between 1990 and 2006. Information on the prevalence of mental illness was available in 525 cases (AIC NDICP unpublished). Of these, there were 257 deaths in custody of people with a mental illness and 48 (18.7 per cent) were Indigenous deaths (AIC NDICP unpublished). Indigenous prisoners comprised 23.6 per cent of the prisoner population in 2006 (table 4A.12.5).

Possible future sources of data include:

- a census conducted over a period of two weeks every two years, of people entering prisons and their characteristics. The development work of the census is being undertaken by the Prisoner Health Information Group (AIHW 2006)
- a research project, conducted in Queensland, that collected information on the prevalence of mental illness and disorders such as anxiety, depression and post traumatic stress disorder among Indigenous people in custody (Queensland Government unpublished).

Juveniles in detention

There is no systematic collection of data on the health status of juveniles in detention. Research shows that juvenile detainees are at high risk of suffering mental health problems (BMA 2006; Kessler 2002; Vermeiren 2003). No comparable Indigenous and non-Indigenous data on the rates of mental illness and emotional or mental health problems of juveniles in detention are available for inclusion in this report. The 2007 report included findings from two NSW health surveys that examined the mental health of young people in custody and on community orders (Fasher et al 1997; Kenny et al. 2006; NSW Department of Juvenile Justice 2003).

Some of the findings from the NSW surveys include:

- in 2003, 88 per cent of young people in custody reported mild, moderate or severe symptoms consistent with a clinical mental disorder; 33 per cent reported high or very high psychological distress (implying that they may have a greater than 50 per cent chance of an anxiety or depressive disorder). Population norms suggest that between 11 per cent and 12 per cent of the general population have high to very high scores on the K-10 (NSW Department of Juvenile Justice 2003)⁸
- between 2003 and 2005, 25 per cent of young people serving community orders had experienced a high to very high level of psychological distress. Young people on community orders reported fewer mental health issues and fewer suicide or self-harm attempts than young people in custody (Kenny et al. 2006).

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⁸ A total of 319 young people were eligible to participate in the survey. Of this group, 242 young people in custody were surveyed, 102 of whom were Indigenous (42 per cent).

⁹ Indigenous juveniles comprised 20 per cent of the young people surveyed.

Risk of clinically significant emotional and behavioural difficulties in Aboriginal children

The mental wellbeing of children is intimately connected to the emotional and physical wellbeing of their parents (BMA 2006). Risk factors for vulnerability to both mental and physical illness are often transmitted across generations in the absence of interventions to break the cycles of vulnerability (BMA 2006).

There is a paucity of data to describe the mental health and wellbeing of Indigenous children. The 2007 report included findings from the Western Australian Aboriginal Child Health Survey (WAACHS). The WAACHS, conducted in 2000-01, collected data on emotional and behavioural difficulties in Aboriginal children. Some of the findings from the WA study include:

- Indigenous children in remote communities had better mental health than children living in Perth, suggesting that growing up in very remote communities, where adherence to traditional culture and ways of life are strongest, may be protective against emotional and behavioural difficulties in Aboriginal children (Zubrick et al. 2005)
- life stress events were the factor most strongly associated with high risk of clinically significant emotional or behavioural difficulties in Aboriginal children (Zubrick et al. 2005). Families of Aboriginal children report extraordinary levels of stress from events including, death, incarceration, violence and severe hardship. Over one in five Aboriginal children aged 0–17 years (22 per cent) were living in families that had been exposed to 7–14 major life stress events in the 12 months prior to the survey (Silburn et al. 2006).

7.8 Suicide and self-harm

Box 7.8.1 **Key messages**

- Suicide death rates were higher for Indigenous people (between 10.9 and 42.2 per 100 000 population) than non-Indigenous people (between 8.3 and 15.1 per 100 000 population) in NSW, Queensland, WA and SA and the NT in 2003–07 (figure 7.8.1). Indigenous people aged 25–34 had particularly high suicide rates (between 26.0 and 100.4 per 100 000 people) (figure 7.8.2).
- Suicide rates were significantly higher for Indigenous males (between 19.4 and 76.4 per 100 000) than for non-Indigenous males (between 13.3 and 24.4 per 100 000), and for Indigenous females (between 6.7 and 17.1 per 100 000) than non-Indigenous females (between 3.5 and 5.0 per 100 000) (figure 7.8.3).
- The hospitalisation rate for non-fatal intentional self-harm (age standardised) was higher for Indigenous people (3.5 per 1000) than non-Indigenous people (1.4 per 1000) in 2006-07 (table 7.8.1). There was a slight increase in hospitalisations of Indigenous people for self-harm between 2004-05 and 2006-07 (figure 7.8.4).

Suicide and self-harm cause great grief in both Indigenous and non-Indigenous communities. Studies investigating suicide in Indigenous communities have been undertaken in NSW and the ACT (Tatz 1999), North Queensland (Hunter et al. 2001; Hunter and Harvey 2002), the NT (Measey et al. 2006; Parker and Ben-Tovim 2001) and extensive cross cultural, comparative research carried out in SA in Adelaide's state housing areas (Radford et al. 1991, 1999; Brice 1994).

Many studies (Elliott Farrelly 2004; Hunter et al. 2001; Hunter and Harvey 2002; Parker and Ben-Tovim 2001; Tatz 1999) have suggested that there are significant differences in suicidal behaviour not only between the Indigenous and non-Indigenous populations, but also between different Indigenous communities. This indicates that Indigenous suicide is influenced by a complex set of factors relating to history of dispossession and intergenerational trauma, removal from family, discrimination, resilience, social capital and socio-economic status.

Radford et al. (1999) found high reported attempted suicide levels in non-Aboriginal sole parents living in public housing in Adelaide that were slightly higher than for their Aboriginal equivalents in the same areas — which was associated for both groups with past abuse experience as well as housing and other social and economic issues.

Studies have found that Indigenous suicides appear to occur in clusters, and that the victims may share common age groups, genders and methods

(Elliott-Farrelly 2004). Non-Indigenous suicides also appear to occur in clusters (Marsden 2001). Suicide frequently occurs in communities that have experienced similar losses in the past, and where 'lifestyles of risk' are common. Suicide is often impulsive, and may be preceded by interpersonal conflicts (Hunter et al. 2001; Tatz 1999).

Evidence indicates that suicide is most common among young Indigenous men, while suicide attempts seem to be more prevalent for Indigenous women (Elliott-Farrelly 2004).

A study on self-harming behaviour among young Indigenous people (Hunter 1993) found that those who had attempted suicide reported a high level of anxiety and depression. Other researchers have found that mental and behavioural disorders are often associated with an increased risk of self-harm, as is alcohol and substance abuse (Swan and Raphael 1995; Vicary and Westerman 2004). However, other researchers have disputed the purported relationship between mental illness and Aboriginal suicide (Tatz 1999; Reser 1991, cited in Elliott-Farrelly 2004). Section 7.7 of the report presents data on mental health and sections 10.3 and 10.4 of the report presents data on alcohol and drug and other substance abuse.

Environmental, sociocultural and economic risk factors have also been associated with a higher rate of suicide. Relevant family factors may include having parents who are substance dependent, have been imprisoned, or have violent tendencies, particularly if this translates into family violence.

Evidence suggests that intergenerational trauma is a risk factor for Indigenous suicide. This trauma leads to, and results in, poor parenting skills, lack of positive role models, disintegration of family and cultural life, a lack of support networks, and alcohol and substance abuse. Young people growing up in these circumstances have had diminished access to identity-forming structures which help the transition from childhood to adolescence into adulthood and provide a young person, particularly males, with positive role models and coping behaviours in times of conflict (Proctor 2005).

Qualitative research of Indigenous young people in the East Kimberley (Wunan 2008) found that low self esteem, being a victim of sexual abuse and untreated depression were all factors in Indigenous youth suicide. Feelings of hopelessness, loss of culture and discrimination were also associated with suicides by Indigenous young people. Other research in the Kimberley Region found that Aboriginal adolescents were four times more likely (than non-Aboriginal adolescents) to report that a family member had committed suicide (29 per cent to 8 per cent) (Ralph, Hamaguchi and Cox 2006).

Canadian research has found evidence that the presence of certain socio-cultural factors in discrete Indigenous communities, such as efforts to secure land rights, evidence of some community control over education, policing and health significantly reduced the risk of youth suicide in those communities (Chandler and Lalonde 2008).

Unemployment and poor long-term job prospects are considered risk factors for suicide, particularly in regional and remote areas, where a substantial proportion — 67.9 per cent in 2006 — of Indigenous people live (appendix 3, table A.2). Section 4.6 presents data showing the higher unemployment rates and lower labour force participation rates of Indigenous compared to non-Indigenous people.

Programs exist to prevent suicide and mitigate community risk factors. For example, following three suicide clusters between the mid 1980s and mid 1990s, the Yarrabah community in Queensland developed a set of strategies for suicide prevention, intervention, aftercare and life promotion. More information is contained in box 7.8.2.

Box 7.8.2 'Things that work' — Suicide prevention

The Yarrabah Family Life Promotion Program (Queensland), established in 1995 is facilitated by the locally-controlled Community Council and Primary Health Care service, and external resources engaged by the community. Life promotion strategies seek to mitigate community risk factors, through training community members in crisis intervention and counselling, a crisis centre and crisis line, one-on-one grief and loss counselling, and family and men's support groups. Other measures include information for suicide survivors, families of suicide victims, and people who self-harm, workshops on parenting and relationships and the promotion of sport, recreation and cultural activities. Numbers of suicides and incidents of self harm have fallen, as have hospital presentations for accidental trauma and police interventions for alcohol-related problems.

Community ownership of the problem and the solution was fundamental in the success of the Yarrabah program. The community 'identified the reclamation of 'spirit' or responding to the experience of hopelessness, as fundamental to the achievement of health improvement'. While the apparent lack of structure of the program had sometimes been a barrier when applying for funding, formal structure may work to inhibit community engagement where community ownership has not already been established. The program is ongoing with two Life Promotion Officers. One position is currently filled and the second program needs to be recruited due to a vacancy (Baird, Mick-Ramsamy and Percy 1998; Clapham 2004, pp. 68–72, 126–7; Hunter et al. 2001; Mitchell 2000, p. 22; Mitchell 2005, pp. 16–18).

(Continued next page)

Box 7.8.2 (continued)

The Koori Kids Wellbeing Project in Shoalhaven, NSW, is part of the National Suicide Prevention Strategy, funded by the Australian Government Department of Health and Ageing. This project provides a promotion, prevention and early intervention approach to mental health support and suicide prevention for Aboriginal children aged between 3–12 years. There are five key components in the Koori Kids Wellbeing Program. These are:

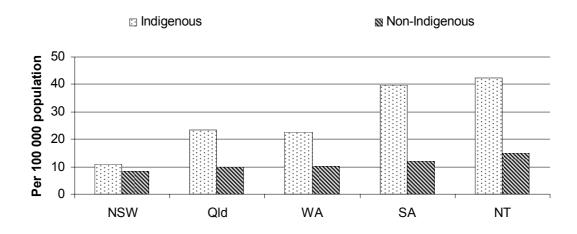
- cultural awareness; programs in primary schools focussing on building cultural identity and pride
- Aussie Optimism mental health education in classrooms
- individual counselling and psychological support for children with emotional and behavioural difficulties
- parenting education and support
- staff support and training for Aboriginal education officers and other school, health and welfare staff with a focus on child protection, child mental health, Aboriginal mental health and cultural competency.

The Koori Kids project has approximately 60 individual clients but sees up to 200 children per week through parenting, group and classroom education. The project is under constant demand as the area it covers consists of a population of about 100 000, including nearly 1000 Aboriginal children of primary school age. It provides services that are flexible to the community's needs (Australian Government, unpublished).

In SA, **LivingWorks**, offers two suicide intervention programs, which have been delivered to the Indigenous community since 2007. ASIST (Applied Suicide Intervention Skills Training) is a two day workshop and SafeTALK (Suicide Alertness for Everyone — Tell, Ask, Listen, KeepSafe) is a half day workshop for caregivers. LivingWorks programs train a range of people in the community to be able to intervene with someone at risk of suicide.

Feedback from participants, which is collected after each training program, has indicated that SafeTALK and ASIST are effective tools in building capacity to intervene with someone at risk of suicide. An internal program evaluation completed in June 2008 found that the LivingWorks courses help to break down the stigma and taboo surrounding suicide and provide participants with a range of resources, strategies and support to keep people safe. This is consistent with the international body of evidence relating to the initiative. International information on the program is available at http://www.livingworks.net (SA Government, unpublished).

Figure 7.8.1 Average annual intentional self-harm (suicide) deaths indirectly age standardised rate per 100 000, 2003–07a, b, c, d, e

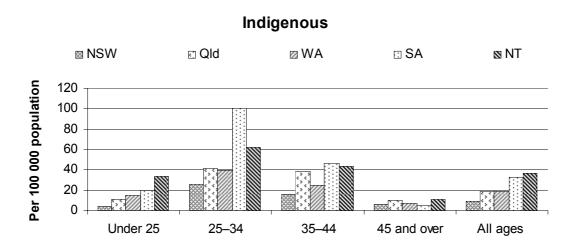


^a Data on deaths of Aboriginal and Torres Strait Islander Australians are affected by differing levels of coverage of deaths identified as Indigenous across states and territories. Care should be exercised in analysing these data, particularly in making comparisons across states and territories and between Indigenous and non-Indigenous data. ^b Data on Indigenous causes of death are not available separately from the ABS for Victoria, Tasmania and the ACT due to a combination of comparatively small numbers and relatively low coverage of Indigenous deaths. ^c Deaths from intentional self-harm are defined as causes of death with ICD 10 codes X60–X84, Y87.0. ^d Data are subject to a degree of uncertainty and apparent differences in mortality estimates between jurisdictions may not be statistically significant. ^e Calculations of rates for the Indigenous population are based on ABS Experimental Projections, Aboriginal and Torres Strait Islander Australians (low series, 2001 base). There are no comparable population data for the non-Indigenous population. 'Non-Indigenous' includes deaths with 'Not stated' Indigenous status. Calculations of rates for the non-Indigenous population are based on data derived by subtracting Indigenous population projections from total population estimates and should be used with care.

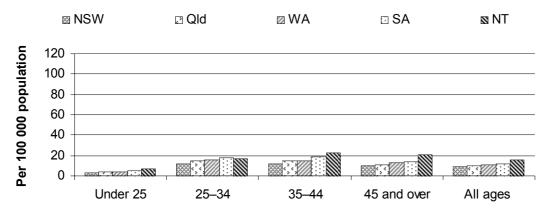
Source: ABS Causes of Death, Australia, Cat. no. 3303.0 (unpublished); table 7A.8.1.

• Suicide death rates were higher for Indigenous people (between 10.9 and 42.2 per 100 000 population) than non-Indigenous people (between 8.3 and 15.1 per 100 000 population) in NSW, Queensland, WA and SA and the NT between 2003 and 2007 (figure 7.8.1). Non-age-standardised data are included in table 7A.8.3.

Figure 7.8.2 Average annual intentional self-harm (suicide) death rate by age, 2003–07^{a, b, c, d, e, f, g}



Non-Indigenous



a Rates are crude rates. b All ages includes age not stated. c Data on deaths of Aboriginal and Torres Strait Islander Australians are affected by differing levels of coverage of deaths identified as Indigenous across states and territories. Care should be exercised in analysing these data, particularly in making comparisons across states and territories and between Indigenous and non-Indigenous data. d Data on Indigenous causes of death are not available separately from the ABS for Victoria, Tasmania and the ACT due to a combination of comparatively small numbers and relatively low coverage of Indigenous deaths. Deaths from intentional self-harm are defined as causes of death with ICD 10 codes X60–X84, Y87.0. Data are subject to a degree of uncertainty and apparent differences in mortality estimates between jurisdictions may not be statistically significant. Calculations of rates for the Indigenous population are based on ABS Experimental Projections, Aboriginal and Torres Strait Islander Australians (low series, 2001 base). There are no comparable population data for the non-Indigenous population. 'Non-Indigenous' includes deaths with 'Not stated' Indigenous status. Calculations of rates for the non-Indigenous population are based on data derived by subtracting Indigenous population projections from total population estimates and should be used with care.

Source: ABS Causes of Death, Australia, Cat. no. 3303.0 (unpublished); table 7A.8.2.

• Suicide death rates varied by age group in 2003–07, with Indigenous people aged 25–34 having particularly high suicide rates (between 26.0 and 100.4 per 100 000 people) (figure 7.8.2).

Figure 7.8.3 Average annual suicide death rates by sex, indirectly age standardised rate, 2003–07^{a, b, c, d, e}



Females Indigenous NSW Qld WA SA NT

Source: ABS Causes of Death, Australia, Cat. no. 3303.0 (unpublished); tables 7A.8.1.

In the period 2003–07, after taking into account the different age structures of the two populations, in the five states and territories for which data are available:

^a Data on deaths of Aboriginal and Torres Strait Islander Australians are affected by differing levels of coverage of deaths identified as Indigenous across states and territories. Care should be exercised in analysing these data, particularly in making comparisons across states and territories and between Indigenous and non-Indigenous data. ^b Data on Indigenous causes of death are not available separately from the ABS for NSW (for females), Victoria, Tasmania and the ACT due to a combination of comparatively small numbers and relatively low coverage of Indigenous deaths. ^c Deaths from intentional self-harm are defined as causes of death with ICD 10 codes X60–X84, Y87.0. ^d Data are subject to a degree of uncertainty and apparent differences in mortality estimates between jurisdictions may not be statistically significant. ^e Calculations of rates for the Indigenous population are based on ABS Experimental Projections, Aboriginal and Torres Strait Islander Australians (low series, 2001 base). There are no comparable population data for the non-Indigenous population. 'Non-Indigenous' includes deaths with 'Not stated' Indigenous status. Calculations of rates for the non-Indigenous population are based on data derived by subtracting Indigenous population projections from total population estimates and should be used with care.

- suicide rates for Indigenous males were significantly higher (between 19.4 and 76.4 per 100 000) than those for non-Indigenous males (between 13.3 and 24.4 per 100 000) (figure 7.8.3)
- suicide death rates were also higher for Indigenous females (between 6.7 and 17.1 per 100 000) than non-Indigenous females (between 3.5 and 5.0 per 100 000) (figure 7.8.3)
- suicide death rates were higher for males than females for non-Indigenous people (figure 7.8.3)
- suicides as a proportion of all deaths were higher for Indigenous people than for non-Indigenous people (2.4 to 6.7 per cent compared to 1.2 to 4.7 per cent) (table 7A.8.4).

Data on suicides for the period 2001-05 (which were published in the 2007 report) are available in the attachment tables for this section (tables 7A.8.7–10).

Measey et al. (2006) conducted a study of NT suicides between 1981 and 2002, using data from ABS death registrations and the NT's Coroner's office. In the article, the authors' advise caution must be exercised in making any generalisations from their findings, given small numbers, the unusual age distribution of the NT population, the relatively high proportion of Indigenous people in the NT, and the high proportion of the NT population living in remote and very remote areas. They found that:

- the age-adjusted rate of suicide in the NT has been higher than the national rate since 1996, and is rising
- between 1981 and 2002:
 - the incidence of Indigenous suicide had increased since low levels in the early 1980s and had become an increasing problem
 - averaged over the whole period, Indigenous and non-Indigenous rates were similar but Indigenous suicide rates had risen rapidly and were now significantly higher than non-Indigenous rates
 - the suicide rate for Indigenous males rose by 800 per cent while the rate for non-Indigenous males rose by 30 per cent
 - the overall rate of suicide by Indigenous males increased by an annual average of 17.4 per cent, while the Indigenous females rate increased by an annual average of 25.8 per cent
 - amongst Indigenous people, males aged 25–44 years had the highest suicide rate, and males aged 10–24 had the second highest rate

- analysis of data from the Top End¹⁰ between 2000 and 2002 found:
 - a history of diagnosed mental illness (including depression) in 49 per cent of all suicides
 - use of alcohol around the time of death in 56 per cent of all cases, and drug use in a further 16 per cent of all cases
 - 41 per cent of all suicides were by unemployed people.

Table 7.8.1 Age standardised non-fatal hospitalisations for intentional self-harm, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2006-07^{a, b}

	ı	Number of hosp	oitalisations		Age stand hospitalisat	
	Indigenous	Non- Indigenous	Not stated	Total	Indigenous	Non- Indigenous ^d
Males	690	10 334	258	11 282	3.2	1.1
Females	881	16 645	320	17 846	3.7	1.7
All people	1 571	26 982	578	29 131	3.5	1.4

a Non-fatal refers to records where the end of hospitalisation was not equal to 'Died'. Intentional self-harm refers to hospitalisations with at least one external cause reported in X60–X84, based on the ICD-10 classification.
b Data based on state of usual residence.
c The rates per 1000 population were directly age standardised using the 2001 Australian standard population.
d Includes hospitalisations where Indigenous status was recorded as non-Indigenous or not stated.

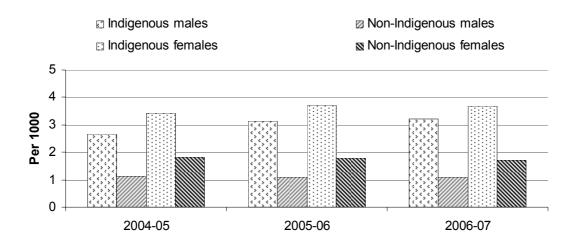
Source: AIHW National Hospital Morbidity Database (unpublished); table 7A.8.5.

In 2006-07:

- the age standardised non-fatal hospitalisation rate for intentional self-harm was higher for Indigenous people (3.5 per 1000) than non-Indigenous people (1.4 per 1000) (table 7.8.1)
- Indigenous females (3.7 per 1000) had a higher age standardised hospitalisation rate for self-harm than Indigenous males (3.2 per 1000). Non-Indigenous females also had a higher age standardised hospitalisation rate for self-harm than non-Indigenous males (1.7 and 1.1, respectively) (table 7.8.1).

¹⁰ The Top End refers to the northern part of the NT.

Figure 7.8.4 Age standardised non-fatal hospitalisations for intentional self-harm, NSW, Victoria, Queensland, SA, WA, and public hospitals in the NTa, b, c, d, e



^a Non-fatal refers to records where the hospitalisation was not equal to 'Died'. Intentional self-harm refers to hospitalisations with at least one external cause in X60–X84, based on the ICD-10 classification. ^b The rates per 1000 population were directly age standardised using the 2001 Australian standard population. ^c Indigenous data are reported for NSW, Victoria, Queensland, WA, SA and the NT only. These six jurisdictions are considered to have the highest level of accuracy of Indigenous identification, although the level of accuracy varies by jurisdiction and hospital. ^d Data based on state of usual residence. ^e Includes hospitalisations where Indigenous status was unknown.

Source: AIHW National Hospital Morbidity Database (unpublished); table 7A.8.5.

- Between 2004-05 and 2006-07, age standardised hospitalisation rates for intentional self-harm increased slightly for Indigenous males and females and did not change much for non-Indigenous males and females, but it is not possible to discern any trends (figure 7.8.4).
- Numbers of Indigenous non-fatal hospitalisations for intentional self-harm are small and changes in rates over time must be interpreted with caution. A longer time series of hospitalisations for intentional self-harm from 2001-02 to 2006-07 for Queensland, WA, SA and the NT showed fluctuations in rates for Indigenous and non-Indigenous males and females, but with no discernible trend (table 7A.8.6).

7.9 Future directions in data

Tobacco consumption and harm

There are limited data on current daily adult Indigenous smokers. This report and previous reports (2005 and 2007) use data on current daily adult smokers from ABS

surveys. The report, *Drug Use among Aboriginal and Torres Strait Islander Peoples: an Assessment of Data Sources* (AIHW 2006) suggested many ways to improve current collections of data on substance use. Some of the suggested improvements are outlined in section 10.7.

The 2008 NATSISS will provide updated information on this topic, with data available from late 2009.

Obesity and nutrition

There are no current data on the prevalence of obesity among Indigenous children, and only limited data are available on their dietary behaviours. The proposed Longitudinal Study of Indigenous Children (LSIC) may collect data on BMI and nutrition.

The 2008 ABS National Aboriginal and Torres Strait Islander Social Survey (NATSISS) included questions on child nutrition. The NATSISS results are expected to be available from late 2009. The 2008 ABS NATSISS did not collect BMI data or information on adult nutrition. The 2010-11 ABS National Aboriginal and Torres Strait Islander Health Survey (NATSIHS) will again provide information on BMI and nutrition for Indigenous people.

Mental health

There are few data from which to draw conclusions about the scope, prevalence and burden of mental health problems in Indigenous people (especially for vulnerable groups of the Indigenous population, such as prisoners, juveniles in detention and children). The key challenges are to improve existing collections, such as improving reporting for rural/remote areas, and to expand data collection instruments, such as Indigenous specific surveys and longitudinal studies of Indigenous children, to incorporate mental health modules. One of the potential benefits of the Juvenile Justice National Minimum Data Set is the possible links with other social and health related data (AIHW 2004).

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7.1 Access to primary health care

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7.2 Potentially preventable hospitalisations

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7.3 Avoidable mortality

- AHMAC (Australian Health Ministers' Advisory Council) 2008, *Aboriginal and Torres Strait Islander Health Performance Framework, 2008 Report*, Canberra.
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7.9 Future directions in data

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7A Healthy lives — attachment

The tables in this file accompany the report, *Overcoming Indigenous Disadvantage: Key Indicators 2009*, prepared by the Steering Committee for the Review of Government Service Provision. Background and definitions are available in the report, which is available on the Review website (www.pc.gov.au/gsp).

This file is available in both Microsoft Excel and Adobe PDF formats on the Review website (www.pc.gov.au/gsp). Users without Internet access can contact the Secretariat to obtain these tables (details inside the front cover of the report).

Attachment contents

7A.1 Access to	primary health
Table 7A.1.1	Self-assessed health status, people aged 15 years and over, by age, 2004-05
Table 7A.1.2	Self-assessed health status, people aged 15 years and over, by sex, 2004-05
Table 7A.1.3	Self-assessed health status, Indigenous people aged 15 years and over, by State and Territory, $2004\text{-}05$
Table 7A.1.4	Self-assessed health status, Indigenous people aged 15 years and over, by remoteness, $2004\text{-}05$
Table 7A.1.5	Age standardised self-assessed health status, by selected population characteristics, people aged 15 years and over, $2004-05$
Table 7A.1.6	Age-standardised self-assessed health status, by number of long term health conditions, people aged 15 years and over, $2004-05$
Table 7A.1.7	Total expenditure on health services for Indigenous and non-Indigenous people, by type of health good or service, current prices, $2004-05$
Table 7A.1.8	Expenditure per person on primary and secondary/tertiary health services for Indigenous and non-Indigenous people, by type of health good or service, current prices, 2004-05
Table 7A.1.9	Vaccination coverage estimates for children, NSW, Victoria, WA, SA and the NT combined, 31 December 2007 $$
Table 7A.1.10	Vaccination coverage estimates for selected diseases for children 'fully vaccinated' at 1 year of age, NSW, Victoria, WA, SA and the NT, 31 December 2007
Table 7A.1.11	Vaccination coverage estimates for selected diseases for children 'fully vaccinated' at 2 years of age, NSW, Victoria, WA, SA and the NT, 31 December 2007
Table 7A.1.12	Vaccination coverage estimates for selected diseases for children 'fully vaccinated' at 6 years of age, NSW, Victoria, WA, SA and the NT, 31 December 2007
Table 7A.1.13	Immunisation rates Indigenous people aged 50 years and over and non-Indigenous people aged 65 years and over, 2004-05
Table 7A.1.14	Health care services Indigenous people sought when they had a health problem, by remoteness, $2004-05$
Table 7A.1.15	Time since last consulted GP/specialist, people aged 18 years and over, age standardised, by Indigenous status and remoteness, 2001, 2004-05 $$
Table 7A.1.16	Time since last consulted dentist, people aged two years and over, age standardised, by Indigenous status and remoteness, 2001, 2004-05
Table 7A.1.17	Reasons for not going to a GP in the last 12 months, Indigenous people aged 18 years and over, by remoteness, $2004-05$
Table 7A.1.18	Reasons for not going to a dentist in the last 12 months, Indigenous people aged 18 years and over, by remoteness, $2004-05$
Table 7A.1.19	Reasons for not going to other health professionals in the last 12 months, Indigenous people aged 18 years and over, by remoteness, $2004-05$
Table 7A.1.20	Number and proportion of discrete Indigenous communities that reported having Indigenous health workers and medical professionals visit or work within their community, 2006

Table 7A.1.21 Employment in selected health-related occupations, Indigenous people aged 15 years and over, 2006

7A.2 Potentially preventable hospitalisations

- **Table 7A.2.1** Standardised hospitalisations for potentially preventable chronic conditions, per 1000 people, by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05, 2005-06, 2006-07
- **Table 7A.2.2** Standardised hospitalisations for potentially preventable chronic conditions, per 1000 people, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2005-06, 2006-07
- **Table 7A.2.3** Standardised hospitalisations for potentially preventable chronic conditions, per 1000 people, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2003-04, 2004-05
- **Table 7A.2.4** Standardised hospitalisations for potentially preventable chronic conditions, per 1000 people, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2001-02, 2002-03
- **Table 7A.2.5** Standardised hospitalisations for type 2 diabetes mellitus as principal diagnosis by complication, per 1000 people, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, by Indigenous status, 2004-05, 2005-06, 2006-07
- **Table 7A.2.6** Standardised hospitalisations for type 2 diabetes mellitus as principal diagnosis by complication, per 1000 people, Queensland, WA, SA, and public hospitals in the NT, by Indigenous status, 2005-06, 2006-07
- **Table 7A.2.7** Standardised hospitalisations for type 2 diabetes mellitus as principal diagnosis by complication, per 1000 people, Queensland, WA, SA, and public hospitals in the NT, by Indigenous status, 2001-02 to 2004-05
- **Table 7A.2.8** Standardised hospitalisations for potentially preventable acute conditions, per 1000 people, by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05, 2005-06, 2006-07
- **Table 7A.2.9** Standardised hospitalisations for potentially preventable acute conditions, per 1000 people, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2005-06, 2006-07
- **Table 7A.2.10** Standardised hospitalisations for potentially preventable acute conditions, per 1000 people, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2003-04, 2004-05
- **Table 7A.2.11** Standardised hospitalisations for potentially preventable acute conditions, per 1000 people, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2001-02. 2002-03
- **Table 7A.2.12** Standardised hospitalisations for vaccine preventable conditions, per 1000 people, by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05 to 2006-07
- **Table 7A.2.13** Standardised hospitalisations for vaccine preventable conditions, per 1000 people, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2001-02 to 2006-07
- **Table 7A.2.14** Standardised hospitalisations for infections with a predominantly sexual mode of transmission, per 1000 people, by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT
- **Table 7A.2.15** Standardised hospitalisations for infections with a predominantly sexual mode of transmission, per 1000 people, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT

- **Table 7A.2.16** List of ICD-10-AM codes used to define categories of potentially preventable hospitalisations
- **Table 7A.2.17** Hospitalisations of Indigenous people with a principle diagnosis of injury and poisoning and other consequences of external causes, by sex, NSW, Victoria, Queensland, WA, SA, and the NT, July 2005 to June 2007
- **Table 7A.2.18** Age standardised hospitalisation rates, rate ratios and rate differences for injury and poisoning, Queensland, WA, SA and the NT, 1998-99 to 2006-07

7A.3 Avoidable mortality

- **Table 7A.3.1** Avoidable mortality, by Indigenous status and State/Territory, people aged 0–74 years, 2002–2006
- **Table 7A.3.2** Avoidable mortality, by Indigenous status, age group and sex, people aged 0–74 years, Queensland, WA, SA and the NT, 2002–2006
- **Table 7A.3.3** Avoidable mortality, by cause of death and Indigenous status, people aged 0–74 years, Queensland, WA, SA and the NT, 2002–2006
- **Table 7A.3.4** Age-standardised mortality rates, rate ratios and rate differences, avoidable causes, peoople aged 0–74 years, Queensland, WA, SA, and the NT, 1998 to 2006

7A.4 Tobacco consumption and harm

- **Table 7A.4.1** Smoking statistics, people aged 14 years or over, Australia
- **Table 7A.4.2** Age standardised hospital separations related to tobacco use (per 1000 population), Queensland, WA, SA and public hospitals in NT
- **Table 7A.4.3** Age standardised hospital separations related to tobacco use (per 1000 population), NSW, Victoria, Queensland, WA, SA and public hospitals in the NT
- **Table 7A.4.4** Indigenous persons aged 15 years or over: smoker status by sex
- **Table 7A.4.5** Tobacco consumption for people aged 18 years or over, age standardised, 2004-05
- Table 7A.4.6 Current daily smokers aged 18 years or over, by sex and remoteness, age standardised
- **Table 7A.4.7** Current daily smokers aged 18 years or over, by sex and age, non-remote areas only
- Table 7A.4.8 Current daily smokers aged 18 years or over, age standardised, 2004-05
- Table 7A.4.9 Current daily smokers aged 18 years or over
- Table 7A.4.10 Current daily smokers, Indigenous people aged 18 years or over, 2004-05

7A.5 Obesity and nutrition

- **Table 7A.5.1** Body mass index group for people aged 18 years and over, non-remote areas, by sex, by age, 2004-05
- **Table 7A.5.2** Dietary behaviours for people aged 12 years and over, non-remote areas, 2004-05 (per cent)
- **Table 7A.5.3** Indigenous people aged 12 years and over, by usual daily intake of vegetables and fruit, non-remote areas, 2001 and 2004-05 (per cent)
- **Table 7A.5.4** Usual daily intake of vegetables and fruit for people aged 12 years and over, non-remote areas, age-standardised, 2004-05 (per cent)
- **Table 7A.5.5** Indigenous people aged 12 years and over, by dietary behaviours, by remoteness, 2004-05 (per cent)

7A.6 Tooth decay

- **Table 7A.6.1** Deciduous (infant) tooth decay in 4- to 10-year-old children enrolled in school dental services in NSW, SA and the NT, by Indigenous status and location
- **Table 7A.6.2** Permanent (adult) tooth decay in 6- to 14-year-old children enrolled in school dental services in NSW, SA and the NT, by Indigenous status and location
- Table 7A.6.3 Tooth decay in Indigenous children in remote areas, and in children in SA, the NT and
- **Table 7A.6.4** Tooth decay in Indigenous children in remote areas and Indigenous children in SA, NSW and the NT
- **Table 7A.6.5** Tooth decay in adults, by Indigenous status and age group
- **Table 7A.6.6** Potentially preventable hospitalisations for dental conditions per 1000 people, by Indigenous status, 2004-05 to 2006-07
- **Table 7A.6.7** Mean number of teeth with decay for children enrolled in the NT School Dental Service, by age and Indigenous status, 2002
- **Table 7A.6.8** Mean tooth decay (dmft) for 4- to 10-year-old children enrolled in the NT School Dental Service, by SEIFA index of relative socio-economic disadvantage, age and Indigenous
- Table 7A.6.9 Mean tooth decay (DMFT) for 6- to 13-year-old children enrolled in the NT School Dental Service, by SEIFA index of relative socio-economic disadvantage, age and Indigenous status, 2002
- **Table 7A.6.10** SA, infant and permanent tooth decay, mean dmft and DMFT by Indigenous status and age, 2003 Child Dental Health Survey
- **Table 7A.6.11** SA, proportion of children with calculus and gingival bleeding by Indigenous status and age, children attending school dental service, 2003 Child Dental Health Survey
- **Table 7A.6.12** Dental hospitalisations for children aged 2 to 14 years, per 100 000 children, by sociodemographic characteristics and Indigenous status, 2002-03
- **Table 7A.6.13** Hospital dental procedure rates for children aged 2 to 14 years, per 100 000 children, by sex and Indigenous status, 2002-03
- **Table 7A.6.14** Hospital dental procedure rates for children aged 2 to 14 years, per 100 000 children, by age group and Indigenous status, 2002-03
- **Table 7A.6.15** Hospital dental procedure rates for children aged 2 to 14 years, per 100 000 children, by remoteness area and Indigenous status, 2002-03

7A.7 Mental health

- **Table 7A.7.1** K5 level of psychological distress, people aged 18 years and over, age standardised, Australia, 2004-05
- **Table 7A.7.2** Selected indicators of positive well being, Indigenous people aged 18 years and over, by State and Territory, 2004-05
- **Table 7A.7.3** K5 level of psychological distress, people aged 18 years and over, by age groups, Australia, 2004-05
- **Table 7A.7.4** K5 level of psychological distress, people aged 18 years and over, age standardised, by remoteness areas, Australia, 2004-05
- **Table 7A.7.5** K5 level of psychological distress, people aged 18 years and over, by State and Territory, 2004-05
- **Table 7A.7.6** K5 level of current psychological distress, by reported stressor in the last 12 months, Indigenous people aged 18 years and over, 2004-05
- **Table 7A.7.7** How often physical health problems were the main cause of negative feelings in the last four weeks, Indigenous people aged 18 years and over, Australia, 2004-05

- **Table 7A.7.8** Whether had days unable to work/carry out normal activities due to negative feelings in last four weeks, Indigenous people aged 18 years and over, Australia, 2004-05
- **Table 7A.7.9** Number of days unable to work/carry out normal activities because of negative feelings in the last four weeks, Indigenous people aged 18 years and over, Australia, 2004-05
- **Table 7A.7.10** Selected indicators of psychological distress, people aged 18 years and over, age standardised, by State and Territory, 2004-05
- **Table 7A.7.11** Selected indicators of psychological distress, people aged 18 years and over, age standardised, by sex, Australia, 2004-05
- **Table 7A.7.12** Selected indicators of psychological distress, people aged 18 years and over, by age groups, Australia, 2004-05
- **Table 7A.7.13** Selected indicators of psychological distress, people aged 18 years and over, age standardised, by remoteness areas, Australia, 2004-05
- **Table 7A.7.14** Selected indicators of positive well being, Indigenous people aged 18 years and over, by sex, Australia, 2004-05
- **Table 7A.7.15** Selected indicators of positive well being, Indigenous people aged 18 years and over, by age groups, Australia, 2004-05
- **Table 7A.7.16** Selected indicators of positive well being, Indigenous people aged 18 years and over, by remoteness areas, Australia, 2004-05
- **Table 7A.7.17** K5 level of current psychological distress, by selected health characteristics, Indigenous people 18–64 years of age, 2004-05
- **Table 7A.7.18** Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2001-02
- **Table 7A.7.19** Hospitalisation rate, per 1000 population, for mental and behavioural disorders (ICD-10-AM codes F00-F99), by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2001-02
- **Table 7A.7.20** Hospitalisations by Indigenous status (number), Queensland, WA, SA, and public hospitals in the NT, 2001-02
- **Table 7A.7.21** Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, Queensland, WA, SA, and public hospitals in NT, 2002-03
- **Table 7A.7.22** Hospitalisation rate, per 1000 population, for mental and behavioural disorders (ICD-10-AM codes F00-F99), by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2002-03
- **Table 7A.7.23** Hospitalisations by Indigenous status (number), Queensland, WA, SA, and public hospitals in NT, 2002-03
- **Table 7A.7.24** Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2003-04
- **Table 7A.7.25** Hospitalisation rate, per 1000 population, for mental and behavioural disorders (ICD–10–AM codes F00–F99), by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2003-04
- **Table 7A.7.26** Hospitalisations by Indigenous status (number), Queensland, WA, SA, and public hospitals in the NT, 2003-04
- **Table 7A.7.27** Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, Queensland, WA, SA, and public hospitals in NT, 2004-05

- **Table 7A.7.28** Hospitalisation rate, per 1000 population, for mental and behavioural disorders (ICD-10-AM codes F00-F99), by Indigenous status, Queensland, WA, SA, and public hospitals in NT, 2004-05
- **Table 7A.7.29** Hospitalisations by Indigenous status (number), Queensland, WA, SA, and public hospitals in NT, 2004-05
- **Table 7A.7.30** Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2005-06
- **Table 7A.7.31** Hospitalisation rate, per 1000 population, for mental and behavioural disorders (ICD-10-AM codes F00-F99), by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2005-06
- **Table 7A.7.32** Hospitalisations by Indigenous status (number), Queensland, WA, SA, and public hospitals in the NT, 2005-06
- **Table 7A.7.33** Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2006-07
- **Table 7A.7.34** Hospitalisation rate, per 1000 population, for mental and behavioural disorders (ICD-10-AM codes F00-F99), by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2006-07
- **Table 7A.7.35** Hospitalisations by Indigenous status (number), Queensland, WA, SA, and public hospitals in the NT, 2006-07
- **Table 7A.7.36** Male Indigenous standardised hospital separation ratios for mental and behavioural disorders, Queensland, WA, SA, and public hospitals in NT, 2001-02 to 2006-07
- **Table 7A.7.37** Female Indigenous standardised hospital separation ratios for mental and behavioural disorders, Queensland, WA, SA, and public hospitals in NT, 2001-02 to 2006-07
- **Table 7A.7.38** Indigenous standardised hospital separation ratios for mental and behavioural disorders, Queensland, WA, SA, and public hospitals in NT, 2001-02 to 2006-07
- **Table 7A.7.39** Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05
- **Table 7A.7.40** Hospitalisation rate, per 1000 population, for mental and behavioural disorders (ICD-10-AM codes F00-F99), by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05
- **Table 7A.7.41** Hospitalisations by Indigenous status (number), NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05
- **Table 7A.7.42** Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2005-06
- **Table 7A.7.43** Hospitalisation rate, per 1000 population, for mental and behavioural disorders (ICD–10–AM codes F00–F99), by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2005-06
- **Table 7A.7.44** Hospitalisations by Indigenous status (number), NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2005-06
- **Table 7A.7.45** Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2006-07

Table 7A.7.46 Hospitalisation rate, per 1000 population, for mental and behavioural disorders (ICD-10-AM codes F00-F99), by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2006-07 **Table 7A.7.47** Hospitalisations by Indigenous status (number), NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2006-07 **Table 7A.7.48** Male Indigenous standardised hospital separation ratios for mental and behavioural disorders, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05, 2005-06, 2006-07 Female Indigenous standardised hospital separation ratios for mental and behavioural **Table 7A.7.49** disorders, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05. 2005-06. 2006-07 Indigenous standardised hospital separation ratios for mental and behavioural **Table 7A.7.50** disorders, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05. 2005-06. 2006-07 Mental health related problems managed by general practitioners, by Indigenous status **Table 7A.7.51** of the patient, Australia Mental health related emergency departments occasions of service in public hospitals, **Table 7A.7.52** by Indigenous status of the patient, Australia, 2005-06 Table 7A.7.53 Community mental health service contacts by Indigenous status, 2005-06 Table 7A.7.54 Episodes of residential mental health care by Indigenous status, 2005-06 Mental and behavioural disorders (ICD-10-AM codes F00-F99) death rates (per 100 **Table 7A.7.55** 000 population), age standardised, 2001-2005 Mental and behavioural disorders (ICD-10-AM codes F00-F99) deaths, by age and **Table 7A.7.56** jurisdiction, 2001-2005 Mental and behavioural disorders (ICD-10-AM codes F00-F99) deaths, by sex and **Table 7A.7.57** jurisdiction, 2001-2005 **Table 7A.7.58** Mental and behavioural disorders (ICD-10-AM codes F00-F99) deaths, 2001-2005 Table 7A.7.59 Indigenous deaths, selected causes, 2001–2005 **Table 7A.7.60** Mental and behavioural disorders, age standardised death rates, state of usual residence, 2003-2007 **Table 7A.7.61** Mental and behavioural disorders deaths, by age and jurisdiction, 2003–2007 **Table 7A.7.62** Mental and behavioural disorders deaths, by sex and jurisdiction, 2003–2007 **Table 7A.7.63** Mental and behavioural disorders deaths. 2003-2007 Indigenous deaths, selected causes, 2003–2007 Table 7A.7.64

7A.8 Suicide and self-harm

- **Table 7A.8.1** Intentional self-harm, age standardised death rates, by sex and State/Territory, 2003–2007
- Table 7A.8.2
 Intentional self-harm deaths, by age and State/Territory, 2003–2007
- Table 7A.8.3 Intentional self-harm deaths per 100 000, by sex and State/Territory, 2003–2007
- **Table 7A.8.4** Intentional self-harm, by State/Territory, 2003–2007

Table 7A.8.5	Standardised non-fatal hospitalisations for intentional self-harm by sex and Indigenous status, NSW, Victoria, Queensland, WA, SA and public hospitals in the NT
Table 7A.8.6	Standardised non-fatal hospitalisations for intentional self-harm by sex and Indigenous status, Qld, SA, WA, and public hospitals in the NT
Table 7A.8.7	Intentional self-harm death rates (per 100 000 population), age standardised, 2001–2005
Table 7A.8.8	Suicide deaths, by age and jurisdiction, 2001–2005
Table 7A.8.9	Intentional self-harm deaths, by sex and jurisdiction 2001–2005
Table 7A.8.10	Intentional self-harm (X60–X84) deaths, 2001–2005

Self-assessed health status, people aged 15 years and over, by age, 2004-05 (a), (b) Table 7A.1.1

		15	15–24	25	25–34	35	35–44	4	45-54	55 ar	55 and over	Total stanc	Total non-age- standardised	Total a	Total age-standardised	pəs
	-1	Indig.	Non-Indig Indig. Non-Indig Indig.	Indig.	Non-Indig		Non-Indig	Indig.	Non-Indig	Indig.	Non-Indig	Indig.	Non-Indig	Indig.	Non-Indig	Rate ratio
Self-assessed health status	healtl	h status														
Excellent	%	23*	31*	12*	24*	10*	22*	*/	19*	2*	13*	14*	21*	11	21	0.5*
Very good	%	36	39	37	40	28*	40*	18*	36*	14*	28*	*06	35*	25	36	0.7*
Subtotal	%	_* 69	*07	*64	* 49	38*	[*] 29	25*	25*	19*	414	43*	26*	36	22	.00
excellent/very																
Good	%	32*	24*	36*	58 *	38*	27*	38*	*62	32*	30*	32*	28*	35	28	1.3*
Fair	%	80	9	12*	7	18*	*ი	24*	*	31*	19*	16*	11*	20	11	1.8*
Poor	%	1(c)	_	3	2	*9	5*	12*	2*	19*	*O	*9	*4	10	4	2.2*
Subtotal fair/poor	%	0	_	15*	*	24*	*	36*	16*	50*	28*	*25	16*	29	15	1.9*
Total	%	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100
Total number	no.	92 067	2 636 199		69 772 2 761 354	59 057	2 899 566	39 578	39 578 2 705 580	33 167	4 529 678	293 641	293 641 15 532 377	293 641	293 641 15 532 377	:
	5				- 00 - 01 - 1	5	2000		2000013	5	0 10 0 20 1	1		10 100 01		

^{*} Represents results with statistically significant differences in the Indigenous/non-Indigenous comparisons.

Source: AIHW 2009, Aboriginal and Torres Strait Island Health Performance Framework: Detailed Analyses, Cat. no. IHW 22, Canberra.

⁽a) Self-reported data from the ABS 2004-05 National Aboriginal and Torres Strait Islander Health Survey.

⁽b) Information for some people aged 15–17 years was provided by a parent or guardian.

⁽c) Estimate has a relative standard error of between 25 and 50 per cent and should be used with caution. .. Not applicable.

Self-assessed health status, people aged 15 years and over, by sex, 2004-05 (a), (b) Table 7A.1.2

		Non-age-standardised	ndardised				Age-standardised	ardised		
	Males	Se	Females	ales	Males	səj		Females		
	Indig.	Indig. Non-Indig	Indig.	Non-Indig	Indig.	Indig. Non-Indig	Ratio	Indig. Non-Indig	-Indig	Ratio
Self-assessed health status										
	%	%	%	%	%	%		%	%	
Excellent	15*	21*	13*	21*	1	21	0.5*	1	22	0.5*
Very good	30*	34*	*62	36*	26	35	0.7*	25	37	0.7*
Subtotal excellent/very good	45*	55*	*24	28*	36	55	.7*	36	28	.00
Good	26*	*62	34*	27*	35	29	1.2*	34	27	1.3*
Fair	14	12*	17*	*	19	12	1.6*	20	7	1.9*
Poor	9	2	*_	4	o	2	2.1*	10	4	2.4*
Subtotal fair/poor	19*	16*	24*	15*	28	16	1.7*	30	15	2.0*
Total	100	100	100	100	100	100	:	100	100	:
Total number	139 595	7 666 352	154 046	7 866 025	139 595	139 595 7 666 352	:	154 046 7 866 025	36 025	:

^{*} Represents results with statistically significant differences in the Indigenous/non-Indigenous comparisons.

Source: AIHW 2009, Aboriginal and Torres Strait Island Health Performance Framework: Detailed Analyses, Cat. no. IHW 22, Canberra.

ATTACHMENT TABLES

⁽a) Self-reported data from the ABS 2004-05 National Aboriginal and Torres Strait Islander Health Survey.

⁽b) Information for some people aged 15-17 years was provided by a parent or guardian.

^{..} Not applicable.

Self-assessed health status, Indigenous people aged 15 years and over, by State and Territory, 2004-05 Table 7A.1.3

	NSM	Vic	Øld	WA	SA	Tas	ACT	IN	Aust
					Per cent				
Self-assessed health status									
Excellent	13	17	13	12	15	19	10	15	4
Very good	30	31	30	24	27	31	39	35	30
Subtotal	43	48	42	36	42	20	49	51	43
excellent/very good									
Good	8	30	35	42	35	27	34	34	35
Fair	16	15	16	15	17	41	10	13	16
Poor	7	9	9	7	9	0	8(c)	က	9
Subtotal fair/poor	23	22	23	22	23	23	17	16	22
Total	100	100	100	100	100	100	100	100	100
Total number (no.)	85 426	18 492	79 351	42 043	16 677	11 256	2 596	37 800	293 641

(a) Self-reported data from the ABS 2004-05 National Aboriginal and Torres Strait Islander Health Survey.

(b) Information for some people aged 15–17 years was provided by a parent or guardian.

(c) Estimate has a relative standard error of between 25 and 50 per cent and should be used with caution.

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

Source: AIHW 2009, Aboriginal and Torres Strait Island Health Performance Framework: Detailed Analyses, Cat. no. IHW 22, Canberra.

Self-assessed health status, Indigenous people aged 15 years and over, by remoteness, 2004-05 Table 7A.1.4

	Major cities	Inner regional	Major cities Inner regional Outer regional Total non-remote	tal non-remote	Remote	Remote Very remote Total remote	Total remote	Aust
				Per cent				
Self-assessed health status	sn							
Excellent	12	41	15	4	14	13	13	14
Very good	31	29	30	30	24	30	28	30
Subtotal excellent/very good	44	43	45	44	38	43	4	43
Good	32	34	33	33	38	4	40	35
Fair	16	16	16	16	17	13	4	16
Poor	∞	7	S	7	7	က	2	9
Subtotal fair/poor	25	23	21	23	24	16	19	22
Total (c)	100	100	100	100	100	100	100	100
Total number (no.)	89 350	58 372	65 700	213 422	24 456	55 763	80 219	293 641

(a) Self-reported data from the ABS 2004-05 National Aboriginal and Torres Strait Islander Health Survey.

(b) Information for some people aged 15-17 years was provided by a parent or guardian.

(c) Includes self-assessed health status 'not stated'.

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

Source: AIHW 2009, Aboriginal and Torres Strait Island Health Performance Framework: Detailed Analyses, Cat. no. IHW 22, Canberra.

ATTACHMENT TABLES

Age standardised self-assessed health status, by selected population characteristics, people aged 15 Non-% 100 100 100 100 100 100 100 100 100 100 100 Indigenous 8 8 100 100 100 100 100 100 100 100 100 100 100 100 % 8 Total Indigenous Rate 1.0 1.5 2.1 1. 2.1 2.0* 2.2* 1.6* 1.6 2.0* 1.2 1.2 1.5 ratio (c) 15 22 Non-Indigenous % 13 16 28 13 19 21 26 29 32 26 38 Indigenous % 20 26 34 9 35 4 32 37 31 Fair/poor Rate 1.3 <u>4</u>. 0.8 1.6 1.2 1.2 1.3 1.2 <u>4</u>. 1.2 1.2 7. ratio (c) Non-30 28 29 Indigenous % 28 34 27 27 29 24 31 31 Good Indigenou 45 % 35 35 41 38 36 36 36 39 25 33 34 4 years and over, 2004-05 (a), (b) Rate 0.5 0.7* 0.7* 0.7* 0.7 *****8.0 9.0 0.7* .07 9.0 9.0 9.0 ratio (c) Non-Indigenous % 53 48 69 59 57 44 62 57 4 52 8 47 42 Excellent/very good Whether has non-school qualification Highest year of school completed (e) 33 38 30 Main language spoken at home (d) 8 33 45 % 38 29 43 30 Indigenous Not in the labour force Household income Does not have nonschool qualification Year 9 or below (f) Has non-school **Table 7A.1.5 Employment** Unemployed qualification 1st quintile 5th quintile Employed Year 12 Year 10 English Year 11 Other

ATTACHMENT

Age standardised self-assessed health status, by selected population characteristics, people aged 15 years and over, 2004-05 (a), (b) Table 7A.1.5

)) (.)	(4)								
	Excellent/very good	poob		900 <u>9</u>			Fair/poor			Total	
	Indigenous	Non-	Non- Rate	Indigenou	Non-	Rate	Indigenous	Non-	Non- Rate	Indigenous	Non-
		Indigenous ratio (c)	ratio (c)		Indigenous ratio (c)	ratio (c)		Indigenous ratio (c)	ratio (c)		Indigenous
	%	%		%	%		%	%		%	%
Location											
Remote (g)	35	du	du	40	du	du	25	du	du	100	100
Non-remote	36	22	*9.0	33	28	1.2*	31	15	2.0*	100	100
Total people aged 18 years and over	34	55	*9.0	36	28	±8.	30	16	46.1	100	100
Total people aged 15 years and over	36	27	*9:0	35	28	1.3*	29	15	1.9*	100	100

^{*} Represents results with statistically significant differences in the Indigenous/non-Indigenous comparisons.

np Not published.

Source: AIHW 2009, Aboriginal and Torres Strait Island Health Performance Framework: Detailed Analyses, Cat. no. IHW 22, Canberra.

ATTACHMENT TABLES

⁽a) Self-reported data from the ABS 2004-05 National Aboriginal and Torres Strait Islander Health Survey.

⁽b) Information for some people aged 15–17 years was provided by a parent or guardian.

⁽c) Indigenous rate divided by non-Indigenous rate

⁽d) People aged 18 years and over.

⁽e) People not still at school.

⁽f) Includes people who never attended school.

⁽g) Non-Indigenous data were not collected in remote areas in the National Health Survey.

Table 7A.1.6 Age-standardised self-assessed health status, by number of long term health conditions, people aged 15 years and over, 2004-05 (a), (b)

							Number	of long term	n health	Number of Iona term health conditions (c)	(5)				
		0			1			2			34			Total	
	Indig	Non-Indig Rate Indig	Rate	Indig	Non-Indig	Rate	Indig	Non-Indig	Rate	Indig N	Non-Indig	Rate	Indig	Non-Indig	Rate
			ratio			ratio			ratio			ratio			ratio (c)
			(c)			(c)			(c)			(c)			
	%	%		%	%		%	%		%	%		%	%	
Self-assessed health status	health stat	sn													
Excellent	17(d)	36	0.5*	16	31	0.5	13	23	0.5*	9	13	0.5*	1	21	0.5*
Very good	32	8	0.9	30	42	0.7*	29	40	0.7*	21	32	.00	25	36	0.7*
Subtotal	49	70	0.7*	46	72	*9.0	42	63	0.7*	27	45	.00	36	57	.00
excellent/very															
nonfi															
Good	43	25	1.7*	42	23	1.8	36	28	1.3	34	32	1.	35	28	1.3*
Fair	(p) ₂	4(d)	2.0	12(d)	4	3.0*	16	7	2.3*	26	16	1.6*	20	7	1.8
Poor	(e)0	1(e)	0.3	1(e)	1(d)	0.7	(p)9	_	4.7*	13	7	2.0*	10	4	2.2*
Subtotal fair/poor	8(d)	2(d)	1.5	12(d)	5	2.6*	22	∞	2.7*	39	23	1.7*	29	15	46.1
Total	100	100	:	100	100	:	100	100	:	100	100	:	100	100	:
Total number	66 545	2 232 436	:	53 944 3 043	3 043 357	:	51 243	51 243 2 746 277	:	121 838 7 510 307	510 307	:	293 571	293 571 15 532 377	:

^{*} Represents results with statistically significant differences in the Indigenous/non-Indigenous comparisons.

ATTACHMENT

Self-reported data from the ABS 2004-05 National Aboriginal and Torres Strait Islander Health Survey. (a)

⁽b) Information for some people aged 15–17 years was provided by a parent or guardian.

⁽c) Includes chronic long-term conditions and injury only.

Estimate has a relative standard error of between 25 and 50 per cent and should be used with caution. **6**

Estimate has a relative standard error greater than 50 per cent and is too high for most practical purposes. (e)

Table 7A.1.6 Age-standardised self-assessed health status, by number of long term health conditions, people aged 15 years and over, 2004-05 (a), (b)

.. Not applicable.

Source: AIHW 2009, Aboriginal and Torres Strait Island Health Performance Framework: Detailed Analyses, Cat. no. IHW 22, Canberra.

Total expenditure on health services for Indigenous and non-Indigenous people, by type of health good or service, current prices, 2004-05 **Table 7A.1.7**

	70	Total expenditure (\$ million)	(\$ million)		Expenditure per person (\$)	son (\$)
Health good or service type	Indigenous	Non- Indigenous	Indigenous share (%)	Indigenous	Non-Indigenous	Indigenous share (%)
Hospitals	1 080.7	27 337.6	3.8	2 213	1 386	1.60
Public hospital (a)	1 048.6	21 042.7	4.7	2 147	1 067	2.01
Admitted patient services	799.4	16 226.8	4.7	1 637	823	1.99
Non-admitted patient services	249.2	4 815.8	4.9	510	244	2.09
Private hospital	32.1	6 295.0	0.5	99	319	0.21
High-level residential care	41.7	6 283.4	0.7	85	319	0.27
Patient transport	103.5	1 369.9	7.0	212	69	3.05
Medical services	164.6	14 483.5	1.1	337	734	0.46
Community health services	497.8	3 052.7	14.0	1 019	155	6.59
Dental and other health practitioners	78.0	7 811.8	1.0	160	396	0.40
Medications	109.4	11 056.4	1.0	224	. 561	0.40
Aids and appliances	18.6	2 591.4	0.7	38	131	0.29
Public health	88.9	1 350.3	6.2	182	89	2.66
Research	46.0	1 669.0	2.7	94	. 85	1.1
Health administration (nec)	74.6	2 254.5	3.2	153	114	1.34
Total	2 304.0	79 260.4	2.8	4 718	4 019	1.17

(a) Public hospital services exclude any dental services, community health services, patient transport services, public health and health research undertaken by the hospital.

.. Not applicable. nec Not elsewhere counted.

Source: AIHW 2008, Expenditures on Health for Aboriginal and Torres Strait Islander Peoples 2004-05, Cat. no. HWE 40, Health and welfare expenditure series no. 33, AIHW, Canberra. ATTACHMENT TABLES

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009

Expenditure per person on primary and secondary/tertiary health services for Indigenous and non-Indigenous people, by type of health good or service, current prices, 2004-05 (a), (b) **Table 7A.1.8**

		Primary			Secondary/tertiary	
		Expenditure per person (\$)	(\$) uc		Expenditure per person (\$)	(3)
Health good or service type	Indigenous	Non-	Ratio	Indigenous	Non-Indigenous	Ratio
		Indigenous				
Hospitals	255	122	2.09	1 958	1 264	1.55
Admitted patient services	na	na	na	1 703	1 142	1.49
Non-admitted patient services	255	122	2.09	255	122	2.09
High-level residential care	na	na	na	85	319	0.27
Patient transport	106	14	7.63	106	92	1.91
Medical services	285	488	0.58	52	246	0.21
Community health services	1 019	155	6.59	na	na	na
Dental services	116	256	0.45	na	na	na
Other health practitioners	22	70	0.31	22	02	0.31
Medications	203	465	0.44	21	96	0.22
Aids and appliances	35	109	0.32	4	. 22	0.16
Public health	182	89	2.66	na	na	na
Total	2 223	1 747	1.27	2 248	2 073	1.08

(a) Excludes expenditure on health administration not elsewhere included and research.

consultations, hospital emergency attendances, general practitioner ordered investigations and prescriptions, over the counter medicines etc.). (b) Primary health services include public and community health services and those flowing from a patient-initiated contact (general practitioner Secondary/tertiary services involve a referral within the health system or a hospital admission.

na Not available.

Source: AIHW 2008, Expenditures on Health for Aboriginal and Torres Strait Islander Peoples 2004-05, Cat. no. HWE 40, Health and welfare expenditure series no. 33, AIHW, Canberra.

Vaccination coverage estimates for children, NSW, Victoria, WA, SA and the NT combined, 31 December 2007(a), (b) Table 7A.1.9

		1 year old			2 years old			6 years old	
	Indigenous	Non-	Ratio (c)	Indigenous	Non-	Ratio (c)	Indigenous	Non-	Ratio (c)
		Indigenous			Indigenous			Indigenous	
	%	%		%	%		%	%	
Hepatitis B	91.8	94.6	1.0	2.96	96.1	1.0	:	:	:
DTP	83.5	92.3	*6:0	94	95.4	1.0	86.1	89.9	1.0
Polio	83.4	92.3	*6:0	93.9	95.4	1.0	86.1	06	1.0
HIB	91.2	94.6	1.0	92.2	95.2	1.0	:	:	:
MMR	:	:	:	93.3	94.4	1.0	9.98	89.9	1.0
All vaccines	82.7	91.8	*6:0	90.6	93.2	1.0	85.2	89.3	1.0
									I

- (a) Three-month cohorts, for cohorts born between 1 July and 30 September 2006, 1 July and 30 September 2005, and 1 July and 30 September 2001, respectively.
- (b) Data from the ACT, Queensland and Tasmania have not been included in this measure because Indigenous status data from these jurisdictions are not routinely reported or transferred to the Australian Childhood Immunisation Register.
- (c) Ratio coverage estimate for Indigenous children divided by coverage estimate for non-Indigenous children.

.. Not applicable.

AIHW 2009, Aboriginal and Torres Strait Islander Health Performance Framework: Detailed Analyses, Cat. no. IHW 22, Canberra, derived from ACIR Medicare Australia data. Source:

Table 7A.1.10 Vaccination coverage estimates for selected diseases for children 'fully vaccinated' at 1 year of age, NSW, Victoria, WA, SA and the NT, 31 December 2007(a), (b)

								S	State/Territory	rritory								
		NSW			Vic			WA			SA			N		NSW,	NSW, Vic, WA, SA, NT (c)	SA,
	Indig	Indig Non- Ratio Indig Non- Ratio Indig (d) Indig (d)	Ratio (d)	Indig	Non- Indig		Indig	Non- F Indig	Non- Ratio Indig Indig (d)	Indig	Non- Ratio Indig (d)	-	Indig	Non- Ratio Indig (d)	Ratio (d)	Indig	Non- Indig	Ratio (d)
	%	%		%	%		%	%		%	%		%	%		%	%	
Hepatitis B	92.7	94.9	1.0	1.0 93.8	94.8	1.0	88.6	93.2	1.0	87.2	94.7	6.0	94.5	96.1	1.0	91.8	94.6	1.0
DTP	83.8	92.3	*6:0	87.0	93.2	6.0	9.62	90.1	*6.0	82.6	97.6	6.0	9.98	94.2	6.0	83.5	92.3	*6 [.] 0
Polio	83.5	92.3	*6.0	87.0	93.1	6.0	9.62	0.06	*6.0	82.6	97.6	6.0	9.98	94.2	6.0	83.4	92.3	*6 [.] 0
HIB	92.7	94.9	1.0	93.8	94.8	1.0	86.5	93.1	6.0	9.98	94.9	6.0	94.2	96.1	1.0	91.2	94.6	1.0
MMR	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:
All vaccines	83.5	92.0	*6.0	86.4	92.3	6.0	78.2	89.5	*6.0	78.5	92.0	6.0	9.98	93.8	0.9	82.7	91.8	*6.0

(a) Three-month cohort, for cohort born between 1 July and 30 September 2006.

(b) Data from the ACT, Queensland and Tasmania have not been included in this measure because Indigenous status data from these jurisdictions are not routinely reported or transferred to the Australian Childhood Immunisation Register.

(c) Data for these five states and territories should not be assumed to represent the immunisation experience in the other jurisdictions.

(d) Ratio — coverage estimate for Indigenous children divided by coverage estimate for non-Indigenous children.

.. Not applicable.

AIHW 2009, Aboriginal and Torres Strait Islander Health Performance Framework: Detailed Analyses, Cat. no. IHW 22, Canberra, derived from ACIR Medicare Australia data.

ATTACHMENT TABLES

Table 7A.1.11 Vaccination coverage estimates for selected diseases for children 'fully vaccinated' at 2 years of age, NSW, Victoria, WA, SA and the NT, 31 December 2007(a), (b)

								S	State/Territory	rritory								
		NSN			Vic			WA			SA			N		NSW,	NSW, Vic, WA, SA, NT (c)	SA,
	Indig	Indig Non- Ratio Indig Non- Ratio Indig (d) Indig (d)	Ratio (d)	Indig	Non- Indig	Ratio (d)	Indig	Non- Ratio Indig (d)	-	Indig	Non- Ratio Indig (d)	Ratio (d)	Indig	Non- Indig	Ratio (d)	Indig	Non- Indig	Ratio (d)
	%	%		%	%		%	%		%	%		%	%		%	%	
Hepatitis B	96.4	0.96	1.0	6.96	9.96	1.0	95.9	95.2	1.0	9.96	92.6	1.0	97.9	96.6	1.0	2.96	96.1	1.0
DTP	93.0	95.3	1.0	93.8	0.96	1.0	93.5	94.6	1.0	95.0	95.2	1.0	96.1	95.5	1.0	94.0	95.4	1.0
Polio	92.9	95.3	1.0	93.8	95.9	1.0	93.5	94.6	1.0	95.0	95.1	1.0	96.1	92.5	1.0	93.9	95.4	1.0
HIB	92.9	95.5	1.0	91.9	95.1	1.0	89.5	94.7	6.0	89.1	94.4	6.0	94.8	94.8	1.0	92.2	95.2	1.0
MMR	92.7	94.1	1.0	95.7	95.3	1.0	91.9	93.3	1.0	89.9	94.3	1.0	96.1	95.2	1.0	93.3	94.4	1.0
All vaccines	6.06	93.0	1.0	91.3	94.1	1.0	87.3	91.7	1.0	87.4	93.0	6.0	94.1	94.1	1.0	9.06	93.2	1.0

(a) Three-month cohort, for cohort born between 1 July and 30 September 2005.

(b) Data from the ACT, Queensland and Tasmania have not been included in this measure because Indigenous status data from these jurisdictions are not routinely reported or transferred to the Australian Childhood Immunisation Register.

(c) Data for these five states and territories should not be assumed to represent the immunisation experience in the other jurisdictions.

(d) Ratio — coverage estimate for Indigenous children divided by coverage estimate for non-Indigenous children.

.. Not applicable.

AIHW 2009, Aboriginal and Torres Strait Islander Health Performance Framework: Detailed Analyses, Cat. no. IHW 22, Canberra, derived from ACIR Medicare Australia data.

ATTACHMENT TABI ES

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009

Table 7A.1.12 Vaccination coverage estimates for selected diseases for children 'fully vaccinated' at 6 years of age, NSW, Victoria, WA, SA and the NT, 31 December 2007(a), (b)

								S	State/Territory	rritory								
	NSW Vic	NSN			Vic			WA			SA			NT		NSW,	NSW, Vic, WA, SA, NT (c)	SA,
	Indig	Non- Indig	Ratio (d)	Indig	Non- Indig	Ratio (d)	dig	Non- Ratio Indig (d)		Indig	Non- Indig	Non- Ratio Indig Indig (d)		Non- Ratio Indig (d)	l	Indig	Non- Indig	Ratio (d)
	%	%		%	%		%	%		%	%		%	%		%	%	
Hepatitis B	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:
DTP	88.1	86.8		1.0 88.5 91.8	91.8	1.0	80.5	86.3	6.0	6.69	88.5	*8.0	93.6	85.3	1.	86.1	89.9	1.0
Polio	87.7	86.8	1.0	88.5	92.0	1.0	81.2	86.7	0.9	69.2	88.7	*8.0	93.6	85.5	[.	86.1	0.06	1.0
HIB	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:
MMR	88.9	86.8	1.0	89.2	91.9	1.0	81.2	86.5	6.0	6.69	88.7	*8.0	93.6	85.1	[:	9.98	89.9	1.0
All vaccines	86.7	89.1	1.0	88.5	91.4	1.0	79.5	85.5	6.0	69.2	88.1	.8%	93.3	84.7	1.1	85.2	89.3	1.0

(a) Three-month cohort, for cohort born between 1 July and 30 September 2001.

(b) Data from the ACT, Queensland and Tasmania have not been included in this measure because Indigenous status data from these jurisdictions are not routinely reported or transferred to the Australian Childhood Immunisation Register.

(c) Data for these five states and territories should not be assumed to represent the immunisation experience in the other jurisdictions.

(d) Ratio — coverage estimate for Indigenous children divided by coverage estimate for non-Indigenous children.

.. Not applicable.

AIHW 2009, Aboriginal and Torres Strait Islander Health Performance Framework: Detailed Analyses, Cat. no. IHW 22, Canberra, derived from ACIR Medicare Australia data.

ATTACHMENT TABLES

Immunisation rates Indigenous people aged 50 years and over and non-Indigenous people aged 65 years and over, 2004-05 **Table 7A.1.13**

	Indigenous		Non-Indigenous
	50–64 years	65+ years	65+ years
Had influenza vaccination in last 12 months	52	84	73
Had influenza vaccination but not in last 12 months	2 4	*_	5 = 2
Had influenza vaccination but known if in last 12 months (a)	*1	**	*
Never had vaccination for influenza	30	*	15
Total	100	100	100
Had pneumonia vaccination in last 5 years	30	48	43
Had pneumonia vaccination but not in last 5 years	*	ď	_
Had pneumonia vaccination but not known if in last 5 years (b)	7	ΩŽ	
Never had pneumonia vaccination	63	45	53
Total	100	100	100
Total number	36 917	12 237	2 430 253

^{*} Estimate has a relative standard error or 25 to 50 per cent and should be used with caution. ** Estimate has a relative standard error of greater than 50 per cent and is considered too unreliable for general use.

⁽a) Includes not known if ever had influenza vaccination.

⁽b) Includes not known if ever had pneumonia vaccination.

⁻ Nil or rounded to zero.

AIHW 2009, Aboriginal and Torres Strait Islander Health Performance Framework: Detailed Analyses, Cat. no. IHW 22, Canberra, derived from ABS 2004-05 NATSIHS and ABS 2004-05 NHS.

Table 7A.1.14 Health care services Indigenous people sought when they had a health problem, by remoteness, 2004–05 (a)

		Α	II ages		18 yea	rs and over	
	Unit	Non-remote (b)	Remote (c)	Total	Non-remote (b)	Remote (c)	Total
Hospital							
Estimate	'000	12.7	20.2	33.0	6.6	11.7	18.3
Proportion	%	3.7	16.1	7.0	3.6	16.1	7.1
RSE	%	15.1	16.8	11.6	16.4	17.3	12.2
Doctor							
Estimate	'000	264.6	18.8	283.4	138.5	9.6	148.2
Proportion	%	76.0	14.9	59.8	74.7	13.2	57.4
RSE	%	1.9	13.0	2.0	2.0	15.0	2.1
Aboriginal medical	service						
Estimate	'000	60.6	83.1	143.7	32.4	48.2	80.7
Proportion	%	17.4	66.0	30.3	17.5	66.3	31.2
RSE	%	8.0	5.2	4.8	7.7	5.4	4.7
Other (d)							
Estimate	'000	2.3	2.0	4.3	1.8	1.6	3.4
Proportion	%	0.7	1.6	0.9	1.0	2.2	1.3
RSE	%	26.2	47.5	25.9	27.1	53.6	28.9
Did not seek health	care						
Estimate	'000	7.2	1.5	8.7	5.7	1.3	7.0
Proportion	%	2.1	1.2	1.8	3.1	1.8	2.7
RSE	%	13.4	24.7	11.7	14.8	26.3	12.9
Not stated							
Estimate	'000	0.8	0.3	1.1	0.4	0.3	0.7
Proportion	%	0.2	0.2	0.2	0.2	0.4	0.3
RSE	%	38.0	82.5	35.9	45.5	84.9	44.5
Total							
Estimate	'000	348.3	126.0	474.3	185.5	72.8	258.3
Proportion	%	100.0	100.0	100.0	100.0	100.0	100.0
RSE	%	_	_	_	_	_	_

⁽a) Remoteness areas are derived from the Australian Standard Geographical Classification (ASGC) developed by the ABS. The ASGC Remoteness classification identifies a region in Australia as having a particular degree of remoteness. Remoteness areas comprise five categories: major cities, inner regional, outer regional, remote, and very remote. The degree of remoteness of an area is determined using the Accessibility/Remoteness Index of Australia (ARIA). For more information on how ARIA is defined see the Information Papers ABS Views on Remoteness, 2001 (Cat. no. 1244.0) and Outcomes of ABS Views on Remoteness consultation, Australia (Cat. no. 1244.0.00.001).

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

⁽b) Includes 'major city', inner regional' and 'outer regional' categories of the ASGC.

⁽c) Includes 'remote' and 'very remote' categories of the ASGC.

⁽d) Includes traditional healers.

⁻ Nil or rounded to zero. **RSE** Relative standard error.

Time since last consulted GP/specialist, people aged 18 years and over, age standardised, by Indigenous status and remoteness, 2001, 2004-05 (a) **Table 7A.1.15**

				Indigenous	snou				Non-Indigenous	nons
	Remote (b)	(q)	Non-remote (c)	(c) e	Total		AS Total	le le	AS Total	
	Rate (%)	RSE	Rate (%)	RSE	Rate (%)	RSE	Rate (%)	RSE	Rate (%)	RSE
2004–05										
Visited in previous 2 weeks	24.5	6.2	24.9	4.5	24.8	3.7	28.7	4.2	25.1	1.7
2 weeks to less than 3 months	23.5	6.1	25.3	4.5	24.8	3.6	26.7	4.0	29.1	1.6
3 months to less than 6 months	12.1	9.5	15.8	7.1	14.7	5.9	13.4	6.7	16.3	2.2
6 months to less than 12 months	11.8	10.6	14.2	5.6	13.5	5.0	12.1	5.6	14.5	2.9
12 months or more	24.8	6.5	18.9	5.6	20.6	4.2	17.8	4.7	14.5	2.5
Never	1.8	22.3	0.4	36.5	0.8	19.1	0.7	21.6	0.2	19.5
Total (d)	100.0		100.0		100.0		100.0		100.0	
2001										
Visited in previous 2 weeks	19.4	10.0	22.7	8.9	21.8	5.3	26.6	9.9	24.5	1 .
2 weeks to less than 3 months	15.8	9.9	29.8	5.1	25.9	4.2	26.3	5.2	29.2	4.
3 months to less than 6 months	9.7	7.5	16.5	7.1	14.6	0.9	13.3	7.4	16.0	1.9
6 months to less than 12 months	11.6	9.4	14.2	7.5	13.5	0.9	11.6	7.4	13.8	2.0
12 months or more	30.2	9.0	15.4	7.4	19.4	5.0	18.8	6.2	15.9	1.6
Never	8.7	15.6	0.7	22.7	2.9	13.0	2.1	15.9	0.3	13.8
Total (d)	100.0		100.0		100.0		100.0		100.0	

regional, outer regional, remote, and very remote. The degree of remoteness of an area is determined using the Accessibility/Remoteness Index of Australia (ARIA). For more information on how ARIA is defined see the Information Papers ABS Views on Remoteness, 2001 (Cat. no. 1244.0) and Outcomes of ABS classification identifies a region in Australia as having a particular degree of remoteness. Remoteness areas comprise five categories: major cities, inner (a) Remoteness areas are derived from the Australian Standard Geographical Classification (ASGC) developed by the ABS. The ASGC Remoteness Views on Remoteness consultation, Australia (Cat. no. 1244.0.00.001).

(b) Includes 'remote' and 'very remote' categories of the ASGC.

(c) Includes 'major city', inner regional' and 'outer regional' categories of the ASGC.

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009 Time since last consulted GP/specialist, people aged 18 years and over, age standardised, by Indigenous status and remoteness, 2001, 2004-05 (a) **Table 7A.1.15**

(d) Includes 'time since last consultation' not known.

AS Age standardised. RSE Relative standard error.

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

Time since last consulted dentist, people aged two years and over, age standardised, by Indigenous status and remoteness, 2001, 2004-05 (a) **Table 7A.1.16**

				Indigenous	snou				Non-Indigenous	snou
	Remote (b)	(q)	Non-remote (c)	(c) e	Total		AS Total	/e	AS Total	
	Rate (%)	RSE	Rate (%)	RSE	Rate (%)	RSE	Rate (%)	RSE	Rate (%)	RSE
2004–05										
Less than 6 months	21.1	6.2	22.7	4.2	22.3	3.4	20.0	4.1	28.9	4.
6 months to less than two years	25.1	5.3	33.9	3.0	31.6	2.6	29.4	3.2	36.9	1.1
2 years or more	25.3	6.3	29.4	3.3	28.3	2.9	35.7	3.5	28.8	1.2
Never (d)	26.8	5.9	13.1	5.2	16.8	4.0	na	na	па	na
Total (e)	100.0		100.0		100.0		100.0		100.0	
2001										
Less than 6 months	24.4	10.1	24.2	4.6	24.2	3.7	21.5	4.5	30.1	1.3
6 months to less than two years	24.1	9.3	30.6	4.9	28.9	3.5	26.5	4.3	34.0	1.
2 years or more	27.8	9.4	34.7	4.1	32.8	3.1	42.8	3.9	31.3	<u>+</u>
Never (d)	21.5	11.1	9.6	7.9	12.8	5.3	na	na	na	na
Total (e)	100.0		100.0		100.0		100.0		100.0	

regional, remote, and very remote. The degree of remoteness of an area is determined using the Accessibility/Remoteness Index of Australia (ARIA). For more (a) Remoteness areas are derived from the Australian Standard Geographical Classification (ASGC) developed by the ABS. The ASGC Remoteness classification identifies a region in Australia as having a particular degree of remoteness. Remoteness areas comprise five categories: major cities, inner regional, outer information on how ARIA is defined see the Information Papers ABS Views on Remoteness, 2001 (Cat. no. 1244.0) and Outcomes of ABS Views on Remoteness consultation, Australia (Cat. no. 1244.0.00.001).

(b) Includes 'remote' and 'very remote' categories of the ASGC.

(c) Includes 'major city', inner regional' and 'outer regional' categories of the ASGC.

(d) Statistical testing indicates that this data item is not suitable for age standardisation.

(e) Includes 'time since last consultation' not known.

na Not available for publication but included in totals where applicable. RSE Relative standard error.

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

Table 7A.1.17 Reasons for not going to a GP in the last 12 months, Indigenous people aged 18 years and over, by remoteness, 2004–05 (a)

	R	Remote (b)		No	Non-remote (c)			Total	
	000,	Rate (%)	RSE	000,	Rate (%)	RSE	000,	Rate (%)	RSE
Cost	0.3	3.4	0.99	7.0	14.2	12.7	7.3	12.4	12.4
Personal reasons (d)	3.6	36.3	11.9	19.7	40.1	6.5	23.2	39.5	5.8
Logistical reasons (e)	4.4	44.9	10.3	10.5	21.5	10.7	15.0	25.4	8.3
Other reason(s)	2.2	22.5	14.3	13.7	27.9	7.5	15.9	27.0	6.8
Decided not to seek care	0.5	5.2	24.6	5.6	4.11	12.3	6.1	10.3	11.5
Total (f)	9.8	100.0		49.0	100.0		58.9	100.0	

Remoteness areas are derived from the Australian Standard Geographical Classification (ASGC) developed by the ABS. The ASGC Remoteness classification identifies a region in Australia as having a particular degree of remoteness. Remoteness areas comprise five categories: major cities, inner regional, outer regional, remote, and very remote. The degree of remoteness of an area is determined using the Accessibility/Remoteness Index of Australia (ARIA). For more information on how ARIA is defined see the Information Papers ABS Views on Remoteness, 2001 (Cat. no. 1244.0) and Outcomes of ABS Views on Remoteness consultation, Australia (Cat. no. 1244.0.00.001). <u>(a</u>

Includes 'remote' and 'very remote' categories of the ASGC. **Q**

(c) Includes 'major city', inner regional' and 'outer regional' categories of the ASGC.

(d) Personal reasons include: too busy (work, personal or family responsibilities), discrimination, service not culturally appropriate, language problems, dislikes service or health professional, afraid, embarrassed, or felt service would be inadequate.

(e) Includes transport/distance, service not available in area, waiting time too long, or service not available at the time required.

(f) Components may not add to total as people may have reported more than one reason for not going to a GP.

RSE Relative standard error.

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

ATTACHMENT

Table 7A.1.18 Reasons for not going to a dentist in the last 12 months, Indigenous people aged 18 years and over, by remoteness, 2004–05 (a)

	R	Remote (b)		No	Non-Remote (c)			Total	
	000,	Rate (%)	RSE	000,	Rate (%)	RSE	000,	Rate (%)	RSE
Cost	2.7	16.2	19.1	21.0	33.7	9.9	23.7	30.0	6.1
Personal reasons (d)	5.7	34.2	10.4	24.9	39.9	0.9	30.6	38.7	5.2
Logistical reasons (e)	89.	52.9	6.5	16.5	26.6	7.2	25.3	32.1	5.4
Other reason(s)	1.0	6.2	31.0	3.5	5.6	17.8	4.5	5.8	15.6
Decided not to seek care	1.4	8.6	19.1	0.6	14.5	14.0	10.4	13.2	12.3
Not stated	I	I	I	I	I	I	I	I	I
Total (f)	16.6	100.0		62.3	100.0		78.9	100.0	

regional, remote, and very remote. The degree of remoteness of an area is determined using the Accessibility/Remoteness Index of Australia (ARIA). For more Remoteness areas are derived from the Australian Standard Geographical Classification (ASGC) developed by the ABS. The ASGC Remoteness classification identifies a region in Australia as having a particular degree of remoteness. Remoteness areas comprise five categories: major cities, inner regional, outer nformation on how ARIA is defined see the Information Papers ABS Views on Remoteness, 2001 (Cat. no. 1244.0) and Outcomes of ABS Views on Remoteness consultation, Australia (Cat. no. 1244.0.00.001). (a)

Includes 'remote' and 'very remote' categories of the ASGC. **a**

(c) Includes 'major city', inner regional' and 'outer regional' categories of the ASGC.

(d) Personal reasons include: too busy (work, personal or family responsibilities), discrimination, service not culturally appropriate, language problems, dislikes service or health professional, afraid, embarrassed, or felt service would be inadequate.

(e) Includes transport/distance, service not available in area, waiting time too long, or service not available at the time required.

(f) Components may not add to total as people may have reported more than one reason for not going to a dentist.

RSE Relative standard error.

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

Table 7A.1.19 Reasons for not going to other health professionals in the last 12 months, Indigenous people aged 18 years and over, by remoteness, 2004–05 (a) (b)

	u.	Remote (c)		No	Non-remote (d)			Total	
	000,	Rate (%)	RSE	000,	Rate (%)	RSE	000,	Rate (%)	RSE
Cost	0.3	0.9	48.9	8.6	34.2	9.5	8.9	29.5	9.8
Personal reasons (e)	1.9	38.7	13.3	10.6	42.1	8.0	12.5	41.5	7.1
Logistical reasons (f)	2.3	45.8	12.0	3.5	13.7	18.0	2.7	19.0	12.3
Other reason(s)	0.5	6.9	33.8	2.6	10.1	19.8	3.0	10.0	17.5
Decided not to seek care	6.0	17.7	24.2	4.5	18.0	14.0	5.4	17.9	12.3
Total	5.0	100.0		25.2	100.0		30.2	100.0	

(a) Remoteness areas are derived from the Australian Standard Geographical Classification (ASGC) developed by the ABS. The ASGC Remoteness classification identifies a region in Australia as having a particular degree of remoteness. Remoteness areas comprise five categories: major cities, inner regional, outer regional, remote, and very remote. The degree of remoteness of an area is determined using the Accessibility/Remoteness Index of Australia (ARIA). For more information on how ARIA is defined see the Information Papers ABS Views on Remoteness, 2001 (Cat. no. 1244.0) and Outcomes of ABS Views on Remoteness consultation, Australia (Cat. no. 1244.0.00.001).

opticians/optometrists, osteopaths, physiotherapists/hydrotherapists, psychologists, social workers/welfare officers, speech therapists/pathologists, and Other health professionals include Aboriginal health workers, accredited counsellors, acupuncturists, alcohol and drug workers, audiologists/audiometrists, chemists, chiropodists/podiatrists, chiropractors, dieticians/nutritionists, herbalists, hypnotherapists, naturopaths, nurses, occupational therapists, raditional healers. <u>a</u>

Includes 'remote' and 'very remote' categories of the ASGC. <u>ပ</u> (d) Includes 'major city', inner regional' and 'outer regional' categories of the ASGC.

Personal reasons include: too busy (work, personal or family responsibilities), discrimination, service not culturally appropriate, language problems, dislikes service or health professional, afraid, embarrassed, or felt service would be inadequate. (e)

(f) Includes transport/distance, service not available in area, waiting time too long, or service not available at the time required.

(g) Components may not add to total as people may have reported more than one reason for not going to other health professionals.

RSE Relative Standard Error.

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

ATTACHMENT

Table 7A.1.20 Number and proportion of discrete Indigenous communities that reported having Indigenous health workers and medical professionals visit or work within their community, 2006 (a)

Type of health professional	Discrete Indiger communities		Population of comr	nunities
Frequency of visit	No.	%	No.	%
Male Indigenous health worker				
Daily	75	6.3	34 300	36.9
Weekly/fortnightly	47	4	4 991	5.4
Monthly	10	0.8	1 331	1.4
3 monthly	5	0.4	448	0.5
Less than 3 monthly	11	0.9	1 906	2.1
Female Indigenous health worker				
Daily	121	10.2	45 587	49
Weekly/fortnightly	38	3.2	3 256	3.5
Monthly	14	1.2	1 335	1.4
3 monthly	4	0.3	119	0.1
Less than 3 monthly	3	0.3	820	0.9
Registered nurse				
Daily	120	10.1	44 923	48.3
Weekly/fortnightly	64	5.4	8 054	8.7
Monthly	17	1.4	1 663	1.8
3 monthly	2	0.2	150	0.2
Less than 3 monthly	8	0.7	933	1.0
Doctor				
Daily	14	1.2	11 344	12.2
Weekly/fortnightly	104	8.8	25 969	27.9
Monthly	58	4.9	11 478	12.3
3 monthly	6	0.5	2 550	2.7
Less than 3 monthly	10	0.8	1 860	2.0

⁽a) Proportions were calculated by dividing the number of communities (population) in each category by the total number of communities in the ABS 2006 CHINS (total population) and multiplied by 100. Data were collected from a total of 1187 discrete Indigenous communities with a combined population of approximately 92 960 people.

Source: ABS 2007, Housing and Infrastructure in Aboriginal and Torres Strait Islander Communities, Australia, Cat. no. 4710.0, Canberra.

Table 7A.1.21 Employment in selected health-related occupations, Indigenous people aged 15 years and over, 2006

	Indigenous		All people
	%	no.	no.
Medical practitioners			
General medical practitioner	0.2	60	29 920
Other –specialist, psychiatrist, surgeon	0.2	40	25 155
Midwifery and nursing professionals			
Midwife	0.4	53	13 164
Nurse educator or researcher	0.5	17	3 762
Nurse manager	0.4	46	10 899
Registered nurse	0.6	1 107	172 575
Health therapy professionals			
Dental practitioner	0.2	16	9 065
Dental hygienist, technician or therapist	0.4	22	5 169
Dental assistant	1.1	171	15 378
Physiotherapist	0.4	54	12 286
Psychologist	0.3	39	13 437
Health and welfare service managers	1.3	141	10 807
Health diagnostic and promotion professionals			
Medical imaging professional	0.2	18	10 147
Environmental health officer	2.5	98	3 907
Occupational health and safety advisor	0.7	50	6 840
Health promotion officer	11.2	437	3 898
Health and welfare support workers			
Aboriginal and Torres Strait Islander health worker	95.5	965	1 010
Ambulance officer or paramedic	1.7	153	9 098
Diversional therapist	1.0	41	4 078
Enrolled or mothercraft nurse	1.1	215	19 397
Massage therapist	0.7	54	8 200
Hospital orderly	1.7	165	9 939
Nursing support worker	2.0	442	22 380
Personal care assistant	1.5	339	21 956
Other nursing support or personal care worker	1.0	39	3 899
Total	1.0	4 891	492 342

Source: ABS and AIHW 2008, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS Cat. no. 4704.0 and AIHW Cat. no. IHW 21, Canberra, derived from the ABS 2006 Census of Population and Housing.

Table 7A.2.1 Standardised hospitalisations for potentially preventable chronic conditions, per 1000 people, by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05, 2005-06, 2006-07 (a) (b) (c)

σσ, 2σσσ στ (ω) (σ)					
	Unit	Indigenous	Non- Indigenous (d)	Total	Rate ratio
2006-07					
Asthma	rate	4.08	1.74	1.81	2.34
Congestive cardiac failure	rate	6.29	2.12	2.17	2.97
Diabetes complications	rate	165.42	20.81	22.63	7.95
Chronic obstructive pulmonary diseases	rate	12.00	2.64	2.75	4.54
Angina	rate	5.71	1.86	1.92	3.06
Iron deficiency anaemia	rate	1.79	1.27	1.28	1.41
Hypertension	rate	0.80	0.30	0.31	2.63
Nutritional deficiencies (e)	rate	0.03	0.01	0.01	3.93
Total for potentially preventable chronic conditions (f)	rate	186.94	29.27	31.32	6.39
Total hospitalisations for all conditions	rate	833.08	358.06	367.87	2.33
Hospitalisations for potentially preventabl chronic conditions as a proportion of hospitalisations for all conditions	e %	17.38	8.24	8.56	
2005-06					
Asthma	rate	4.82	1.89	1.89	2.56
Congestive cardiac failure	rate	6.73	1.93	1.98	3.48
Diabetes complications	rate	154.78	18.06	19.66	8.57
Chronic obstructive pulmonary diseases	rate	13.44	2.58	2.68	5.20
Angina	rate	5.18	1.86	1.90	2.79
Iron deficiency anaemia	rate	1.60	1.09	1.10	1.47
Hypertension	rate	1.03	0.28	0.29	3.67
Nutritional deficiencies (e)	rate	0.02	0.01	0.01	3.47
Total for potentially preventable chronic conditions (f)	rate	178.42	26.37	28.15	6.77
Total hospitalisations for all conditions	rate	804.53	342.82	349.24	2.35
Hospitalisations for potentially preventable chronic conditions as a proportion of hospitalisations for all conditions	e %	16.90	7.90	8.20	
2004-05					
Asthma	rate	4.70	1.85	1.90	2.54
Congestive cardiac failure	rate	6.23	1.95	2.00	3.19

Table 7A.2.1 Standardised hospitalisations for potentially preventable chronic conditions, per 1000 people, by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05, 2005-06, 2006-07 (a) (b) (c)

rate	130.63	15.76	17.13	8.29
rate	12.63	2.62	2.71	4.83
rate	5.32	2.02	2.07	2.63
rate	1.39	1.05	1.05	1.33
rate	1.03	0.29	0.30	3.53
rate	0.01	0.01	0.01	2.07
rate	154.20	24.43	25.98	6.31
rate	740.96	336.41	342.22	2.20
%	15.82	7.44	7.72	
	rate rate rate rate rate rate rate	rate 12.63 rate 5.32 rate 1.39 rate 1.03 rate 0.01 rate 154.20 rate 740.96	rate 12.63 2.62 rate 5.32 2.02 rate 1.39 1.05 rate 1.03 0.29 rate 0.01 0.01 rate 154.20 24.43 rate 740.96 336.41	rate 12.63 2.62 2.71 rate 5.32 2.02 2.07 rate 1.39 1.05 1.05 rate 1.03 0.29 0.30 rate 0.01 0.01 0.01 rate 154.20 24.43 25.98 rate 740.96 336.41 342.22

⁽a) Hospitalisation rates are directly age standardised using 2001 Australian population.

⁽b) Data are based on state/territory of usual residence.

⁽c) See table 7A.16 for the ICD-10-AM codes used to classify potentially preventable conditions.

⁽d) Includes hospitalisations identified as not Indigenous as well as those with a 'not stated' Indigenous status.

⁽e) The total is not the sum of the individual conditions because diabetes complications overlap other categories.

Table 7A.2.2 Standardised hospitalisations for potentially preventable chronic conditions, per 1000 people, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2005-06, 2006-07 (a), (b), (c), (d)

	Unit	Indigenous	Non- Indigenous (e)	Total	Rate ratio
2006-07					
Asthma	rate	3.86	1.55	1.65	2.50
Congestive cardiac failure	rate	7.60	2.02	2.14	3.76
Diabetes complications	rate	225.64	22.34	26.22	10.10
Chronic obstructive pulmonary diseases	rate	12.60	2.65	2.83	4.75
Angina	rate	6.07	2.10	2.19	2.89
Iron deficiency anaemia	rate	1.90	1.18	1.21	1.61
Hypertension	rate	1.05	0.30	0.31	3.52
Nutritional deficiencies	rate	0.03	0.01	0.01	3.44
Total for potentially preventable chronic conditions (f)	rate	247.71	30.65	34.92	8.08
Total hospitalisations for all conditions	rate	1 038.41	355.77	375.21	2.92
Hospitalisations for potentially preventabl chronic conditions as a proportion of hospitalisations for all conditions	e %	19.16	8.58	9.26	
2005-06					
Asthma	rate	4.93	1.81	1.89	2.72
Congestive cardiac failure	rate	8.45	1.88	1.99	4.49
Diabetes complications	rate	211.47	19.24	22.64	10.99
Chronic obstructive pulmonary diseases	rate	14.24	2.69	2.85	5.30
Angina	rate	5.92	2.04	2.11	2.91
Iron deficiency anaemia	rate	1.84	0.99	1.01	1.85
Hypertension	rate	1.15	0.29	0.31	3.96
Nutritional deficiencies	rate	0.03	0.01	0.01	5.99
Total for potentially preventable chronic conditions (f)	rate	236.49	27.67	31.40	8.55
Total hospitalisations for all conditions	rate	1 018.52	342.87	357.21	2.97
Hospitalisations for potentially preventabl chronic conditions as a proportion of hospitalisations for all conditions	e %	18.29	8.18	8.84	

⁽a) Hospitalisation rates are directly age standardised using 2001 Australian population.

⁽b) Data are based on state/territory of usual residence.

⁽c) See table 7A.2.16 for the ICD-10-AM codes used to classify potentially preventable conditions.

Table 7A.2.2 Standardised hospitalisations for potentially preventable chronic conditions, per 1000 people, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2005-06, 2006-07 (a), (b), (c), (d)

- (d) Separations for which care type was reported as newborn with no qualified days, and records for hospital boarders and posthumous organ procurement have been excluded.
- (e) Includes hospitalisations identified as not Indigenous as well as those with a 'not stated' Indigenous status.
- (f) The total is not the sum of the individual conditions because diabetes complications overlap other categories.

Table 7A.2.3 Standardised hospitalisations for potentially preventable chronic conditions, per 1000 people, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2003-04, 2004-05 (a) (b) (c)

	Unit	Indigenous	Non- Indigenous (d)	Total	Rate ratio
2004-05					
Asthma	rate	4.86	1.83	1.90	2.66
Congestive cardiac failure	rate	7.78	1.93	2.04	4.03
Diabetes complications	rate	178.91	16.15	19.07	11.08
Chronic obstructive pulmonary diseases	rate	14.03	2.65	2.82	5.29
Angina	rate	6.09	2.21	2.29	2.75
Iron deficiency anaemia	rate	1.64	0.98	1.00	1.67
Hypertension	rate	1.23	0.30	0.32	4.06
Nutritional deficiencies (e)	rate	0.02	0.01	0.01	3.33
Total for potentially preventable chronic conditions (f)	rate	204.77	24.97	28.23	8.20
Total hospitalisations for all conditions	rate	951.40	340.06	353.39	2.80
Hospitalisations for potentially preventable chronic conditions as a proportion of hospitalisations for all conditions	%	16.7	7.4	8.0	
2003-04					
Asthma	rate	5.21	1.94	2.03	2.68
Congestive cardiac failure	rate	7.01	1.99	2.08	3.52
Diabetes complications	rate	123.50	8.89	10.90	13.89
Chronic obstructive pulmonary diseases	rate	14.34	2.75	2.92	5.22
Angina	rate	6.54	2.28	2.37	2.86
Iron deficiency anaemia	rate	1.63	0.89	0.91	1.82
Hypertension	rate	1.31	0.34	0.36	3.85
Nutritional deficiencies (e)	rate	0.07	0.01	0.01	13.60
Total for potentially preventable chronic conditions (f)	rate	154.03	18.49	20.89	8.33
Total hospitalisations for all conditions	rate	911.74	337.50	350.06	2.70
Hospitalisations for potentially preventable chronic conditions as a proportion of hospitalisations for all conditions	%	12.9	5.5	6.0	

⁽a) Hospitalisation rates are directly age standardised using the 2001 Australian population.

⁽b) Data are based on state of usual residence.

⁽c) See table 7A.2.16 for the ICD-10-AM codes used to classify potentially preventable conditions.

⁽d) Non-Indigenous includes hospitalisations identified as not Indigenous as well as those with a 'not stated' Indigenous status.

⁽e) The Indigenous nutritional deficiencies standardised rate is based on less than 25 hospitalisations and should be used with caution.

Table 7A.2.3 Standardised hospitalisations for potentially preventable chronic conditions, per 1000 people, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2003-04, 2004-05 (a) (b) (c)

Non-Unit Indigenous Indigenous Total Rate ratio (d)

⁽f) The total is not the sum of the individual conditions because diabetes complications overlap other categories.

Table 7A.2.4 Standardised hospitalisations for potentially preventable chronic conditions, per 1000 people, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2001-02, 2002-03 (a) (b) (c)

	Unit	Indigenous	Non- Indigenous (d)	Total	Rate ratio
2002-03					
Asthma	rate	5.17	1.92	1.99	2.70
Congestive cardiac failure	rate	7.15	2.11	2.19	3.39
Diabetes complications	rate	78.21	7.62	8.89	10.27
Chronic obstructive pulmonary diseases	rate	12.80	2.73	2.89	4.69
Angina	rate	6.86	2.33	2.42	2.94
Iron deficiency anaemia	rate	1.57	0.87	0.88	1.81
Hypertension	rate	1.28	0.31	0.33	4.14
Nutritional deficiencies (e)	rate	0.05	0.01	0.01	6.86
Total for potentially preventable chronic conditions (f)	rate	108.25	17.30	18.96	6.26
Total hospitalisations for all conditions	rate	851.71	335.20	346.73	2.54
Hospitalisations for potentially preventable chronic conditions as a proportion of hospitalisations for all conditions	%	9.7	5.2	5.4	
2001-02					
Asthma	rate	5.46	2.14	2.22	2.54
Congestive cardiac failure	rate	7.38	2.14	2.23	3.45
Diabetes complications	rate	64.84	6.56	7.59	9.88
Chronic obstructive pulmonary diseases	rate	12.75	2.77	2.93	4.60
Angina	rate	7.34	2.55	2.64	2.88
Iron deficiency anaemia	rate	1.34	0.85	0.86	1.58
Hypertension	rate	1.60	0.31	0.34	5.10
Nutritional deficiencies (e)	rate	0.05	0.01	0.01	9.00
Total for potentially preventable chronic conditions (f)	rate	96.83	16.83	18.26	5.75
Total hospitalisations for all conditions	rate	806.98	336.00	346.85	2.40
Hospitalisations for potentially preventable chronic conditions as a proportion of hospitalisations for all conditions	%	8.8	5.0	5.2	

⁽a) Hospitalisation rates are directly age standardised using 2001 Australian population.

⁽b) Data are based on state/territory of usual residence.

⁽c) See table 7A.2.16 for the ICD-10-AM codes used to classify potentially preventable conditions.

⁽d) Non-Indigenous includes hospitalisations identified as not Indigenous as well as those with a 'not stated' Indigenous status.

⁽e) The Indigenous nutritional deficiencies standardised rate is based on less than 20 hospitalisations and should be used with caution.

Table 7A.2.4 Standardised hospitalisations for potentially preventable chronic conditions, per 1000 people, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2001-02, 2002-03 (a) (b) (c)

			Non-		Doto
Uni	nit Ind	digenous	Indigenous	Total	Rate ratio
			(d)		Tallo

⁽f) The total is not the sum of the individual conditions because diabetes complications overlap other categories.

Table 7A.2.5 Standardised hospitalisations for type 2 diabetes mellitus as principal diagnosis by complication, per 1000 people, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, by Indigenous status, 2004-05, 2005-06, 2006-07 (a) (b) (c) (d) (e)

	Unit	Indigenous	Non-Indigenous (f)	Total	Rate ratio
2006-07					
Circulatory	rate	0.47	0.22	0.23	2.09
Renal	rate	2.60	0.22	0.25	11.83
Ophthalmic	rate	3.16	1.22	1.24	2.59
Other specified	rate	4.75	0.62	0.68	7.64
Multiple	rate	3.25	0.45	0.49	7.25
No complications	rate	0.14	0.04	0.04	3.99
Total (g)	rate	14.40	2.77	2.92	5.19
2005-06					
Circulatory	rate	0.38	0.20	0.20	1.91
Renal	rate	2.58	0.20	0.23	12.75
Ophthalmic	rate	2.20	1.06	1.07	2.08
Other specified	rate	4.79	0.56	0.61	8.60
Multiple	rate	3.28	0.39	0.42	8.42
No complications	rate	0.20	0.04	0.04	5.35
Total (g)	rate	13.44	2.44	2.57	5.50
2004-05					
Circulatory	rate	0.26	0.20	0.21	1.29
Renal	rate	1.97	0.18	0.21	10.82
Ophthalmic	rate	1.83	0.96	0.97	1.90
Other specified	rate	3.73	0.56	0.60	6.71
Multiple	rate	2.25	0.36	0.39	6.27
No complications	rate	0.21	0.04	0.05	4.84
Total (g)	rate	10.24	2.31	2.42	4.43

- (a) Hospitalisation rates are directly age standardised using the 2001 Australian population.
- (b) Figures are based on the ICD-10-AM classification. The codes used were E11.x, where x=2 (renal complications), x=3 (ophthalmic complications), x=5 (peripheral circulatory complications), x=7 (multiple complications), x=8 (unspecified complications), x=9 (without complications) x=0, 1, 4, 6= other specified
- (c) Results for individual complications may be affected by small numbers, particularly for Aboriginal and Torres Strait Islanders, and should be interpreted with caution.
- (d) Although same day admission for dialysis is not normally coded with a principal diagnosis of Type 2 diabetes, the data contain a significant number in several jurisdictions.
- (e) Data are based on state/territory of usual residence.
- (f) Includes hospitalisations identified as not Indigenous as well as those with a 'not stated' Indigenous status.
- (g) Totals include hospitalisations for unspecified complications.

Table 7A.2.6 Standardised hospitalisations for type 2 diabetes mellitus as principal diagnosis by complication, per 1000 people, Queensland, WA, SA, and public hospitals in the NT, by Indigenous status, 2005-06, 2006-07 (a) (b) (c) (d) (e)

	Unit	Indigenous	Non-Indigenous (g)	Total R	I Rate ratio	
2006-07						
Circulatory	rate	0.39	0.21	0.22	1.82	
Renal	rate	3.29	0.20	0.26	16.09	
Ophthalmic	rate	3.57	1.26	1.30	2.84	
Other specified	rate	5.74	0.57	0.68	10.00	
Multiple	rate	4.36	0.52	0.60	8.42	
No complications	rate	0.11	0.02	0.03	4.72	
Total (h)	rate	17.57	2.79	3.08	6.29	
2005-06						
Circulatory	rate	0.32	0.20	0.21	1.57	
Renal	rate	3.45	0.19	0.25	18.37	
Ophthalmic	rate	2.58	1.05	1.08	2.45	
Other specified	rate	6.01	0.51	0.61	11.83	
Multiple	rate	4.53	0.45	0.53	9.97	
No complications	rate	0.21	0.03	0.03	6.62	
Total (h)	rate	17.11	2.44	2.70	7.02	

- (a) Hospitalisation rates are directly age standardised using the 2001 Australian population.
- (b) Figures are based on the ICD-10-AM classification. The codes used were E11.x, where x=2 (renal complications), x=3 (ophthalmic complications), x=5 (peripheral circulatory complications), x=7 (multiple complications), x=8 (unspecified complications), x=9 (without complications) x=0, 1, 4, 6 = other specified
- (c) Results for individual complications may be affected by small numbers, particularly for Aboriginal and Torres Strait Islanders, and should be interpreted with caution.
- (d) Although same day admission for dialysis is not normally coded with a principal diagnosis of Type 2 diabetes, the data contain a significant number in several jurisdictions.
- (e) Data are based on state/territory of usual residence.
- (f) Separations for which care type was reported as newborn with no qualified days, and records for hospital boarders and posthumous organ procurement have been excluded.
- (g) Includes hospitalisations identified as not Indigenous as well as those with a 'not stated' Indigenous status.
- (h) Totals include hospitalisations for unspecified complications.

Table 7A.2.7 Standardised hospitalisations for type 2 diabetes mellitus as principal diagnosis by complication, per 1000 people, Queensland, WA, SA, and public hospitals in the NT, by Indigenous status, 2001-02 to 2004-05 (a) (b) (c) (d) (e)

	Unit	Indigenous	Non-Indigenous (f)	Total	Rate ratio
2004-05					
Circulatory	rate	0.37	0.21	0.21	1.81
Renal	rate	3.24	0.16	0.22	19.97
Ophthalmic	rate	2.39	0.94	0.96	2.54
Other specified	rate	5.30	0.56	0.65	9.47
Multiple	rate	3.66	0.41	0.48	8.84
No complications	rate	0.24	0.04	0.04	6.32
Total (g)	rate	15.20	2.32	2.56	6.55
2003-04					
Circulatory	rate	0.46	0.19	0.20	2.40
Renal	rate	2.82	0.14	0.19	19.73
Ophthalmic	rate	2.74	0.80	0.83	3.42
Other specified	rate	5.28	0.54	0.63	9.84
Multiple	rate	4.39	0.43	0.50	10.26
No complications	rate	0.22	0.07	0.07	3.35
Total (g)	rate	15.95	2.17	2.42	7.36
2002-03					
Circulatory	rate	0.44	0.21	0.22	2.08
Renal	rate	2.55	0.11	0.16	22.78
Ophthalmic	rate	1.66	0.70	0.72	2.36
Other specified	rate	5.29	0.53	0.63	9.95
Multiple	rate	3.20	0.39	0.44	8.23
No complications	rate	0.37	0.08	0.08	4.79
Total (g)	rate	13.53	2.03	2.25	6.68
2001-02					
Circulatory	rate	0.83	0.32	0.32	2.64
Renal	rate	2.68	0.11	0.15	24.33
Ophthalmic	rate	1.64	0.55	0.57	2.98
Other specified	rate	3.24	0.44	0.49	7.42
Multiple	rate	3.09	0.31	0.36	9.98
No complications	rate	1.82	0.17	0.21	10.77
Total (g)	rate	13.38	1.90	2.11	7.05

⁽a) Hospitalisation rates are directly age standardised using the 2001 Australian population.

⁽b) Figures are based on the ICD-10-AM classification. The codes used were E11.x, where x=2 (renal complications), x=3 (ophthalmic complications), x=5 (peripheral circulatory complications), x=7 (multiple complications), x=8 (unspecified complications), x=9 (without complications), and x=0, 1, 4, 6 (other specified complications).

Table 7A.2.7 Standardised hospitalisations for type 2 diabetes mellitus as principal diagnosis by complication, per 1000 people, Queensland, WA, SA, and public hospitals in the NT, by Indigenous status, 2001-02 to 2004-05 (a) (b) (c) (d) (e)

Unit Indigenous Non-Indigenous (f) Total Rate ratio

- (c) Results for individual complications may be affected by small numbers, particularly for Aboriginal and Torres Strait Islanders, and should be interpreted with caution.
- (d) Although same day admission for dialysis is not normally coded with a principal diagnosis of Type 2 diabetes, the data contain a significant number in several jurisdictions.
- (e) Data are based on state/territory of usual residence.
- (f) Non-Indigenous includes hospitalisations identified as not Indigenous as well as those with a 'not stated' Indigenous status.
- (g) Totals include hospitalisations for unspecified complications.

Table 7A.2.8 Standardised hospitalisations for potentially preventable acute conditions, per 1000 people, by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05, 2005-06, 2006-07 (a) (b) (c)

	Unit	Indigenous	Other (d)	Total	Rate ratio
2006-07					
Dehydration and gastroenteritis	rate	3.36	2.58	2.61	1.30
Pyelonephritis (e)	rate	6.33	2.28	2.36	2.77
Perforated/bleeding ulcer	rate	0.43	0.24	0.25	1.79
Cellulitis	rate	4.58	1.56	1.64	2.93
Pelvic inflammatory disease	rate	0.55	0.24	0.25	2.31
Ear, nose and throat infections	rate	3.36	1.57	1.64	2.14
Dental conditions	rate	3.95	2.62	2.72	1.51
Appendicitis	rate	1.53	1.38	1.39	1.11
Convulsions and epilepsy	rate	7.08	1.48	1.62	4.79
Gangrene	rate	1.08	0.20	0.21	5.35
Total (f)	rate	32.18	14.15	14.68	2.27
2005-06					
Dehydration and gastroenteritis	rate	3.68	2.38	2.38	1.55
Pyelonephritis (e)	rate	6.09	2.13	2.19	2.85
Perforated/bleeding ulcer	rate	0.31	0.24	0.25	1.28
Cellulitis	rate	4.87	1.48	1.55	3.30
Pelvic inflammatory disease	rate	0.65	0.26	0.27	2.52
Ear, nose and throat infections	rate	3.83	1.60	1.66	2.39
Dental conditions	rate	3.85	2.60	2.63	1.48
Appendicitis	rate	1.45	1.31	1.31	1.11
Convulsions and epilepsy	rate	7.45	1.47	1.58	5.07
Gangrene	rate	0.98	0.18	0.20	5.32
Total (f)	rate	33.15	13.64	14.02	2.43
2004-05					
Dehydration and gastroenteritis	rate	3.11	2.17	2.18	1.43
Pyelonephritis (e)	rate	6.09	2.03	2.09	2.99
Perforated/bleeding ulcer	rate	0.39	0.24	0.25	1.61
Cellulitis	rate	4.42	1.42	1.48	3.11
Pelvic inflammatory disease	rate	0.60	0.25	0.26	2.39
Ear, nose and throat infections	rate	3.81	1.61	1.66	2.36
Dental conditions	rate	3.63	2.53	2.56	1.43
Appendicitis	rate	1.54	1.31	1.31	1.17
Convulsions and epilepsy	rate	7.14	1.46	1.57	4.90
Gangrene	rate	0.97	0.18	0.19	5.29
Total (f)	rate	31.67	13.20	13.55	2.40

⁽a) Hospitalisation rates are directly age standardised using 2001 Australian population.

Table 7A.2.8 Standardised hospitalisations for potentially preventable acute conditions, per 1000 people, by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05, 2005-06, 2006-07 (a) (b) (c)

Unit Indigenous Other (d) Total Rate ratio

- (b) Data are based on state/territory of usual residence.
- (c) See table 7A.2.16 for the ICD-10-AM codes used to classify potentially preventable conditions.
- (d) Other includes hospitalisations identified as not Indigenous as well as those with a 'not stated' Indigenous status.
- (e) Kidney inflammation caused by bacterial infection.
- (f) Totals may not equal the sum of the individual conditions due to rounding.

Table 7A.2.9 Standardised hospitalisations for potentially preventable acute conditions, per 1000 people, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2005-06, 2006-07 (a), (b), (c), (d)

	Unit	Indigenous Non-In	Total R	ate ratio	
2006-07					
Dehydration and gastroenteritis	rate	3.81	2.43	2.49	1.56
Pyelonephritis (f)	rate	7.65	2.14	2.30	3.57
Perforated/bleeding ulcer	rate	0.43	0.24	0.25	1.81
Cellulitis	rate	5.41	1.52	1.67	3.56
Pelvic inflammatory disease	rate	0.79	0.24	0.26	3.36
Ear, nose and throat infections	rate	3.31	1.68	1.80	1.97
Dental conditions	rate	3.45	2.90	3.01	1.19
Appendicitis	rate	1.60	1.42	1.46	1.12
Convulsions and epilepsy	rate	8.23	1.36	1.60	6.04
Gangrene	rate	1.51	0.21	0.24	7.34
Total (g)	rate	36.11	14.13	15.06	2.56
2005-06					
Dehydration and gastroenteritis	rate	4.42	2.29	2.32	1.93
Pyelonephritis (f)	rate	7.05	2.01	2.12	3.51
Perforated/bleeding ulcer	rate	0.31	0.24	0.24	1.32
Cellulitis	rate	6.19	1.39	1.54	4.46
Pelvic inflammatory disease	rate	0.91	0.26	0.29	3.48
Ear, nose and throat infections	rate	3.85	1.77	1.86	2.18
Dental conditions	rate	3.11	2.86	2.88	1.09
Appendicitis	rate	1.50	1.37	1.37	1.10
Convulsions and epilepsy	rate	8.85	1.35	1.56	6.57
Gangrene	rate	1.40	0.21	0.23	6.83
Total (g)	rate	37.59	13.72	14.40	2.74

⁽a) Hospitalisation rates are directly age standardised using 2001 Australian population.

⁽b) Data are based on state/territory of usual residence.

⁽c) See table 7A.2.16 for the ICD-10-AM codes used to classify potentially preventable conditions.

⁽d) Separations for which care type was reported as newborn with no qualified days, and records for hospital boarders and posthumous organ procurement have been excluded.

⁽e) Includes hospitalisations identified as not Indigenous as well as those with a 'not stated' Indigenous status.

⁽f) Kidney inflammation caused by bacterial infection.

⁽g) Totals may not equal the sum of the individual conditions due to rounding.

Table 7A.2.10 Standardised hospitalisations for potentially preventable acute conditions, per 1000 people, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2003-04, 2004-05 (a) (b) (c)

	Unit	Indigenous	Non-Indigenous (d)	Total	Rate ratio
2004-05					
Dehydration and gastroenteritis	rate	3.73	2.15	2.18	1.73
Pyelonephritis (e)	rate	7.50	1.98	2.10	3.79
Perforated/bleeding ulcer	rate	0.36	0.24	0.24	1.53
Cellulitis	rate	5.55	1.34	1.48	4.14
Pelvic inflammatory disease	rate	0.84	0.25	0.27	3.37
Ear, nose and throat infections	rate	4.02	1.80	1.89	2.23
Dental conditions	rate	3.12	2.83	2.86	1.10
Appendicitis	rate	1.58	1.40	1.41	1.13
Convulsions and epilepsy	rate	8.71	1.35	1.57	6.44
Gangrene	rate	1.47	0.19	0.22	7.59
Total (f)	rate	36.84	13.52	14.21	2.72
2003-04					
Dehydration and gastroenteritis	rate	4.13	2.34	2.37	1.76
Pyelonephritis (e)	rate	6.61	1.91	2.01	3.47
Perforated/bleeding ulcer	rate	0.41	0.26	0.26	1.61
Cellulitis	rate	6.25	1.35	1.50	4.64
Pelvic inflammatory disease	rate	0.91	0.30	0.32	3.07
Ear, nose and throat infections	rate	4.20	1.84	1.94	2.28
Dental conditions	rate	3.03	2.77	2.79	1.10
Appendicitis	rate	1.59	1.35	1.36	1.18
Convulsions and epilepsy	rate	8.59	1.38	1.59	6.23
Gangrene	rate	1.08	0.22	0.24	4.94
Total (f)	rate	36.78	13.69	14.36	2.69

⁽a) Hospitalisation rates are directly age standardised using the 2001 Australian population.

⁽b) Data are based on state/territory of usual residence.

⁽c) See 7A.2.16 for the ICD-10-AM codes used to classify potentially preventable conditions.

⁽d) Non-Indigenous includes hospitalisations identified as not Indigenous as well as those with a 'not stated' Indigenous status.

⁽e) Kidney inflammation caused by bacterial infection.

⁽f) Totals may not equal the sum of the individual conditions due to rounding.

Table 7A.2.11 Standardised hospitalisations for potentially preventable acute conditions, per 1000 people, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2001-02, 2002-03 (a) (b) (c)

			<u> </u>	. , . , . ,	
	Unit	Indigenous	Non-Indigenous (d)	Total	Rate ratio
2002-03					
Dehydration and gastroenteritis	rate	3.33	2.06	2.08	1.62
Pyelonephritis (e)	rate	7.63	1.86	1.97	4.11
Perforated/bleeding ulcer	rate	0.28	0.27	0.27	1.04
Cellulitis	rate	5.38	1.34	1.47	4.02
Pelvic inflammatory disease	rate	1.00	0.30	0.33	3.29
Ear, nose and throat infections	rate	4.14	1.83	1.93	2.26
Dental conditions	rate	2.96	2.70	2.72	1.10
Appendicitis	rate	1.56	1.32	1.33	1.18
Convulsions and epilepsy	rate	8.18	1.37	1.57	5.99
Gangrene	rate	0.98	0.20	0.22	4.87
Total (f)	rate	35.43	13.24	13.87	2.68
2001-02					
Dehydration and gastroenteritis	rate	3.41	2.06	2.08	1.65
Pyelonephritis (e)	rate	7.51	1.84	1.96	4.09
Perforated/bleeding ulcer	rate	0.43	0.30	0.30	1.44
Cellulitis	rate	6.29	1.33	1.49	4.74
Pelvic inflammatory disease	rate	0.91	0.32	0.34	2.85
Ear, nose and throat infections	rate	3.92	1.79	1.89	2.19
Dental conditions	rate	2.77	2.56	2.58	1.08
Appendicitis	rate	1.39	1.31	1.31	1.05
Convulsions and epilepsy	rate	7.95	1.37	1.56	5.82
Gangrene	rate	0.91	0.22	0.23	4.22
Total (f)	rate	35.42	13.07	13.73	2.71

⁽a) Hospitalisation rates are directly age standardised using 2001 Australian population.

⁽b) Data are based on state/territory of usual residence.

⁽c) See table 7A.2.16 for the ICD-10-AM codes used to classify potentially preventable conditions.

⁽d) Non-Indigenous includes hospitalisations identified as not Indigenous as well as those with a 'not stated' Indigenous status.

⁽e) Kidney inflammation caused by bacterial infection.

⁽f) Totals may not equal the sum of the individual conditions due to rounding.

Table 7A.2.12 Standardised hospitalisations for vaccine preventable conditions, per 1000 people, by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05 to 2006-07 (a), (b), (c)

	Unit	Indigenous	Non-Indigenous (d)	Total	Rate ratio
2006-07					
Influenza	rate	0.23	0.08	0.09	2.68
Other vaccine-preventable conditions	rate	2.32	0.49	0.53	4.73
2005-06					
Influenza	rate	0.32	0.12	0.12	2.53
Other vaccine-preventable conditions	rate	2.49	0.52	0.56	4.78
2004-05					
Influenza	rate	0.36	0.10	0.10	3.81
Other vaccine-preventable conditions	rate	2.35	0.56	0.59	4.22

⁽a) Hospitalisation rates are directly age standardised using 2001 Australian population.

⁽b) Data are based on state/territory of usual residence.

⁽c) See table 7A.2.16 for the ICD-10-AM codes used to classify potentially preventable conditions.

⁽d) Non-Indigenous includes hospitalisations identified as not Indigenous as well as those with a 'not stated' Indigenous status.

Table 7A.2.13 Standardised hospitalisations for vaccine preventable conditions, per 1000 people, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2001-02 to 2006-07 (a) (b) (c)

	Unit	Indigenous	Other (d)	Total	Rate ratio
2006-07					
Influenza	rate	0.27	0.10	0.11	2.73
Other vaccine-preventable conditions	rate	0.86	0.12	0.15	6.96
2005-06					
Influenza	rate	0.36	0.16	0.16	2.29
Other vaccine-preventable conditions	rate	0.71	0.12	0.13	6.12
2004-05					
Influenza	rate	0.60	0.15	0.16	4.00
Other vaccine-preventable conditions	rate	0.65	0.11	0.13	5.82
2003-04					
Influenza	rate	0.66	0.28	0.30	2.39
Other vaccine-preventable conditions	rate	0.70	0.09	0.11	7.55
2002-03					
Influenza	rate	0.68	0.25	0.26	2.74
Other vaccine-preventable conditions	rate	0.58	0.12	0.14	4.71
2001-02					
Influenza	rate	0.66	0.24	0.26	2.71
Other vaccine-preventable conditions	rate	0.77	0.16	0.18	4.79

⁽a) Hospitalisation rates are directly age standardised using 2001 Australian population.

⁽b) Data are based on state/territory of usual residence.

⁽c) See table 7A.2.16 for the ICD-10-AM codes used to classify potentially preventable conditions.

⁽d) Other includes hospitalisations identified as not Indigenous as well as those with a 'not stated' Indigenous status.

Table 7A.2.14 Standardised hospitalisations for infections with a predominantly sexual mode of transmission, per 1000 people, by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT (a), (b), (c)

	Unit	Indigenous	Non- Indigenous (d)	Lotal	Rate ratio
2006-07					_
Syphilis (A50-A53)	rate	0.35	0.03	0.04	12.50
Gonococcal infection (A54)	rate	0.33	0.01	0.02	41.95
Chlamydial infection (A55-A56)	rate	0.19	0.02	0.03	9.63
Other sexually transmitted diseases (A57-A64)	rate	0.48	0.20	0.21	2.35
2005-06					
Syphilis (A50-A53)	rate	0.45	0.04	0.04	12.16
Gonococcal infection (A54)	rate	0.33	0.01	0.02	50.85
Chlamydial infection (A55-A56)	rate	0.17	0.02	0.02	9.13
Other sexually transmitted diseases (A57-A64)	rate	0.41	0.21	0.22	1.91
2004-05					
Syphilis (A50-A53)	rate	0.42	0.03	0.04	12.42
Gonococcal infection (A54)	rate	0.31	0.01	0.02	41.22
Chlamydial infection (A55-A56)	rate	0.18	0.02	0.03	8.74
Other sexually transmitted diseases (A57-A64)	rate	0.40	0.22	0.23	1.82

⁽a) Hospitalisation rates are directly age standardised using 2001 Australian population.

⁽b) Data are based on state/territory of usual residence.

⁽c) Includes principal or additional diagnosis based on ICD-10-AM classification.

⁽d) Non-Indigenous includes hospitalisations identified as not Indigenous as well as those with a 'not stated' Indigenous status.

Table 7A.2.15 Standardised hospitalisations for infections with a predominantly sexual mode of transmission, per 1000 people, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT (a), (b), (c)

	Unit	Indigenous	Non- Indigenous(d)	Total	Rate ratio
2006-07					
Syphilis (A50–A53)	rate	0.47	0.03	0.04	16.76
Gonococcal infection (A54)	rate	0.53	0.01	0.04	55.02
Chlamydial infection (A55–A56)	rate	0.29	0.03	0.04	10.62
Other sexually transmitted diseases (A57–A64)	rate	0.66	0.19	0.22	3.46
2005-06					
Syphilis (A50–A53)	rate	0.67	0.03	0.04	25.87
Gonococcal infection (A54)	rate	0.60	0.01	0.03	92.65
Chlamydial infection (A55–A56)	rate	0.28	0.02	0.03	13.24
Other sexually transmitted diseases (A57–A64)	rate	0.64	0.20	0.22	3.19
2004-05					
Syphilis (A50–A53)	rate	0.59	0.02	0.04	24.71
Gonococcal infection (A54)	rate	0.53	0.01	0.03	66.63
Chlamydial infection (A55–A56)	rate	0.28	0.02	0.04	12.73
Other sexually transmitted diseases (A57–A64)	rate	0.68	0.22	0.24	3.15
2003-04					
Syphilis (A50–A53)	rate	0.66	0.03	0.05	20.59
Gonococcal infection (A54)	rate	0.48	0.01	0.03	60.38
Chlamydial infection (A55–A56)	rate	0.27	0.02	0.03	16.94
Other sexually transmitted diseases (A57–A64)	rate	0.82	0.23	0.25	3.62
2002-03					
Syphilis (A50–A53)	rate	0.64	0.04	0.06	15.93
Gonococcal infection (A54)	rate	0.54	0.01	0.03	54.10
Chlamydial infection (A55–A56)	rate	0.25	0.02	0.03	16.60
Other sexually transmitted diseases (A57–A64)	rate	0.86	0.25	0.27	3.49
2001-02					
Syphilis (A50–A53)	rate	0.79	0.04	0.06	20.89
Gonococcal infection (A54)	rate	0.48	0.01	0.03	44.00
Chlamydial infection (A55–A56)	rate	0.23	0.01	0.02	19.25
Other sexually transmitted diseases (A57–A64)	rate	0.72	0.25	0.27	2.89

⁽a) Hospitalisation rates are directly age standardised using 2001 Australian population.

⁽b) Data are based on state/territory of usual residence.

⁽c) Includes principal or additional diagnosis based on ICD-10-AM classification.

⁽d) Other includes hospitalisations identified as not Indigenous as well as those with a 'not stated' Indigenous status.

Table 7A.2.16 List of ICD-10-AM codes used to define categories of potentially preventable hospitalisations (a)

Category	Condition	ICD-10-AM codes	Notes
Vaccine preventable	ole		
	Influenza and pneumonia	J10 J11 J13 J14 J153 J154 J157 J159 J168 J181 J188	In any diagnosis field, excludes cases with additional diagnosis of D57 (sickle cell disorders) and people under 2 months
	Other vaccine-preventable conditions	A35 A36 A37 A80 BO5 BO6 B161 B169 B180 B181 B26 G000 M014	In any diagnosis field
Chronic			
	Asthma	J45 J46	Principal diagnosis only
	Congestive cardiac failure	150 1110 J81	Principal diagnosis only, exclude cases with procedure codes in list in footnote (b)
	Diabetes complications	E101-E148	In any diagnosis field
	Chronic obstructive pulmonary J20 J41 J42 disease	J20 J41 J42 J43 J44 J47	Principal diagnosis only, J20 only with additional diagnoses of J41 J42 J43 J47 J44
	Angina	120 1240 1248 1249	Principal diagnosis only, exclude cases with procedure codes according to list in footnote (b)
	Iron deficiency anaemia	D501 D508 D509	Principal diagnosis only
	Hypertension	110 1119	Principal diagnosis only, exclude cases with procedure codes according to list below
Acute	Nutritional deficiencies	E40 E41 E42 E43 E550 E643	Principal diagnosis only
	Dehydration and	E86 K522 K528 K529	Principal diagnosis only
	r yeldrepillins Perforated/bleeding ulcer	K250 K251 K252 K254 K255 K256 K260 K261 K262 K264 K265 K266 K270 K271 K272 K274 K275 K276 K280 K281 K282 K284 K285 K286	Principal diagnosis only

ATTACHMENT TABLES

Table 7A.2.16 List of ICD-10-AM codes used to define categories of potentially preventable hospitalisations (a)

Cellulitis		L03 L04 L08 L980 L88 L983	E 200,	Principal diagnosis only, exclude cases with any procedure blocks 1820 to 2016 or if procedure is 30216-02 30676-00 30223-02 30064-00 34527-01 34527-00 90661-00 and this is the only listed procedure
Pelvic inflammatory disease	y disease	N70 N73 N74		Principal diagnosis only
Ear, nose & throat infections	infections	H66 H67 J02 J03 J06 J312		Principal diagnosis only
Dental conditions		K02 K03 K04 K05 K06 K08 K098 K099 K12 K13		Principal diagnosis only
Appendicitis		K35 K36 K37	_	n any diagnosis field
Convulsions and epilepsy	pilepsy	O15 G40 G41 R56	_	Principal diagnosis only
Gangrene		R02	_	In any diagnosis field

ICD-10-AM = International Classification of Diseases, 10th Edition, Australian Modification (National Centre for Classification in Health 1998)

- (a) This list of disease codes is the same list used to classify preventable diseases in the Aboriginal and Torres Strait Islander Health Performance Framework (Australian Health Ministers' Advisory Council 2008, Department of Health and Ageing, Canberra)
- Procedures codes to exclude for congestive heart failure and hypertension: <u>a</u>

33172-00 35304-00 35305-00 35310-02 35310-00 38281-11 38281-07 38278-01 38278-00 38281-02 38281-01 38281-00 38256-00 38278-03 38284-00 38284-38488-04 38489-04 38488-02 38489-03 38487-00 38489-02 38488-00 38489-00 38490-00 38493-00 38497-04 38497-03 38497-02 38497-01 38497-00 38500-02 38521-09 38270-01 38456-19 38456-15 38456-12 38456-11 38456-10 38456-07 38456-01 38470-00 38475-00 38480-02 38480-01 38480-00 38488-06 00 38503-00 38505-00 38521-04 38606-00 38612-00 38615-00 38653-00 38700-02 38700-00 38739-00 38742-02 38742-00 38745-00 38751-02 38751-00 38757-02 38757-01 38757-00 90204-00 90205-00 90219-00 90224-00

Source: AIHW (unpublished)

ATTACHMENT

Table 7A.2.17
Hospitalisations of Indigenous people with a principle diagnosis of injury and poisoning and other consequences of external causes, by sex, NSW, Victoria, Queensland, WA, SA, and the NT, July 2005 to June 2007 (a) Table 7A.2.17

			Males					Fer	Females					Per	Persons			
External cause	No.	%	No. per 1000 (b)	(c) 95 % (c)	UCL (d) (d)	Ratio (e)	No.	%	No. per 1000 (b)	(c) (c)	UCL 95% (d)	Ratio (e)	No.	%	No. per 1000 (b)	(c) (c)	UCL 95% [†] (d)	Ratio (e)
Assault (X85-Y09)	4 816	22.2	11.2	10.8	11.5	7.2	5 322	31.6	11.5	11.1	11.8	36.4	10 138	26.3	11.3	11.1	11.6	12.1
Falls (W00-W19)	3 774 17.4	17.4	6.6	9.4	10.3	1.5	2 832	16.8	9.1	8.6	9.6	1.2	9099	17.1	9.6	9.3	6.6	1.3
Exposure to inanimate mechanical forces (W20–W49)	3 164	14.6	6.2	0.9	6.4	4 .	1 458	8.6	2.8	2.6	2.9	2.0	4 622	12.0	4. 4.	4.3	9.4	1.5
Complications of medical and surgical care (Y40–Y84)	1 925	8.0	7.1	9.9	7.5	1.7	2 030	12.0	6.8	6.5	7.2	6.	3 955	10.3	6.9	6.7	7.2	6 .
Transport accidents (V01–V99)	2 515	11.6	5.1	4 .9	5.4	1.3	1 137	6.7	2.4	2.2	2.5	<u>4</u> .	3 652	9.5	3.7	3.6	3.9	1.3
Other accidental exposures	1 644	7.6	3.8	3.6	4. L.	[.	981	5.8	2.4	2.2	2.6	<u>4</u> .	2 625	6.8	3.1	3.0	3.3	1.2
Intentional self-harm ((X60–X84)	1 107	5.1	2.6	2.4	2.8	2.9	1 366	8.1	2.9	2.8	3.1	2.0	2 473	6.4	2.8	2.6	2.9	2.4
Exposure to animate mechanical forces (W50–W64)	1 068	6.4	2.0	1.9	2.2	2.0	528	3.1	1.0	6.0	L .	2.7	1 596	4.	7.5	4 .	9.1	2.2
Exposure to electric current/smoke/fire/venom ous animals and plants/forces of nature (W85–W99, X00–X39)	892	4.	6 .	7.7	2.1	2.7	471	2.8	6.0	0.8	0.1	2.4	1 363	3.5	4 .	2.	7:	2.5
Accidental poisoning by and exposure to noxious substances (X40–X49)	415	1.9	9.0	0.7	6.0	9.1	429	2.5	6.0	0.8	1.0	6.	844	2.2	6.0	0.8	1.0	6 .

consequences of external causes, by sex, NSW, Victoria, Queensland, WA, SA, and the NT, July Table 7A.2.17 Hospitalisations of Indigenous people with a principle diagnosis of injury and poisoning and other 2005 to June 2007 (a) **Table 7A.2.17**

		٧	Males				ì	Fen	Females					Per	Persons			
External cause	No.	No. %	No. LCL per 95 % 1000 (c)	(c) (c)	UCL 95% (d)	Ratio (e)	No.	%	No. per 1000 (b)	(c) (c)	UCL 95% (d)	Ratio (e)	No.	%	No. per 1000 (b)	LCL UCL 95% 95% (c) (d)		Ratio (e)
Other external causes	297	297 1.4 0.7	0.7	9.0	0.7	2.6	273	1.6	273 1.6 0.6 0.5	0.5	5 0.7	2.5	220	1.5	9.0	570 1.5 0.6 0.6 0.7	0.7	2.6
Total	21 667 100.0 51.3	100.0	51.3	50.4	52.2	1.9	1.9 16 857 100.0 41.5 40.7 42.2	0.00	41.5	40.7	42.2	2.2	38 527 100.0 46.4 45.8 47.0	0.00	46.4	45.8	17.0	2.0

(a) External causes (ICD-10-AM codes V01-Y98) are based on the first external cause reported where the principal diagnosis was 'injury, poisoning and certain other consequences of external causes' (ICD-10-AM codes S00-T98).

(b) Directly age standardised rate using the Australian 2001 standard population.

(c) LCL = lower confidence interval

(d) UCL = Upper confidence interval

(e) Ratio = Indigenous rate divided by other rate.

Table 7A.2.18

	1998-99	1999-00	2000-01	2001-02	2002-03	1998-99 1999-00 2000-01 2001-02 2002-03 2003-04 2004-05 2005-06	:004-05 2	005-06	2006-07	Annual change 1998-99 to 2006-07 (e)	% change 1998- 99 to 2006-07 (f)
Indigenous rate (per 1000) (a)	(1										
Males	58.8	54	55.1	22	52.4	53.6	54.9	57.6	55.6	-0.10	-1.33
Females	46.8	46.4	45	46.1	44.4	45.9	45.7	46.7	48.4	0.14	2.42
Persons	52.6	50.2	49.9	51.5	48.4	49.8	50.2	52	52.0	0.03	0.42
Non-Indigenous rate (per 1000) (a) (b)	00) (a) (b)										
Males	27.7	27.7	27	26.5	25.5	26	26.5	26.7	28.3	-0.04	-1.06
Females	18.6	18.3	18.1	17.8	17.5	17.8	18	18.2	18.6	-0.01	-0.48
Persons	23.3	23.2	22.7	22.3	21.7	22	22.4	22.6	23.5	-0.03	-1.09
Rate ratio (c)											
Males	2.1	1.9	2	2.1	2.1	2.1	2.1	2.2	2.0	0.00	-0.19
Females	2.5	2.5	2.5	2.6	2.5	2.6	2.5	2.6	2.6	0.01	2.92
Persons	2.3	2.2	2.2	2.3	2.2	2.3	2.2	2.3	2.2	0.00	1.55
Rate difference (d)											
Males	31.1	26.3	28.1	30.5	26.8	27.7	28.4	30.9	27.3	-0.06	-1.57
Females	28.2	28.1	26.9	28.3	26.9	28.1	27.7	28.6	29.8	0.15	4.32
Persons	29.3	27	27.2	29.2	26.8	27.7	27.8	29.4	28.4	0.00	1.61

⁽a) Directly age standardised rate using the Australian 2001 standard population.

⁽b) Non-Indigenous includes Indigenous status unknown.
(c) Rate ratio = Indigenous rate divided by non-Indigenous rate
(d) Rate difference= Indigenous rate minus non-Indigenous rate
(e) Average annual change in rates, rate ratios and rate differences determined using linear regression

Table 7A.2.18

Age standardised hospitalisation rates, rate ratios and rate differences for injury and poisoning, Queensland, WA, SA and the NT, 1998-99 to 2006-07 Table 7A.2.18

(f) Per cent change based on average annual change over the preriod

AIHW National Hospital Morbidity Database (unpublished) Source:

Table 7A.3.1 Avoidable mortality, by Indigenous status and State/Territory, people aged 0–74 years, 2002–2006 (a), (b), (c), (d) **Table 7A.3.1**

	Number c	Number of deaths (e)		1	Indigenous		Non-l	Non-Indigenous		
State/territory	Indigenous	Non- Indigneous	Not stated	No. per 100 000 (f)	%56 TOT	NCL 95%	No. per 100 000 (f)	%56 TOT	NCL 95%	Ratio (h)
Qld	1 748	30 197	431	567.3	536.8	8.765	168.1	166.2	170.0	3.4
WA	1 120	13 636	285	632.6	590.8	674.5	151.5	149.0	154.1	4.2
SA	431	13 031	307	599.6	535.0	664.2	168.5	165.6	171.4	3.6
۲N	1 470	1 116	17	906.3	852.9	959.7	210.8	197.1	224.6	4.3
Qld, WA, SA, and the NT	4 769	980 29	1 040	656.3	635.0	9'229	164.5	163.1	165.8	4.0

LCL = lower confidence limit. UCL = upper confidence limit.

(a) Data are reported for Queensland, WA, SA and the NT only. These four jurisdictions are considered to have adequate levels of Indigenous identification in mortality data. They do not represent an Australian total.

(b) Data are presented in five-year groupings because of the small numbers each year.

Although most deaths of Indigenous Australians are registered, it is likely that some are not accurately identified as Indigenous. Therefore, these statistics are likely to underestimate the Indigenous mortality rate. <u>ပ</u>

Deaths are by year of registration of death and State/Territory of usual residence.

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for Queensland, 72 per cent for WA, 62 per cent for SA and 90 per cent for the NT. The completeness of Indigenous identification for avoidable The ABS calculated the completeness of identification of Indigenous deaths for the period 2002–2006 using population estimates as 51 per cent deaths may differ from the estimates for all causes. **e**

(f) Directly age-standardised using the 2001 Australian standard population.

(g) Rate ratio Indigenous:non-Indigenous.

Source: AIHW (2009), Aboriginal and Torres Strait Islander Health Performance Framework: Detailed Analyses, Cat. no. IHW 22, Canberra.

Avoidable mortality, by Indigenous status, age group and sex, people aged 0-74 years, Queensland, WA, SA and the NT, 2002–2006 (a), (b), (c), (d) Table 7A.3.2 **Table 7A.3.2**

		Males			Females	
	Deaths per 10	00 000 (e)		Deaths per 100 000 (e)	00 000 (e)	
Age group (years)	Indigenous	Non-Indigenous	Rate ratio (f)	Indigenous	Indigenous Non-Indigenous	Rate ratio (f)
Less than 1	2.669	239.6	2.9	517.3	217.7	2.4
1–4	34.1	15.7	2.2	38.2	10.9	3.5
5–14	15.1	5.9	2.6	12.5	4.4	2.9
15–24	150.7	55.8	2.7	68.7	19.8	3.5
25–34	325.5	74.9	4.3	135.2	25.4	5.3
35–44	909	98.5	6.2	330.3	51.1	6.5
45–54	1 066.6	196.9	5.4	616.5	116.1	5.3
55–64	1 891.1	476.0	4.0	1 271.3	261.8	4.9
65–74	3 808.0	1 313.8	2.9	2 699.7	716.8	3.8
Total (g), (h)	812.9	214.1	3.8	519.1	115.0	4.5

Data are reported for Queensland, WA, SA and the NT only. These four jurisdictions are considered to have adequate levels of Indigenous identification in mortality data. They do not represent an Australian total <u>a</u>

Data are presented in five-year groupings because of the small numbers each year.

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these statistics are likely to underestimate the Indigenous mortality rate. The completeness of identification of Indigenous deaths can vary by Although most deaths of Indigenous Australians are registered, it is likely that some are not accurately identified as Indigenous. Therefore, <u>ပ</u>

(d) Deaths are by year of registration and State/Territory of usual residence.

Rates per 100 000 population. Total rates have been directly age-standardised using the 2001 Australian standard population. (e)

) Rate ratio Indigenous:non-Indigenous.

(g) Totals exclude those aged 75 years and over and those for whom age was not stated.

(h) Directly age-standardised using the 2001 Australian standard population.

Source: AIHW (2009), Aboriginal and Torres Strait Islander Health Performance Framework: Detailed Analyses, Cat. no. IHW 22, Canberra.

Table 7A.3.3 Avoidable mortality, by cause of death and Indigenous status, people aged 0–74 years, Table 7A.3.3

	Queen	Queensland, W	Ą	and the	NT, 20	02-200	SA and the NT, 2002–2006 (a), (b), (c), (d)	(c), (d)					
	Nu.	Number (e)		P _t	Per cent		jipul	Indigenous		Non-Indigeneous	snoəu		
Cause of death	Indig.	Non- Indig.	Not stated	Indig.	Non- Indig.	Not stated	No. per 100 000 (f)	%56 727	UCL 95%	No. per 100 000 (f)	%56 7C7	UCL 95%	Ratio (g)
Ischaemic heart disease	926	11 541	211	20.0	19.9	20.3	149.7	139.3	160.1	32.7	32.1	33.3	4.6
Cancer	658	21 721	213	13.8	37.5	20.5	115.2	105.8	124.7	8.09	0.09	61.6	1.9
Lung cancer (h)	245	7 576	80	5.1	13.1	7.7	47.0	40.8	53.3	21.3	20.8	21.8	2.2
Diabetes	202	1 870	25	10.6	3.2	2.4	94.5	85.7	103.4	5.3	5.1	5.6	17.7
Suicide	370	3 883	127	7.8	6.7	12.2	26.3	23.4	29.2	11.1	10.8	11.5	2.4
Road traffic injuries	334	2 853	88	7.0	4.9	8.5	26.3	23.1	29.5	8.2	7.9	8.5	3.2
Alcohol related disease	309	1 505	29	6.5	2.6	2.8	37.1	32.6	41.5	4.1	3.9	4.4	9.0
Selective invasive bacterial and protozoal infections	229	1 244	38	4 8.	2.1	3.7	27.2	23.1	31.2	3.6	3. 4.	89 80	7.6
Cerebrovascular disease	215	3 409	51	4.5	5.9	6.4	36.5	31.1	41.9	9.8	9.5	10.1	3.7
Chronic obstructive pulmonary disease	182	2 784	49	3.8	4 8:	4.7	39.2	33.2	45.1	8.0	7.7	8.3	4 6.
Nephritis and nephrosis	162	268	9	3.4	1.0	9.0	27.0	22.5	31.5	1.6	1.5	1.8	16.4
Violence	117	313	15	2.5	0.5	1 .	0.6	7.2	10.8	6.0	0.8	1.0	10.0
Birth defects	108	006	22	2.3	1.6	2.1	5.9	4.5	7.3	2.7	2.5	2.9	2.2
Complications of the perinatal period	108	448	ဖ	2.3	0.8	9.0	4.2	3.4	5.0	1 .	1.2	1.5	3.1
Rheumatic and other valvular heart disease	63	165	7	2.0	0.3	0.2	10.7	8.7	13.2	0.5	4.0	0.5	22.7
Other (i)	421	4 776	158	8.8	8.2	15.2	47.6	42.3	52.8	13.6	13.3	14.0	3.5
Total avoidable	4 769	57 980	1 040	100.0	100.0	100.0	656.3	635.0	9.779	164.5	163.1	165.8	4.0

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009

Table 7A.3.3 Avoidable mortality, by cause of death and Indigenous status, people aged 0–74 years, Queensland, WA, SA and the NT, 2002–2006 (a), (b), (c), (d) **Table 7A.3.3**

LCL = lower confidence limit. UCL = upper confidence limit.

- Data are reported for Queensland, WA, SA and the NT only. These four jurisdictions are considered to have adequate levels of Indigenous identification in mortality data. They do not represent an Australian total. <u>a</u>
- (b) Data are presented in five-year groupings because of the small numbers each year.
- (c) Deaths are by year of registration of death and State/Territory of usual residence.
- Although most deaths of Indigenous Australians are registered, it is likely that some are not accurately identified as Indigenous. Therefore, these statistics are likely to underestimate the Indigenous mortality rate. It is difficult to estimate the difference between the Indigenous and non-Indigenous mortality rates because of these data quality issues. б
- Different causes of death may have levels of completeness of identification that differ from the all-cause under-identification (coverage) **(e)**
- Directly age-standardised using the 2001 Australian standard population
- (g) Rate ratio Indigenous:non-Indigenous.
- (h) Data for lung cancer are a subset of data for all cancers presented in this table.
- hypertensive heart disease, aortic aneurism, obstructive uropathy and prostatic hyperplasia, deep vein thrombosis with pulmonary embolism, Other avoidable includes: tuberculosis; hepatitis, HIV/AIDS, viral pneumonia and influenza, thyroid disorders, illicit drug disorders, epilepsy, disease, falls, fires/burns, accidental poisoning, drowning. For a full list of ICD10 codes see Page, A., Tobias, M., Glover, J., Wright, C., Hetzel, D. and Fisher, E. 2006, Australian and New Zealand Atlas of Avoidable Mortality, Public Health Information Development Unit, asthma, peptic ulcer disease, acute abdomen/appendicitis/intestinal obstruction/cholecystitis/lithiasis/pancreatitis/hernia, chronic liver Jniversity of Adelaide, Adelaide, and Ministry of Health, New Zealand.

AIHW (2009), Aboriginal and Torres Strait Islander Health Performance Framework: Detailed Analyses, Cat. no. IHW 22, Canberra. Source:

Table 7A.3.4

Age-standardised mortality rates, rate ratios and rate differences, avoidable causes, people aged 0-74 years, Queensland, WA, SA, and the NT, 1998 to 2006 Table 7A.3.4

)	•						•			
	1998	1999	2000	2001	2002	2003	2004	2002	2006	Annual change (a)	% change (b)
Indigenous rate (per 100 000) (c)	(၁) (000 00										
Males	921.1	850.2	6.606	926.5	780.9	896.1	832.4	802.1	760.2	- 16.7	- 14.5
Females	647.6	544.1	669.1	513.0	614.5	489.4	546.5	465.2	489.1	- 19.0	- 23.5
Persons	778.2	687.7	782.8	717.0	694.6	679.5	679.8	621.5	614.1	- 18.3	- 18.8
Non-Indigenous rate (per 100 000) (c), (d)	er 100 000) (c), (d)									
Males	296.3	274.2	261.6	249.0	234.7	226.8	212.2	206.5	192.8	- 12.3	- 33.2
Females	147.3	140.1	134.9	132.4	128.2	120.0	114.0	109.8	104.2	- 5.3	- 28.7
Persons	221.1	206.6	197.8	190.4	181.2	173.3	163.0	158.1	148.5	- 8.7	- 31.5
Rate ratio (e)											
Males	3.1	3.1	3.5	3.8	3.3	4.0	3.9	3.9	3.9	0.1	28.7
Females	4.4	3.9	5.0	3.9	4.8	4.1	4.8	4.2	4.7	0.0	6.4
Persons	3.5	3.3	4.0	3.8	3.8	3.9	4.2	3.9	4.1	0.1	18.4
Rate difference (f)											
Males	624.8	576.0	648.3	707.5	546.2	669.4	620.2	595.5	567.4	4.4	- 5.7
Females	500.3	404.1	534.2	380.6	486.3	369.4	432.6	355.4	384.9	- 13.7	- 21.9
Persons	557.1	481.1	584.9	526.6	513.4	506.2	516.8	463.4	465.6	9.6 –	- 13.8

(a) Average annual change in rates, rate ratios, and rate differences determined using linear regression analysis.

Per cent change between 1998 and 2006 based on the average annual change over the period **(**p

(c) Directly age-standardised using the 2001 Australian standard population.

(d) Rates exclude deaths of people for whom Indigenous status was not stated.

(e) Mortality rate for Indigenous people divided by the the mortality rate for non-Indigenous people.

(f) Mortality rate for Indigenous people minus the the mortality rate for non-Indigenous people.

Source: AIHW (2009), Aboriginal and Torres Strait Islander Health Performance Framework: Detailed Analyses, Cat. no. IHW 22, Canberra.

OVERCOMING INDIGENOUS DISADVANTAGE: KEY

DISADVANTAGE: KEN INDICATORS 2009

Table 7A.4.1 Smoking statistics, people aged 14 years or over, Australia (a)

2007		Never smoked (b)	Ex-smokers (c)	Smokers (d)
Smoking status				
Indigenous	%	47.6	18.3	34.1
Non-Indigenous	%	55.6	25.5	19.0
Mean number of cigare	ttes smoked p	er week by current smo Male	okers (e) Female	Persons
Indigenous	no.	111	117	115
	no	400	91	97
Non-Indigenous	no.	102	91	91
Non-Indigenous	110.	102	91	91

2004		Never smoked (b)	Ex-smokers (c)	Smokers (d)
Smoking status		_		
Indigenous	%	41.4	19.6	39.0
Non-Indigenous	%	53.1	26.5	20.4

Mean number of cigarettes smoked per week by current smokers (e)

		Male	Female	Persons
Indigenous	no.	136	125	130
Non-Indigenous	no.	102	92	97

2001		Never smoked (b)	Ex-smokers (c)	Smokers (d)
Smoking status				
Indigenous	%	37.7	12.4	49.9
Non-Indigenous	%	50.8	26.4	22.8

Mean number of cigarettes smoked per week by current smokers (e)

		Male	Female	Persons
Indigenous	no.	133	119	125
Non-Indigenous	no.	111	105	108

⁽a) This refers to smoking of tobacco, including manufactured (packet) cigarettes, roll-yourown cigarettes, cigars and pipes, but excludes chewing tobacco and smoking of nontobacco products. Current daily smokers refers to people who smoked one or more cigarettes (or pipes or cigars) per day at the time of survey.

Table 7A.4.1 Smoking statistics, people aged 14 years or over, Australia (a)

- (b) Never smoked 100 cigarettes (manufactured and/or roll-your-own) or equivalent amount of tobacco in their life.
- (c) Smoked at least 100 cigarettes (manufactured and/or roll-your-own) or equivalent amount of tobacco in their life, and no longer smoke.
- (d) Smoked daily, weekly or less than weekly at the time of survey.
- (e) Current daily smokers refers to people who smoked one or more cigarettes (or pipes or cigars) per day at the time of survey.

Source: AIHW (Australian Institute of Health and Welfare) 2002, National Drug Strategy Household Survey: Detailed Findings 2001, Cat. no. PHE 41, Canberra; AIHW 2005, National Drug Strategy Household Survey: Detailed Findings 2004, Cat. no. PHE 66, Canberra; AIHW 2008, National Drug Strategy Household Survey: Detailed Findings 2007, Cat. no. PHE 107, Canberra.

Table 7A.4.2 Age standardised hospital separations related to tobacco use (per 1000 population), Queensland, WA, SA and public hospitals in NT (a), (b), (c), (d), (e)

	,, (c), (d), (e Ma	ales	Fema	ales	All per	rsons
	Indigenou s	Non- Indigenous	Indigenous	Non- Indigenous	Indigenous	Non- Indigenous
2001-02						
Qld	1.9	0.5	1.3	0.3	1.5	0.4
WA	2.2	1.2	2.2	0.7	2.2	0.9
SA	1.8	1.2	5.8	1.4	3.9	1.3
NT (public hospitals						
only)	3.4	2.3	3.6	1.0	3.6	1.8
Total	2.3	0.9	2.4	0.6	2.3	0.7
2002-03						
Qld	1.1	0.7	0.7	0.3	0.9	0.5
WA	3.7	1.0	1.2	0.6	2.3	0.8
SA	3.1	1.4	8.7	2.1	6.0	1.7
NT (public hospitals						
only)	8.5	4.0	6.2	1.9	7.3	3.1
Total	3.5	1.0	2.7	0.8	3.1	0.9
2003-04						
Qld	1.6	0.7	1.0	0.4	1.3	0.6
WA	5.5	1.4	2.5	0.7	3.8	1.0
SA	3.3	1.6	11.3	1.9	7.6	1.7
NT (public hospitals only)	4.8	4.0	5.1	1.5	5.0	2.9
Total	3.5	1.1	3.2	0.8	3.3	0.9
2004-05						
Qld	2.3	0.7	1.2	0.4	1.7	0.5
WA	2.9	1.4	2.9	0.8	2.9	1.0
SA	4.2	1.2	8.0	1.8	6.0	1.4
NT (public hospitals only)	8.7	5.6	5.0	1.5	6.6	3.8
Total	3.9	1.0	3.0	0.8	3.4	0.9
2005-06						
Qld	2.2	0.7	1.1	0.4	1.6	0.5
WA	2.9	1.3	2.8	0.7	2.8	1.0
SA	4.1	1.1	7.8	1.8	5.9	1.4
NT (public hospitals only)	8.4	5.70	4.8	1.47	6.38	3.71
Total	3.8	1.0	2.9	0.8	3.3	0.9

Table 7A.4.2 Age standardised hospital separations related to tobacco use (per 1000 population), Queensland, WA, SA and public hospitals in NT (a), (b), (c), (d), (e)

	Ма	ales	Fema	ales	All per	rsons
	Indigenou s	Non- Indigenous	Indigenous	Non- Indigenous	Indigenous	Non- Indigenous
2006-07						
Qld	2.1	0.7	1.1	0.4	1.6	0.5
WA	2.8	1.3	2.7	0.7	2.7	1.0
SA	4.0	1.1	7.6	1.7	5.7	1.4
NT (public hospitals only)	8.2	5.7	4.6	1.1	6.2	3.3
Total	3.7	1.0	2.8	0.8	3.2	0.9

- (a) The ICD-10-AM codes used were F17 (Mental and behavioural disorders due to tobacco use), P04.2 (Fetus and newborn affected by maternal use of tobacco), and T65.2 (Toxic effect of tobacco and nicotine) in any diagnosis field.
- (b) The hospital separation rates (per 1000 population) were directly age standardised using the 2001 Australian population.
- (c) Hospital separation is the discharge, transfer, death or change of episode of care of an admitted patient (see glossary for a detailed definition).
- (d) Non-Indigenous data includes separations where Indigenous status were not reported.
- (e) Data are based on state of usual residence.
- (f) Separations for which care type was reported as newborn with no qualified days, and records for hospital boarders and posthumous organ procurement have been excluded.
 - Nil or rounded to zero. .. Not applicable. na Not available. np Not published due to less than 5 separations.

Source: AIHW National Hospital Morbidity Database (unpublished).

Table 7A.4.3 Age standardised hospital separations related to tobacco use (per 1000 population), NSW, Victoria, Queensland, WA, SA and public hospitals in the NT (a), (b), (c), (d), (e), (f)

	Ma	les	Fem	ales	All pe	rsons
	Indigenous	Non- Indigenous	Indigenous	Non- Indigenous	Indigenous	Non- Indigenous
2004-05						
NSW	4.5	1.5	4.4	0.8	4.4	1.1
Victoria	1.5	1.3	7.4	0.7	4.5	0.9
Queensland	2.3	0.7	1.2	0.4	1.7	0.5
WA	2.9	1.4	2.9	0.8	2.9	1.0
SA	4.2	1.2	8.0	1.8	6.0	1.4
NT (public hospitals						
only)	8.7	6.1	5.0	1.6	6.6	4.0
Total	3.9	1.2	3.7	0.8	3.8	1.0
2005-06						
NSW	4.4	1.4	4.3	0.8	4.3	1.1
Victoria	1.5	1.2	7.1	0.7	4.3	0.9
Queensland	2.2	0.7	1.1	0.4	1.6	0.5
WA	2.9	1.3	2.8	0.7	2.8	1.0
SA	4.1	1.1	7.8	1.8	5.9	1.4
NT (public hospitals						
only)	8.4	5.7	4.8	1.5	6.4	3.7
Total	3.8	1.2	3.6	0.7	3.7	1.0
2006-07						
NSW	4.3	1.4	4.2	0.8	4.2	1.1
Victoria	1.4	1.2	6.8	0.7	4.1	0.9
Queensland	2.1	0.7	1.1	0.4	1.6	0.5
WA	2.8	1.3	2.7	0.7	2.7	1.0
SA	4.0	1.1	7.6	1.7	5.7	1.4
NT (public hospitals						
only)	8.2	5.7	4.6	1.1	6.2	3.3
Total	2 -	4.5	2 -	•	0.5	
	3.7	1.2	3.5	0.8	3.6	1.0

⁽a) The ICD-10-AM codes used were F17 (Mental and behavioural disorders due to tobacco use), P04.2 (Fetus and newborn affected by maternal use of tobacco), and T65.2 (Toxic effect of tobacco and nicotine) in any diagnosis field.

⁽b) The hospital separation rates (per 1000 population) were directly age standardised using the 2001 Australian population.

⁽c) Hospital separation is the discharge, transfer, death or change of episode of care of an admitted patient (see glossary for a detailed definition).

⁽d) Non-Indigenous data includes separations where Indigenous status were not reported.

⁽e) Data are based on state of usual residence.

Table 7A.4.3 Age standardised hospital separations related to tobacco use (per 1000 population), NSW, Victoria, Queensland, WA, SA and public hospitals in the NT (a), (b), (c), (d), (e), (f)

	Mai	les	Fem	ales	All pe	rsons
_	Indigenous	Non- Indigenous	Indigenous	Non- Indigenous	Indigenous	Non- Indigenous

⁽f) Separations for which care type was reported as newborn with no qualified days, and records for hospital boarders and posthumous organ procurement have been excluded.

Source: AIHW National Hospital Morbidity Database (unpublished).

⁻ Nil or rounded to zero. .. Not applicable. na Not available. **np** Not published due to less than 5 separations.

Table 7A.4.4 Indigenous persons aged 15 years or over: smoker status by sex

		Males			Females			Total	
	Estimate	Estimate Proportion	RSE	Estimate	Proportion	RSE	Estimate	Proportion	RSE
	000,	%	%	000,	%	%	000,	%	%
1994									
Smoker (a)	56.5	55.3	3.2	54.5	48.5	2.9	111.0	51.7	2.5
Non-smoker (b)	45.6	44.6	3.9	57.8	51.4	2.8	103.4	48.2	2.8
Total (c)	102.2	100.0	I	112.4	100.0	1	214.6	100.0	I
2002									
Smoker (a)	71.4	52.8	2.9	72.2	49.1	2.9	143.6	50.9	2.4
Non-smoker (b)	63.1	46.7	3.3	73.6	50.1	2.8	136.7	48.4	2.5
Total (c)	135.2	100.0	ı	147.0	100.0	I	282.2	100.0	I

(a) Includes occasional smokers.

(b) Comprises ex-smokers and persons who never smoked.

(c) Includes not stated responses.

- Nil or rounded to zero.

Source:

ABS National Aboriginal and Torres Strait Islander Social Survey 2002, 1994, Cat. no. 4714.0 (unpublished).

Table 7A.4.5 Tobacco consumption for people aged 18 years or over, age standardised, 2004-05 (a), (b)

			1	Non-remote	ote						Remote				cilcaton	
	Major cities	ies	Inner regional	nal	Outer regional	ona!	Tota/		Remote	4	Very remote (d)	(p) ∈	Tota/		Australia	
	Proportion (%)	RSE (%)	Proportion (%)	RSE	Proportion (%)	RSE	RSE Proportion (%)	RSE	Proportion (%)	RSE	Proportion (%)	RSE	Proportion (%)	RSE	Proportion (%)	RSE
Indigenous																
Current smoker																
Daily	44.6	5.3	45.7	8.9	48.2	5.1	46.0	3.3	45.2	7.3	na	na	:	:	46.3	2.5
Other	1.8	56.4	1.2	40.6	1.6	31.1	1.5	26.9	2.1	40.8	na	na	:	:	1.9	18.5
Ex-smoker	27.4	10.6	25.0	10.5	21.6	9.2	25.1	6.3	24.9	14.1	na	na	:	:	23.6	5.5
Never smoked	26.2	8.1	28.1	10.0	28.6	8.1	27.5	4.8	27.8	9.4	na	na	:	:	28.2	3.8
Total (c)	100.0	I	100.0	1	100.0	I	100.0	I	100.0	I	na	na	:	:	100.0	I
Non-Indigenous	"															
Current smoker																
Daily	19.7	2.4	23.7	3.4	25.0	5.5	21.0	1.9	32.3	9.8	na	na	:	:	21.1	1.9
Other	2.0	7.4	1.9	15.2	1.7	18.2	1.9	6.5	1.6	41.2	na	пa	:	:	1.9	6.4
Ex-smoker	29.5	1.6	30.8	3.2	30.9	4.4	29.9	1.5	26.5	9.2	na	пa	:	:	29.9	1.5
Never smoked	48.8	1.6	43.6	3.2	42.5	4.4	47.2	1.5	39.7	9.2	na	пa	:	:	47.1	1.5
Total (c)	100.0	1	100.0	ı	100.0	I	100.0	I	100.0	I	na	na	:	:	100.0	ı

RSE=Relative standard error.

(a) RSE of between 25 and 50 per cent and should be used with caution. Data are subject to sampling variability too high for most practical purposes. Estimate has a RSE greater than 50 per cent and is considered too unreliable for general use.

(b) This refers to smoking of tobacco, including manufactured (packet) cigarettes, roll-your-own cigarettes, cigars and pipes, but excludes chewing tobacco and smoking of non-tobacco products. Current daily smokers refers to people who smoked one or more cigarettes (or pipes or cigars) per day at the time of interview.

(c) Includes smoker status not known.

(d) Age standardised Indigenous data for the very remote area are not provide by the ABS as non-Indigenous data for the very remote area are not available (they were not collected in the 2004-05 NHS). The records for the very remote areas have been attributed appropriately to national estimates.

- Nil or rounded to zero (including null cells). na Not available. .. Not applicable.

OVERCOMING INDIGENOUS DISADVANTAGE: KEY **INDICATORS 2009**

ATTACHMENT TABLES

Table 7A.4.5 Tobacco consumption for people aged 18 years or over, age standardised, 2004-05 (a), (b)

,	7	RSE		
Cilcator	Australia	Proportion (%)		
		RSE		
	Total	Proportion (%)		
	(p) e	RSE		
Remote	Very remote (d)	Proportion (%)		
		RSE		
	Remote	Proportion (%)		
		RSE		
	Tota/	Proportion (%)		
	nal	RSE		
note	Outer regional	Proportion (%)		
Von-remote	nal	RSE Propo		
Ν	Inner regional	RSE Proportion (%)		
	S	RSE (%)		
	Major cities	Proportion (%)		

Source: ABS National Aboriginal and Torres Strait Islander Health Survey 2004-05, Cat. no. 4715.0.55.005 (unpublished); ABS National Health Survey 2004-05: Summary of Results, Cat. no. 4362.0 (unpublished).

Table 7A.4.6

Current daily smokers aged 18 years or over, by sex and remoteness, age standardised (a), (b)

Table 7A.4.6

			Indigenous	6					Non-Indigenous	snou		
-	Males		Females		Total		Males		Females	S	Total	
-	Proportion RSE (%)	RSE (%)	Proportion (%)	RSE (%)								
1995 (c)												
Major cities	53.8	21.0	40.6	19.4	46.3	13.6	26.4	1.2	19.4	4.	22.8	0.9
Inner regional	57.1	23.2	33.5	32.7	46.2	20.0	25.2	2.3	21.3	2.5	23.3	1.7
Outer regional	45.1	19.9	49.7	18.5	47.2	13.6	28.6	2.2	19.7	4.0	24.2	2.4
Total non-remote	9.09	12.0	42.1	12.4	46.0	8.8	26.4	1.0	19.8	1.2	23.0	0.8
Remote	na	na	na	na	na	na	na	na	na	na	na	na
Very remote	na	na	na	na	na	na	na	na	na	na	na	na
Total remote	:	:	:	:	:	:	:	:	:	:	:	:
Australia	:	:	:	:	:	:	:	:	:	:	:	:
2001												
Major cities	44.6	14.0	37.1	12.1	39.7	9.4	25.0	3.1	18.0	3.4	21.4	2.4
Inner regional	41.1	25.7	50.2	9.2	45.6	10.2	23.2	4.7	22.0	2.7	22.6	3.6
Outer regional	58.2	12.8	58.1	9.5	58.2	7.7	28.0	6.3	22.0	7.6	25.1	5.0
Total Non-remote	47.3	9.6	47.6	6.7	47.3	6.1	24.9	2.3	19.1	2.8	21.9	1.7
Remote	47.1	20.3	44.1	18.2	46.2	14.1	35.6	12.7	23.2	21.0	30.3	10.7
Very remote (d)	na	na	na	na	na	na	na	na	na	na	na	na
Total remote	:	:	:	:	:	:	:	:	:	:	:	:
Australia	51.0	6.1	47.0	2.7	48.8	4.5	25.1	2.3	19.2	2.8	22.1	1.7

Current daily smokers aged 18 years or over, by sex and remoteness, age standardised (a), (b) Table 7A.4.6

Males Proportion (%) RSE (%) 2004-05 42.3 9.2 Major cities 46.3 9.7 Outer regional 50.1 7.0		sport of sport						Non-Indigenous	snou		
l		Females		Total		Males		Females		Total	
	SE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)
	9.5	45.9	9.9	44.6	5.3	22.8	3.5	16.8	3.2	19.7	2.4
	9.7	44.5	9.4	45.7	8.9	26.5	4.2	21.0	5.7	23.7	3.4
	7.0	46.6	9.9	48.2	5.1	27.2	5.9	22.8	7.9	25.0	5.2
Total non-remote 46.1	2.0	45.9	4.2	46.0	3.3	23.9	2.4	18.2	2.8	21.0	1.9
Remote 44.3	10.7	46.1	7.9	45.2	7.3	38.5	13.3	26.6	18.9	32.3	9.8
Very remote (d) na	na	na	na	na	na	na	na	na	na	na	na
Total remote	:	:	:	:	:	:	:	:	:	:	:
Australia 48.2	3.7	44.7	3.4	46.3	2.5	24.1	2.4	18.3	2.8	21.1	1.9

RSE=Relative standard error.

(a) Estimates with a RSE of between 25 per cent to 50 per cent should be used with caution. Estimates with a RSE greater than 50 per cent are considered too unreliable for general use. This refers to smoking of tobacco, including manufactured (packet) cigarettes, roll-your-own cigarettes, cigars and pipes, but excludes chewing tobacco and smoking of non-tobacco products. Current daily smokers refers to people who smoked one or more cigarettes (or pipes or cigars) per day at the time of interview. . @

(c) Data from the 1995 National Health Survey are for non-remote areas only.

(d) Age standardised Indigenous data for the very remote area are not provide by the ABS as non-Indigenous data for the very remote area are not available (they were not collected in the 2001 and 2004-05 NHS). The records for the very remote areas have been attributed appropriately to national estimates.

na Not available. .. Not applicable.

ABS National Health Survey: Aboriginal and Torres Strait Islander Results 2001, Cat. No. 4715.0 (unpublished); ABS National Health Survey 2001, Cat. No. 4364.0 (unpublished); ABS National Aboriginal and Torres Strait Islander Health Survey 2004-05, Cat. no. 4715.0.55.005 (unpublished); ABS National Health Survey 2004-05: Summary of Results, Cat. no. 4362.0 (unpublished). Source:

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009

Table 7A.4.7

Current daily smokers aged 18 years or over, by sex and age, non-remote areas only (a), (b)

Table 7A.4.7

			Indigenous	sn					Non-Indigenous	snou		
	Males		Females	S	Tota/		Males		Females	S	Total	
	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion _F	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)
1995												
18–24 years	55.0	19.5	4.44	20.3 –	49.4	14.9	31.6	2.5	27.7	2.8	29.7	1.8
25–34 years	74.1	15.8	53.8	17.4 –	63.4	11.2	33.7	2.0	27.7	2.2	30.7	1.5
35-44 years	48.8	22.0	43.4	22.2 –	46.0	16.8	29.7	2.1	20.9	2.6	25.3	1.7
45–54 year	30.1	32.8	33.7	31.0 –	31.9	24.0	25.1	2.7	18.0	3.2	21.6	2.0
55 years and over	46.8	29.7	37.6	29.5 –	41.7	22.2	17.5	2.6	11.4	2.3	14.3	1.9
Total 18+	55.5	10.0	45.0	10.5 –	20.0	7.4	26.9	1.0	20.0	1.2	23.4	0.8
AS total 18+	9.05	12.0	42.1	12.4 –	46.0	8.8	26.4	1.0	19.8	1.2	23.0	0.8
2001												
18–24 years	43.9	17.8	67.9	14.3 –	50.3	10.8	30.6	6.7	24.3	6.5	27.5	4.8
25-34 years	43.1	14.4	44.1	11.6 –	43.6	10.7	32.6	3.7	25.5	5.4	29.0	2.7
35-44 years	55.8	6.6	0.09	8.7 –	58.1	9.9	30.0	4.3	23.3	5.4	26.6	3.9
45–54 year	48.9	15.4	40.8	19.5 –	44.7	12.6	22.9	5.1	18.4	6.1	20.6	3.9
55 years and over	44.7	27.2	41.0	18.6 –	42.7	14.8	15.0	5.9	6.6	4.7	12.3	3.7
Total 18+	47.1	8.4	49.6	0.0	48.4	5.4	25.1	2.3	19.0	2.8	22.0	1.7
AS total 18+	47.3	9.6	47.6	6.7 –	47.3	6.1	24.9	2.3	19.1	2.8	21.9	1.7

Current daily smokers aged 18 years or over, by sex and age, non-remote areas only (a), (b) Table 7A.4.7

Table 7A.4.7

			Indigenous	sn					Non-Indigenous	snot		
	Males		Females	8	Tota/		Males		Females		Total	
	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion RS (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)
2004-05												
18–24 years	45.8	8.6	49.6	9.0 –	47.8	6.1	29.3	7.7	22.4	7.5	25.9	5.7
25-34 years	52.5	8.6	53.0	6.5 –	52.8	5.5	29.3	5.8	22.8	5.4	26.0	3.6
35-44 years	54.9	6.3	55.5	6.8	55.2	4.7	29.2	4.7	22.8	5.4	26.0	3.6
45–54 year	51.5	10.3	55.8	7.1 –	53.7	5.9	24.6	5.1	19.7	5.8	22.1	4.0
55 years and over	32.4	14.5	26.6	16.1 –	29.3	10.8	13.9	5.2	9.1	7.2	11.4	4.6
Total 18+	48.7	4.4	49.8	3.7 –	49.3	2.9	23.8	2.4	17.9	2.8	20.8	1.9
AS total 18+	46.1	5.0	45.9	4.2 –	46.0	3.3	23.9	2.4	18.2	2.8	21.0	1.9

AS=Age Standardised. RSE=Relative standard error.

(a) RSE of between 25 and 50 per cent and should be used with caution. Data are subject to sampling variability too high for most practical purposes. Estimate has a RSE greater than 50 per cent and is considered too unreliable for general use.

(b) This refers to smoking of tobacco, including manufactured (packet) cigarettes, roll-your-own cigarettes, cigars and pipes, but excludes chewing tobacco and smoking of non-tobacco products. Current daily smokers refers to people who smoked one or more cigarettes (or pipes or cigars) per day at the time of

ABS National Health Survey: Aboriginal and Torres Strait Islander Results 2001, Cat. no. 4715.0 (unpublished); ABS National Health Survey 2001, Cat. no. 4364.0 (unpublished); ABS National Aboriginal and Torres Strait Islander Health Survey 2004-05, Cat. no. 4715.0.55.005 (unpublished); ABS National Health Survey 2004-05: Summary of Results, Cat. no. 4362.0 (unpublished). Source:

Current daily smokers aged 18 years or over, age standardised, 2004-05 (a), (b) Table 7A.4.8

	NSN	Vic	Qld	WA	SA	Tas	ACT	NT (c) Australia	Australia
Indigenous									
Proportion (%)	47.6	47.0	46.7	38.7	47.4	49.0	37.1	49.6	46.3
RSE (%)	5.6	10.3	4.8	6.4	6.5	6.9	15.7	2.7	2.5
Non-Indigenous									
Proportion (%)	20.8	21.1	22.4	19.5	20.6	24.5	14.9	du	21.1
RSE (%)	4.0	3.8	3.7	5.0	3.4	5.3	7.6	du	1.9

RSE=Relative standard error.

(a) RSE of between 25 and 50 per cent and should be used with caution. Data are subject to sampling variability too high for most practical purposes. Estimate has a RSE greater than 50 per cent and is considered too unreliable for general use.

(b) This refers to smoking of tobacco, including manufactured (packet) cigarettes, roll-your-own cigarettes, cigars and pipes, but excludes chewing tobacco and smoking of non-tobacco products. Current daily smokers refers to people who smoked one or more cigarettes (or pipes or cigars) per day at the time of (c) The sample size in the NT was considered too small to produce reliable estimates for the NT in the ABS 2004-05 NHS, but NT records in the survey have been attributed appropriately to national estimates.

np Not available for publication but included in total where applicable, unless otherwise indicated.

Source: ABS National Aboriginal and Torres Strait Islander Health Survey 2004-05, Cat. no. 4715.0.55.005 (unpublished); ABS National Health Survey 2004-05: Summary of Results, Cat. no. 4362.0 (unpublished).

Current daily smokers aged 18 years or over (a), (b) Table 7A.4.9

			Indigenous	Sr					Non-Indigenous	snou		
	Males		Females	(0)	Tota/	I Î	Males		Females		Tota/	
	Proportion RSE (%)	SE (%)	Proportion (%)	RSE (%)	Proportion RSE (%)	(%)	Proportion (%)	RSE (%)	Proportion RS (%)	RSE (%)	Proportion (%)	RSE (%)
2001												
18–24 years	51.8	13.6	53.9	11.9	52.8	9.8	30.4	6.7	24.5	6.5 –	27.5	4.7
25–34 years	50.8	10.1	45.8	10.1	48.2	8.5	32.9	3.7	25.5	5.5 -	29.1	2.8
35-44 years	57.3	7.7	61.4	6.9	59.5	5.3	30.3	4.2	23.4	5.6 –	26.8	3.8
45–54 year	51.0	13.2	4.14	15.3	46.0	10.4	23.1	5.1	18.5	6.1	20.8	3.9
55 years and over	46.3	19.5	38.2	16.9	41.9	11.4	15.0	5.8	10.0	4.7 –	12.4	3.5
Total 18+	52.0	5.2	49.4	2.0	20.7	3.9	25.3	2.3	19.1	2.8 –	22.1	1.7
2004-05												
18–24 years	50.4	9.9	9.09	7.0	50.5	4 .8	29.4	7.5	22.6	7.4 –	26.0	5.6
25–34 years	55.8	6.3	53.5	5.3	54.6	4.2	29.4	5.7	22.9	5.3 –	26.1	3.5
35-44 years	56.9	4.6	53.6	5.5	55.1	3.7	29.2	4.7	22.8	5.4 –	26.0	3.6
45–54 year	49.8	8.2	51.1	6.3	50.5	6.4	24.8	5.0	19.8	5.8 –	22.3	3.9
55 years and over	35.0	10.6	25.9	12.9	30.1	8.0	14.1	5.2	9.5	7.2 –	11.6	4.5
Total 18+	51.3	3.3	48.9	3.0	50.0	2.2	24.0	2.4	18.0	2.8 –	20.9	1.9

RSE=Relative standard error.

(a) RSE of between 25 and 50 per cent and should be used with caution. Data are subject to sampling variability too high for most practical purposes. Estimate has a RSE greater than 50 per cent and is considered too unreliable for general use. (b) This refers to smoking of tobacco, including manufactured (packet) cigarettes, roll-your-own cigarettes, cigars and pipes, but excludes chewing tobacco and smoking of non-tobacco products. Current daily smokers refers to people who smoked one or more cigarettes (or pipes or cigars) per day at the time of ATTACHMENT

Current daily smokers aged 18 years or over (a), (b) Table 7A.4.9

ABS National Health Survey: Aboriginal and Torres Strait Islander Results 2001, Cat. no. 4715.0 (unpublished); ABS National Health Survey 2001, Cat. no. 4364.0 (unpublished); ABS National Aboriginal and Torres Strait Islander Health Survey 2004-05, Cat. no. 4715.0.55.005 (unpublished); ABS National Health Survey 2004-05: Summary of Results, Cat. no. 4362.0 (unpublished). Source:

TABLES ATTACHMENT

Current daily smokers, Indigenous people aged 18 years or over, 2004-05 Table 7A.4.10

Proportion RSI (%) (%) (%) (%) Major cities 45.6 Inner regional 50.5 Outer regional 51.1 Total non-remote 48.7 Remote 50.0					
emote	(%) RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)
emote	45.6 8.0	51.7	5.7	49.0	4.6
emote	50.5 8.4	45.8	8.5	48.2	0.9
l non-remote	51.1 6.2	9.09	0.9	50.8	4.6
	48.7 4.4	49.8	3.7	49.3	2.9
	50.0 9.5	51.4	7.3	50.8	9.9
Very remote 61.4	61.4 4.3	44.6	8.9	52.4	3.9
Total remote 57.9	57.9 4.1	46.7	5.1	51.9	3.3
Australia 51.3	51.3 3.3	48.9	3.0	50.0	2.2

RSE=Relative standard error.

Source: ABS National Aboriginal and Torres Strait Islander Health Survey 2004-05, Cat. no. 4715.0.55.005 (unpublished).

Table 7A.5.1 Body mass index group for people aged 18 years and over, non-remote areas, by sex, by age, 2004-05

	Unit	18–24	25–34	35–44	45–54	55+	Total non-age- standardised	Total age- standardised
Indigenous								_
Males								
Underweight	%	4.9	2.8	1.3	3.0	1.5	2.8	2.4
Normal range	%	47.9	36.7	32.1	26.7	24.2	35.0	31.7
Overweight	%	30.0	36.9	30.9	37.9	38.6	34.4	35.5
Obese	%	17.2	23.6	35.7	32.4	35.6	27.8	30.4
Total	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Total number	no.	23 659	30 298	24 815	17 084	12 976	108 832	108 832
Females								
Underweight	%	10.0	5.0	6.8	3.5	3.1	6.0	5.2
Normal range	%	51.0	38.4	30.0	29.2	24.0	35.9	32.4
Overweight	%	20.0	22.0	25.3	26.4	30.0	24.0	25.6
Obese	%	18.9	34.7	37.8	40.9	42.9	34.1	36.8
Total	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Total number	no.	23 241	30 492	25 199	17 191	13 759	109 881	109 881
Persons								
Underweight	%	7.4	3.9	4.1	3.2	2.3	4.4	3.8
Normal range	%	49.4	37.6	31.0	28.0	24.1	35.5	32.1
Overweight	%	25.1	29.4	28.1	32.1	34.2	29.2	30.5
Obese	%	18.0	29.1	36.8	36.7	39.4	30.9	33.6
Total	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Total number	no.	46 899	60 790	50 014	34 275	26 735	218 714	218 714

Table 7A.5.1 Body mass index group for people aged 18 years and over, non-remote areas, by sex, by age, 2004-05

	Unit	18–24	25–34	35–44	45–54	55+	Total non-age- standardised	Total age- standardised
Non-Indigenous								_
Males								
Underweight	%	3.1	0.6	0.6	0.3	1.1	1.0	1.0
Normal range	%	61.5	39.4	29.3	29.0	35.0	37.0	36.9
Overweight	%	28.3	42.6	47.3	45.9	44.9	43.0	43.0
Obese	%	7.1	17.5	22.9	24.7	19.1	19.0	19.1
Total	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Total number	no.	872 938	1 319 692	1 349 293	1 263 596	2 065 028	6 870 547	6 870 547
Females								
Underweight	%	10.2	4.9	3.5	2.0	3.3	4.2	4.3
Normal range	%	62.4	56.8	54.1	47.6	43.1	51.0	51.3
Overweight	%	19.4	24.5	26.1	30.2	33.2	27.9	27.8
Obese	%	8.0	13.9	16.3	20.2	20.4	16.8	16.7
Total	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Total number	no.	821 509	1 274 595	1 321 853	1 216 939	2 072 681	6 707 577	6 707 577
Persons								
Underweight	%	6.5	2.7	2.0	1.2	2.2	2.6	2.6
Normal range	%	61.9	47.9	41.6	38.1	39.0	43.9	44.0
Overweight	%	24.0	33.7	36.8	38.2	39.1	35.5	35.5
Obese	%	7.5	15.7	19.6	22.5	19.8	17.9	17.9
Total	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Total number	no.	1 694 448	2 594 286	2 671 146	2 480 535	4 137 709	13 578 124	13 578 124

Source: ABS 2004-05 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS) cited in AIHW (Australian Institute of Health and Welfare) 2008, Aboriginal and Torres Strait Islander Health Performance Framework, 2008 Report: Detailed Analyses, Cat. no. IHW 22, Canberra.

Table 7A.5.2 Dietary behaviours for people aged 12 years and over, non-remote areas, 2004-05 (per cent)

	12–14 (a)	15–24 (a)	25–34	35–44	45–54	55+	Total non-age- standardised	Total age- standardised
Indigenous								
Usual daily intake of vege	etables							
Does not eat vegetable	s 2	2	1	1	2	2	2	2
1 serve or less	20	24	27	21	21	16	23	21
Low usual daily vegetable intake	22	27	28	22	23	18	24	23
2–4 serves	66	65	63	65	66	71	65	66
Recommended daily intake (5 serves or more)	12	8	9	13	11	11	10	11
Total	100	100	100	100	100	100	100	100
Usual daily intake of fruit								
Does not eat fruit	5	14	13	12	12	7	12	11
1 serve or less	41	46	48	53	43	37	46	45
Low usual daily intake	46	61	61	65	55	43	58	55
2–4 serves	51	37	37	32	41	53	40	42
5 serves or more	2	3	2	2	4	4	3	3
Recommended daily intake (2 serves or more)	54	39	39	35	45	57	42	45
Total	100	100	100	100	100	100	100	100
Usual type of milk								
Whole	88	81	76	73	68	58	76	71
Low/reduced fat	8	11	12	17	16	24	14	17
Skim	1	4	6	7	6	11	5	7
Soy	np	_	2	np	2	2	1	1
None of the above(b)	np	_	_	np	3	1	1	1
Total drinks milk	98	97	96	98	96	95	97	96
Total	100	100	100	100	100	100	100	100
Non-Indigenous								
Usual daily intake of vege	etables							
Does not eat vegetables	1	1	1	1	-	-	1	1
1 serve or less	23	27	24	20	18	13	20	20
Low usual daily vegetable intake	24	29	25	21	18	14	21	21
2-4 serves	67	63	65	66	65	67	66	66

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009

Table 7A.5.2 Dietary behaviours for people aged 12 years and over, non-remote areas, 2004-05 (per cent)

	12–14 (a)	15–24 (a)	25–34	35–44	45–54	55+	Total non-age- standardised	Total age- standardised
Recommended daily intake (5 serves or more)	9	9	11	13	16	19	14	14
Total	100	100	100	100	100	100	100	100
Usual daily intake of fruit								
Does not eat fruit	5	10	8	8	6	3	7	7
1 serve or less	39	44	45	42	38	32	39	40
Low usual daily intake	44	53	53	50	44	36	46	46
2–4 serves	51	43	43	46	52	58	50	50
5 serves or more	5	4	3	4	4	6	4	4
Recommended daily intake (2 serves or more)	56	47	47	50	56	64	54	54
Total	100	100	100	100	100	100	100	100
Usual type of milk								
Whole	69	55	49	48	37	35	45	45
Low/reduced fat	22	25	28	29	38	35	31	31
Skim	4	11	13	13	13	17	13	13
Soy	np	3	4	4	5	5	4	4
None of the above (b)	np	1	1	1	1	1	1	1
Total drinks milk	98	95	96	95	94	94	95	95
Total	100	100	100	100	100	100	100	100

⁽a) The National Health and Medical Research Council's (NHMRC) Australian dietary guidelines for adults has been applied to adolescents aged 12–18 years. For adults, the NHMRC's Australian dietary guidelines recommend a minimum of five serves of vegetables and two serves of fruit per day (NHMRC 2003a). For adolescents aged 12–18 years, the daily food consumption guidelines for fruit and vegetable intake recommend three serves of fruit and three serves of vegetables (NHMRC 2003b).

Source: ABS National Aboriginal and Torres Strait Islander Health Survey 2004-05, Cat. no. 4715.0, Canberra; AlHW (Australian Institute of Health and Welfare) 2008, Aboriginal and Torres Strait Islander Health Performance Framework, 2008 Report: Detailed Analyses, Cat. no. IHW 22, Canberra; NHMRC (National Health and Medical Research Council) 2003a, Dietary Guidelines for Australian Adults, Canberra; NHMRC 2003b, Dietary Guidelines for Children and Adolescents in Australia, Canberra.

⁽b) Includes 'evaporated or sweetened condensed milk'.

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

Table 7A.5.3 Indigenous people aged 12 years and over, by usual daily intake of vegetables and fruit, non-remote areas, 2001 and 2004-05 (per cent)

	2001	2004-05
Recommended usual daily vegetable intake	na	10
Recommended usual daily fruit intake	44	42
Low usual daily vegetable intake	18	24
Low usual fruit intake	56	58

Source: AHMAC (Australian Health Ministers' Advisory Council) 2008, Aboriginal and Torres Strait Islander Health Performance Framework Report 2008, Canberra derived from ABS National Health Survey: Aboriginal and Torres Strait Islander Results 2001, Cat. no. 4715.0; ABS National Aboriginal and Torres Strait Islander Health Survey 2004-05, Cat. no. 4715.0, Canberra.

Table 7A.5.4 Usual daily intake of vegetables and fruit for people aged 12 years and over, non-remote areas, age-standardised, 2004-05 (per cent)

	Indigenous	Non-Indigenous
Recommended usual daily vegetable intake	11	14
Recommended usual daily fruit intake	45	54
Low usual daily vegetable intake	23	21
Low usual fruit intake	55	46

Source: ABS National Aboriginal and Torres Strait Islander Health Survey 2004-05, Cat. no. 4715.0, Canberra; ABS National Health Survey 2004-05: Summary of Results, Cat. no. 4362.0.

Table 7A.5.5 Indigenous people aged 12 years and over, by dietary behaviours, by remoteness, 2004-05 (per cent)

	Remote	Non-remote	Total Indigenous
Eats vegetables daily	84	98	95
Does not eat vegetables daily	15	2	5
Total (a)	100	100	100
Eats fruit daily	80	88	86
Does not eat fruit daily	20	12	14
Total(a)	100	100	100
Usual type of milk			
Whole	87	76	79
Low/reduced fat	4	14	11
Skim	2	5	5
Soy	*_	1	1
None of the above(b)	*1	*1	*1
Total drinks milk	95	97	96
Does not drink milk	5	3	4
Total(c)	100	100	100
Salt added after cooking			
Never/rarely	16	35	30
Sometimes	30	23	25
Usually	53	43	46
Total(d)	100	100	100

^{*} Estimate is subject to sampling variability too high for most practical purposes

Source: ABS National Aboriginal and Torres Strait Islander Health Survey 2004-05, Cat. no. 4715.0, Canberra.

⁽a) Includes whether eats fruit/vegetables not known.

⁽b) Includes evaporated or sweetened condensed milk.

⁽c) Includes usual type of milk not known.

⁽d) Includes frequency salt is added after cooking not known.

⁻ Nil or rounded to zero.

Table 7A.6.1 Deciduous (infant) tooth decay in 4- to 10-year-old children enrolled in school dental services in NSW, SA and the NT, by Indigenous status and location (a) (b)

		Indigen	ous			Non-Indigenous			
Age	Metropolita	an	Rural/Remote		Metropolitan		Rural/Rer	note	
Proportion of chil	dren with decay	-free decid	duous teeth (dmft=0)					
	%	SE	%	SE	%	SE	%	SE	
4 years	41.6	4.4	31.0	2.3	69.7	0.6	64.3	0.5	
5 years	47.7	2.5	31.8	1.6	70.9	0.2	62.2	0.5	
6 years	36.6	2.8	24.2	1.7	64.5	0.4	56.8	0.3	
7 years	51.8	2.2	28.8	1.5	62.9	0.3	54.2	0.5	
8 years	43.6	2.9	28.6	1.6	58.9	0.4	51.6	0.6	
9 years	48.9	2.3	38.1	1.6	62.2	0.3	54.2	0.5	
10 years	57.0	2.9	44.9	1.8	66.1	0.4	59.7	0.6	
Number of decide	uous teeth affec	ted by ded	cay (dmft)						
	Mean	SE	Mean	SE	Mean	SE	Mean	SE	
4 years	2.89	0.33	3.56	0.19	1.31	0.03	1.39	0.05	
5 years	2.63	0.20	4.13	0.15	1.20	0.01	1.68	0.03	
6 years	2.74	0.18	4.09	0.15	1.42	0.02	1.82	0.03	
7 years	2.09	0.13	3.43	0.12	1.44	0.01	1.86	0.02	
8 years	2.20	0.15	3.16	0.11	1.48	0.02	1.87	0.03	
9 years	1.98	0.12	2.28	0.09	1.26	0.01	1.60	0.02	
10 years	1.39	0.13	1.66	0.08	1.00	0.01	1.27	0.02	
Proportion of dec	ay-affected dec	iduous tee	eth that are u	ntreated (d/	dmft) (c)				
	%	SE	%	SE	%	SE	%	SE	
4 years	86.8	3.0	82.1	1.9	64.2	0.6	68.7	0.5	
5 years	59.1	2.4	70.8	1.5	55.5	0.3	52.5	0.5	
6 years	54.0	2.9	68.3	1.9	48.5	0.4	43.9	0.3	
7 years	44.6	2.2	65.7	1.6	43.4	0.3	38.2	0.5	
8 years	43.4	2.9	61.5	1.7	39.3	0.4	33.8	0.5	
9 years	40.4	2.2	55.6	1.7	37.0	0.3	30.9	0.4	
10 years	41.1	2.9	55.5	1.8	35.1	0.4	29.7	0.5	

SE Standard error.

Source: Jamieson, L., Armfield, J.A. and Roberts-Thomson, K.F. 2006, 'The role of location in Indigenous and non-Indigenous child oral health', *Journal of Public Health Dentistry*, vol. 66, pp. 123–130.

⁽a) Data were collected over a 12 month period in each jurisdiction; 2000 (NSW), 2003 (SA) and 2002 (NT). Of 326 099 children examined, 10 743 (3.2 per cent) were Indigenous.

⁽b) dmft=d+m+f, where: d=number of untreated decayed teeth; m=number of missing teeth; f=number of filled teeth. Lowercase denotes deciduous (infant) teeth.

⁽c) Proportion of decayed teeth that are untreated is an indicator of unmet need for dental treatment.

Table 7A.6.2 Permanent (adult) tooth decay in 6- to 14-year-old children enrolled in school dental services in NSW, SA and the NT, by Indigenous status and location (a) (b)

		Indigen	ous			Non-Indig	genous	
Age	Metropoli	tan	Rural/Ren	note	Metropol	itan	Rural/Rei	mote
Proportion of chil	dren with deca	y-free perr	nanent teeth	(DMFT=0)				
	%	SE	%	SE	%	SE	%	SE
6 years	93.8	1.4	90.4	1.2	96.7	0.1	97.1	0.1
7 years	89.5	1.3	83.5	1.3	90.4	0.2	90.1	0.3
8 years	78.7	2.4	74.6	1.5	86.0	0.3	86.7	0.4
9 years	74.7	2.0	68.9	1.6	83.1	0.2	83.3	0.4
10 years	66.6	2.8	60.6	1.8	78.9	0.3	79.1	0.5
11 years	67.8	2.2	60.5	1.7	75.4	0.3	75.3	0.4
12 years	59.3	3.2	53.5	2.2	70.6	0.4	70.9	0.6
13 years	57.4	3.2	52.3	3.1	70.0	0.3	65.6	0.6
14 years	41.3	5.1	40.0	4.1	62.1	0.6	59.1	0.9
Number of perma	anent teeth aff	ected by de	ecay (DMFT)					
	Mean	SE	Mean	SE	Mean	SE	Mean	SE
6 years	0.13	0.04	0.18	0.03	0.08	0.00	0.05	0.00
7 years	0.22	0.03	0.36	0.03	0.22	0.00	0.22	0.01
8 years	0.44	0.06	0.53	0.04	0.30	0.01	0.28	0.01
9 years	0.56	0.05	0.68	0.04	0.39	0.01	0.36	0.01
10 years	0.77	0.08	1.00	0.06	0.47	0.01	0.44	0.01
11 years	0.80	0.07	1.05	0.06	0.59	0.01	0.59	0.01
12 years	1.08	0.11	1.33	0.09	0.77	0.01	0.70	0.02
13 years	1.44	0.16	1.77	0.17	0.88	0.01	0.90	0.01
14 years	1.83	0.31	2.27	0.24	1.18	0.03	1.19	0.04
Proportion of dec	cay-affected pe	rmanent te	eth that are	untreated (C)/DMFT) (c)			
	%	SE	%	SE	%	SE	%	SE
6 years	78.8	2.4	73.0	1.8	65.4	0.4	66.5	0.31
7 years	55.6	2.2	71.5	1.5	55.3	0.3	54.7	0.46
8 years	59.8	2.9	71.5	1.6	50.6	0.4	48.7	0.57
9 years	50.2	2.3	62.8	1.6	42.6	0.3	39.7	0.45
10 years	45.0	2.9	64.2	1.7	39.0	0.4	37.4	0.56
11 years	44.5	2.3	59.3	1.7	37.3	0.3	35.0	0.46
12 years	38.5	3.2	63.2	2.1	37.3	0.4	35.7	0.64
13 years	50.3	3.3	59.4	3.0	37.1	0.3	33.1	0.6
14 years	44.5	5.2	52.8	4.2	37.1	0.6	34.7	0.88

SE Standard error.

⁽a) Data were collected over a 12 month period in each jurisdiction; 2000 (NSW), 2003 (SA) and 2002 (NT). Of 326 099 children examined, 10 743 (3.2 per cent) were Indigenous.

⁽b) DMFT=D+M+F where: D=number of untreated decayed teeth; M=number of missing teeth; F=number of filled teeth. Uppercase denotes permanent (adult) teeth.

Table 7A.6.2 Permanent (adult) tooth decay in 6- to 14-year-old children enrolled in school dental services in NSW, SA and the NT, by Indigenous status and location (a) (b)

	Indig	enous	Non-Indigenous		
Age	Metropolitan	Rural/Remote	Metropolitan	Rural/Remote	

⁽c) Proportion of decayed teeth that are untreated is an indicator of unmet need for dental treatment.

Source: Jamieson, L., Armfield, J.A. and Roberts-Thomson, K.F. 2006, 'The role of location in Indigenous and non-Indigenous child oral health', *Journal of Public Health Dentistry*, vol. 66, pp. 123–130.

Table 7A.6.3 Tooth decay in remote Indigenous children, 2000–2003, and in all children in SA, the NT and Australia, 2000

		Remote Indigenous communities (a)	SA (b)	NT (b)	Aust (b) (c)
Proportion of chil	dren a	nged 5-6 years with decay	r-affected deciduous te	eeth (dmft>0) (c)	
Proportion	%	69.0	58.5	47.6	59.1
95 per cent confidence interval	%	57.3–80.7	57.6–59.4	45.8–49.4	58.7–59.5
Standard error	%	5.9	0.4	0.9	0.2
RSE	%	8.6	0.7	2.0	0.3
Proportion of 12	year-o	ld children with decay-aff	ected permanent teeth	n (DMFT>0) (c)	
Proportion	%	43.6	31.4	37.5	35.1
95 per cent confidence interval	%	27.8–59.4	30.2–32.6	34.5–40.5	34.4–35.8
Standard error	%	8.0	0.6	1.5	0.3
RSE	%	18.5	1.9	4.0	1.0
Number of decid	uous t	eeth affected by decay (d	mft), 5-6 years old (c)		
Mean	no.	2.9	1.5	2.3	1.6
95 per cent confidence interval	no.	2.3–3.6	1.4–7.5	2.1–2.4	1.5–1.6
Standard error	no.	0.3	0.0	0.1	0.0
RSE	no.	11.2	2.1	2.7	0.6
Number of perma	anent t	teeth affected by decay ([OMFT), 12 years old (c)	
Mean	no.	0.9	0.6	1.0	0.8
95 per cent confidence interval	no.	0.5–1.3	0.6–0.6	0.9–1.1	0.8–0.8
Standard error	no.	0.2	0.0	0.1	0.0
RSE	no.	22.8	3.3	5.2	1.3

SE Standard error. RSE Relative standard error.

⁽a) Data were collected for 831 children from remote Indigenous communities in all jurisdictions in the period 2000 to 2003.

⁽b) Data are from the Child Dental Health Survey, Australia 2000. Data were collected for 3108 children in SA, 14 195 children in the NT, and 311 346 children across all states and territories.

⁽c) Data are for all states and territories and are from the Child Dental Health Survey, Australia 2000. NSW data are from field examinations that underestimate decay experience. Accordingly, data for Australia also underestimate decay experience.

Table 7A.6.3 Tooth decay in remote Indigenous children, 2000–2003, and in all children in SA, the NT and Australia, 2000

(d) dmft=d+m+f, where: d=number of untreated decayed teeth; m=number of missing teeth; f=number of filled teeth. Lowercase denotes deciduous (infant) teeth; uppercase denotes permanent (adult) teeth (DMFT).

Source: Armfield, Roberts-Thomson, Slade and Spencer 2004, Dental Health Differences between Boys and Girls: The Child Dental Health Survey, Australia 2000, Australian Institute of Health and Welfare, Cat. no. DEN 131, Canberra; Jamieson, Armfield and Roberts Thomson 2007, Oral Health of Aboriginal and Torres Strait Islander Children, Australian Institute of Health and Welfare, Cat. no. DEN 167, Canberra.

Table 7A.6.4 Tooth decay in Indigenous children in remote areas and Indigenous children in SA, NSW and the NT

		Remote communities (a)	NSW (b)	SA (b)	NT (b)
Proportion of 6 y	ear-old	children with decay-aff	ected deciduous teet	th (dmft>0) (c)	
Proportion	%	69.0	55.0	49.3	67.8
95 per cent confidence interval	%	57.3–80.7	51.8–58.2	44.2–54.4	64.7–70.9
Standard error	%	5.9	1.6	2.6	1.6
RSE	%	8.6	2.9	5.3	2.3
Proportion of 12	year-ol	d children with decay-a	ffected permanent te	eth (DMFT>0) (c)	
Proportion	%	43.6	35.9	37.0	46.1
95 per cent confidence interval	%	27.8–59.4	29.3–42.5	29.7–44.3	41.0–51.2
Standard error	%	8.0	3.3	3.7	2.6
RSE	%	18.5	9.3	10.0	5.6
Number of decid	duous te	eth affected by decay ((dmft), 6 years old (c)	
Mean	no.	2.9	2.1	3.6	4.0
95 per cent confidence interval	no.	2.3–3.6	1.7–2.5	3.1–4.1	3.6–4.3
Standard error	no.	0.3	0.2	0.3	0.2
RSE	no.	11.2	10.0	6.9	4.5
Number of perm	anent te	eeth affected by decay	(DMFT), 12 years old	d (c)	
Mean	no.	0.9	0.9	1.3	1.3
95 per cent confidence interval	no.	0.5–1.3	0.6–1.2	1.0–1.5	1.1–1.5
Standard error	no.	0.2	0.2	0.1	0.1
RSE	no.	22.8	18.4	10.2	7.5

SE Standard error. RSE Relative standard error.

⁽a) Data were collected for 831 children from remote Indigenous communities in all jurisdictions in the period 2000 to 2003.

⁽b) Data were collected over a 12 month period in each jurisdiction; 2000 (NSW), 2003 (SA) and 2002 (NT). Of 326 099 children examined, 10 743 (3.2 per cent) were Indigenous.

⁽c) dmft=d+m+f, where: d=number of untreated decayed teeth; m=number of missing teeth; f=number of filled teeth. Lowercase denotes deciduous (infant) teeth; uppercase denotes permanent (adult) teeth (DMFT).

Table 7A.6.4 Tooth decay in Indigenous children in remote areas and Indigenous children in SA, NSW and the NT

Remote communities (a)	NSW (b)	SA (b)	NT (b)
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Source: Jamieson, Armfield and Roberts Thomson 2007, *Oral Health of Aboriginal and Torres Strait Islander Children*, Australian Institute of Health and Welfare, Cat. no. DEN 167, Canberra.

Table 7A.6.5 Tooth decay in adults, by Indigenous status and age group (a) (b)

			Indige	Indigenous				Non-Indigenous	snous		
Age		All ages	15–34 years 35–54 years	35–54 years	55–74 years	75 years or over	All ages	15–34 years	35–54 years 55–74 years		75 years or over
Proportion of adults with untreated tooth decay (D>0) (c)	Its with	untreated to	oth decay (D>0	(c)							
Proportion	%	57.0	68.9	58.2	44.2	n.p.	25.1	25.3	26.6	22.4	22.2
95 per cent confidence interval	%	40.3–72.2	37.0–89.3	34.0–79.0	25.8–64.4	д	23.3–26.9	22.0–29.0	24.1–29.3	19.8–25.1	17.5–27.7
Standard error	%	8.4	14.5	12.3	10.4	n.p.	6.0	1.8	1.3	4.	2.6
RSE	%	14.7	21.0	21.1	23.4	n.p.	3.7	7.0	5.0	6.1	11.7
Number of decayed surfaces per person	'ed surf	aces per per	Son								
Mean	0	3.2	1.7	5.1	1.6	n.p.	1.0	1.0	<u></u>	0.7	0.8
95 per cent confidence interval	no.	0.6–5.8	0.3–3.1	0.2–10.1	0.5–2.8	л.	0.9–1.1	0.8–1.3	0.9–1.4	0.6–0.8	0.5–1.0
Standard error	%	1.3	0.7	2.5	9.0	n.p.	0.1	0.1	0.1	0.1	0.1
RSE	%	41.3	41.8	49.6	36.3	n.p.	7.0	12.0	11.8	8.6	16.3
Number of teeth affected by decay (DMFT)	affecte	d by decay (E	OMFT)								
Mean	%	14.8	7.0	15.8	23.3	n.p.	12.8	4.5	14.3	22.2	24.4
95 per cent confidence interval	%	12.2–17.3	3.4–10.5	13.4–18.2	21.7–24.9	д.	12.4–13.3	4.1–5.0	13.9–14.8	21.9–22.5	23.7–25.0
Standard error	%	1.3	1.8	1.2	0.8	n.p.	0.2	0.2	0.2	0.2	0.3
RSE	%	8.7	25.7	7.7	3.4	n.p.	1.8	5.1	1.5	0.7	<u>+</u> 4.

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009

ATTACHMENT TABLES

Table 7A.6.5 Tooth decay in adults, by Indigenous status and age group (a) (b)

		Indig	Indigenous				Non-Indigenous	enous		
All ages 15–34 years 35–54 years		35–54 ye	ars	55–74 years	75 years or over	All ages	15–34 years 3	15–34 years 35–54 years 55–74 years	years	75 years or over
Proportion of adults with decay-free teeth (DMFT=0)	e teeth (DMFT=0)	(
% 3.8 11.2			0.7	0.0	n.p.	10.0	24.3	2.5	0.0	0.8
% 1.2–11.6 2.7–36.2 0.1–5.0	2.7–36.2		5.0	I	.п Б	8.5–11.7	20.8–28.2	1.6–3.8	I	0.1–5.6
% 2.2 7.6 0	7.6	0	0.7	0.0	n. G	0.8	1.9	0.5	0.0	0.8
% 58.7 67.9 100.0	67.9		0.	ı	n.p.	8.1	7.8	21.6	I	102.5

SE Standard error. RSE Relative standard error.

(a) Data are sourced from the National Adult Oral Health Survey, conducted between 2004 and 2006. Of 14 123 people aged 15 years or over who participated in telephone interviews, 229 were Indigenous (AIHW 2008). Of 5505 people who also underwent an oral examination, 87 were Indigenous. DMFT=D+M+F where: D=number of untreated decayed teeth; M=number of missing teeth; F=number of filled teeth. Uppercase denotes permanent (adult) teeth. <u>a</u>

(c) Proportion of decayed teeth that are untreated is an indicator of unmet need for dental treatment.

Generations: the National Survey of Adult Oral Health 2004–06, Australian Institute of Health and Welfare, Cat. no. DEN 165, Canberra, pp. 81–142. Roberts-Thomson, K.F. and Do, L. 2007, 'Oral health status', in Slade, G.D., Spencer, A.J. and Roberts-Thomson, K.F. (eds), Australia's Dental Source:

Table 7A.6.6 Potentially preventable hospitalisations for dental conditions per 1000 people, by Indigenous status, 2004-05 to 2006-07 (a), (b), (c), (d)

	Unit	Indigenous	Other (e)	Total
2004-05	per 1000 people	3.63	2.53	2.56
2005-06	per 1000 people	3.85	2.60	2.63
2006-07	per 1000 people	3.95	2.62	2.72

- (a) Hospitalisation rates are directly age standardised using the 2001 Australian population.
- (b) Data are based on state/territory of usual residence.
- (c) Separations for which care type was reported as Newborn with no qualified days, and records for Hospital boarders and Posthumous organ procurement have been excluded.
- (d) Includes ICD-10-AM codes K02, K03, K04, K05, K06, K08, K09.8, K09.9, K12 and K13.
- (e) Other includes hospitalisations identified as not Indigenous as well as those with a 'not stated' Indigenous status.

Source: AIHW National Hospital Morbidity Database (unpublished).

Table 7A.6.7 Mean number of teeth with decay for children enrolled in the NT School Dental Service, by age and Indigenous status, 2002–2003 (a)

		, , ,	,	(-)
	Indigenous		Non-Indigenous	
Age	Mean	SE	Mean	SE
dmft (infant teeth)				
4 years	3.40	0.19	1.01	0.07
5 years	4.34	0.18	1.47	0.08
6 years	4.14	0.18	1.76	0.09
7 years	3.73	0.15	1.80	0.08
8 years	3.17	0.13	1.89	0.08
9 years	2.44	0.12	1.71	0.07
10 years	1.74	0.09	1.21	0.06
DMFT (permanent teeth)				
6 years	0.15	0.03	0.07	0.01
7 years	0.27	0.03	0.15	0.02
8 years	0.47	0.04	0.21	0.02
9 years	0.60	0.05	0.30	0.03
10 years	0.93	0.06	0.36	0.03
11 years	1.02	0.07	0.52	0.04
12 years	1.24	0.10	0.71	0.05
13 years	1.81	0.27	0.80	0.10

SE Standard error.

Source: Jamieson, L., Armfield, J.A. and Roberts-Thomson, K.F. 2006, 'Oral health inequalities among Indigenous and non-Indigenous children in the Northern Territory of Australia', *Community Dentistry and Oral Epidemiology*, vol. 34, pp. 267–276.

⁽a) DMFT=D+M+F where: D=number of untreated decayed teeth; M=number of missing teeth; F=number of filled teeth. Uppercase denotes permanent (adult) teeth. dmft=refers to deciduous (infant) teeth and is derived in the same way as DMFT.

⁽b) Of 12 584 children examined, 4 417 (35.1 per cent) were Indigenous.

Table 7A.6.8 Mean deciduous (infant) tooth decay (dmft) for 4- to 10-year-old children enrolled in the NT School Dental Service, by SEIFA index of relative socio-economic disadvantage, age and Indigenous status, 2002 (a) (b) (c) (d)

Age	Indigenous		Non-Indigenous	3
SEIFA	Mean	SE	Mean	SE
dmft				
4 years				
1	4.26	0.28	0.69	0.16
2	3.58	0.61	1.45	0.22
3	2.48	0.26	0.89	0.08
4	na	na	1.94	0.51
5 years				
1	5.31	0.25	1.36	0.25
2	3.32	0.38	1.85	0.17
3	2.99	0.28	1.28	0.10
4	na	na	1.23	0.37
6 years				
1	4.78	0.26	1.84	0.30
2	3.91	0.41	1.73	0.16
3	2.87	0.30	1.78	0.20
4	na	na	1.57	0.36
7 years				
1	4.28	0.21	1.57	0.28
2	3.57	0.37	1.82	0.14
3	2.65	0.24	1.81	0.11
4	na	na	1.96	0.40
8 years				
1	3.47	0.18	1.89	0.24
2	3.13	0.29	2.12	0.15
3	2.45	0.21	1.77	0.10
4	na	na	1.48	0.33
9 years				
1	2.54	0.17	1.91	0.23
2	2.29	0.33	1.82	0.14
3	2.38	0.20	1.62	0.09
4	na	na	1.80	0.33
10 years				
1	1.93	0.13	1.36	0.19
2	1.72	0.28	1.48	0.14
3	1.31	0.16	1.05	0.08
4	na	na	1.00	0.20

SEIFA Socio-Economic Indices for Areas. SE Standard error.

Table 7A.6.8 Mean deciduous (infant) tooth decay (dmft) for 4- to 10-year-old children enrolled in the NT School Dental Service, by SEIFA index of relative socio-economic disadvantage, age and Indigenous status, 2002 (a) (b) (c) (d)

Age	Indigenous	Non-Indigenous
SEIFA	Mean SE	Mean SE

- (a) dmft=d+m+f, where: d=number of untreated decayed teeth; m=number of missing teeth; f=number of filled teeth. Lowercase denotes deciduous (infant) teeth.
- (b) The SEIFA was developed by the ABS using data derived from the 2001 Census of Population and Housing, and uses a range of measures to rank areas based on their relative social and economic wellbeing. It takes into account variables relating to income, educational attainment, unemployment, and dwellings without motor vehicles. In the table above, '1' denotes the most disadvantaged areas and '4' denotes the least disadvantaged areas.
- (c) Of the 12 584 children examined, 4 417 (35.1 per cent) were Indigenous.
- (d) For Indigenous children, no cases fell into the least disadvantaged category (4).

na Not applicable.

Source: Jamieson, L., Armfield, J.A. and Roberts-Thomson, K.F. 2006, 'Oral health inequalities among Indigenous and non-Indigenous children in the Northern Territory of Australia', *Community Dentistry and Oral Epidemiology*, vol. 34, pp. 267–76.

Table 7A.6.9 Mean permanent tooth decay (DMFT) for 6- to 13-year-old children enrolled in the NT School Dental Service, by SEIFA index of relative socio-economic disadvantage, age and Indigenous status, 2002-03 (a) (b) (c) (d)

Age	Indigenous		Non-Indigenous	<u> </u>
SEIFA	Mean	SE	Mean	SE
DMFT				
6 years				
1	0.15	0.03	0.00	0.00
2	0.28	0.11	0.08	0.02
3	0.09	0.04	0.06	0.01
4	na	na	0.10	0.08
7 years				
1	0.33	0.05	0.14	0.07
2	0.29	0.08	0.15	0.03
3	0.15	0.05	0.12	0.02
4	na	na	0.36	0.14
8 years				
1	0.51	0.06	0.14	0.06
2	0.43	0.08	0.22	0.03
3	0.36	0.07	0.20	0.03
4	na	na	0.42	0.18
9 years				
1	0.74	0.08	0.24	0.07
2	0.52	0.10	0.29	0.05
3	0.40	0.06	0.31	0.03
4	na	na	0.42	0.13
10 years				
1	1.10	0.09	0.24	0.07
2	0.77	0.11	0.43	0.06
3	0.67	0.10	0.36	0.04
4	na	na	0.23	0.09
11 years				
1	1.19	0.11	0.65	0.15
2	0.83	0.12	0.60	0.07
3	0.70	0.10	0.45	0.05
4	na	na	0.61	0.16
12 years				
1	1.35	0.13	0.43	0.13
2	1.27	0.21	0.82	0.09
3	0.81	0.17	0.69	0.07
4	na	na	0.67	0.22

Table 7A.6.9 Mean permanent tooth decay (DMFT) for 6- to 13-year-old children enrolled in the NT School Dental Service, by SEIFA index of relative socio-economic disadvantage, age and Indigenous status, 2002-03 (a) (b) (c) (d)

Age	Indigenous		Non-Indigenous	
SEIFA	Mean	SE	Mean	SE
13 years				_
1	1.93	0.13	0.85	0.36
2	1.62	0.21	0.89	0.18
3	1.33	0.17	0.83	0.16
4	na	na	0.29	0.16

SEIFA Socio-Economic Indices for Areas. SE Standard error.

- (a) DMFT=D+M+F where: D=number of untreated decayed teeth; M=number of missing teeth; F=number of filled teeth. Uppercase denotes permanent (adult) teeth.
- (b) The SEIFA was developed by the ABS using data derived from the 2001 Census of Population and Housing, and uses a range of measures to rank areas based on their relative social and economic wellbeing. It takes into account variables relating to income, educational attainment, unemployment, and dwellings without motor vehicles. In the table above, '1' denotes the most disadvantaged areas and '4' denotes the least disadvantaged areas.
- (c) Of the 12 584 children examined, 4 417 (35.1 per cent) were Indigenous.
- (d) For Indigenous children, no cases fell into the least disadvantaged category (4).

na Not applicable.

Source: Jamieson, L., Armfield, J.A. and Roberts-Thomson, K.F. 2006, 'Oral health inequalities among Indigenous and non-Indigenous children in the Northern Territory of Australia', *Community Dentistry and Oral Epidemiology*, vol. 34, pp. 267–76.

Table 7A.6.10 SA, infant and permanent tooth decay, mean dmft and DMFT by Indigenous status and age, 2003 Child Dental Health Survey (a)

Age	Indigenous	Non-Indigenous
Mean dmft (deciduous teeth)		
4 years	3.91	1.31
5 years	3.40	1.50
6 years	2.71	1.77
7 years	3.04	1.88
8 years	2.89	1.93
9 years	2.74	1.81
10 years	1.81	1.50
Mean DMFT (permanent teeth)		
7 years	0.44	0.20
8 years	0.62	0.36
9 years	0.79	0.45
10 years	0.75	0.53
11 years	1.24	0.61
12 years	1.31	0.81
13 years	1.95	1.02
14 years	2.28	1.40
15 years	2.27	1.65

⁽a) DMFT=D+M+F where: D=number of untreated decayed teeth; M=number of missing teeth; F=number of filled teeth. Uppercase denotes permanent (adult) teeth. dmft=refers to deciduous (infant) teeth and is derived in the same way as DMFT.

Source: Ellershaw, A., Spencer, A.J. and Slade, G.D. 2005, *Oral Health in South Australia 2004*. Australian Research Centre for Population Oral Health, University of Adelaide.

Table 7A.6.11 SA, proportion of children with calculus and gingival bleeding by Indigenous status and age, children attending school dental service, 2003 Child Dental Health Survey

	Unit	Indigenous	Non-Indigenous
6 to 7 years			
Healthy	%	63.8	80.2
Bleeding (a)	%	33.4	15.0
Calculus (b)	%	2.8	4.8
8 to 9 years			
Healthy	%	51.8	66.7
Bleeding (a)	%	43.5	23.5
Calculus (b)	%	4.7	9.8
10 to 11 years			
Healthy	%	50.4	62.4
Bleeding (a)	%	40.1	24.2
Calculus (b)	%	9.5	13.4
12 to 13 years			
Healthy	%	47.8	59.7
Bleeding (a)	%	36.7	22.6
Calculus (b)	%	15.5	17.7
14 to 15 years			
Healthy	%	42.7	57.8
Bleeding (a)	%	39.4	19.4
Calculus (b)	%	17.9	22.8

⁽a) Gingival bleeding is bleeding of the gums. It is associated with gingivitis, an inflammation of the gums surrounding the teeth caused by a buildup of plaque or food particles.

Source: Ellershaw, A., Spencer, A.J. and Slade, G.D. 2005, *Oral Health in South Australia 2004*. Australian Research Centre for Population Oral Health, University of Adelaide.

⁽b) Calculus is a hard deposit of mineralized plaque which is attached to crowns and/or roots of teeth.

Table 7A.6.12 Dental hospitalisations for children aged 2 to 14 years, per 100 000 children, by sociodemographic characteristics and Indigenous status, 2002-03 (a) (b)

	Indigenous		Non-Indigenou	IS
	Mean	SE	Mean	SE
Sex				
Males	641.8	26.4	587.5	5.3
Females	544.2	25.0	607.5	5.6
Age-group				
less than 5 years	906.9	38.6	625.6	7.0
5 to 9 years	667.4	32.7	687.7	7.1
10 to 14 years	180.7	17.9	479.8	5.9
Location				
Major city	539.9	31.8	577.4	4.7
Regional	529.0	25.5	636.9	6.9
Remote	778.5	41.7	571.5	20.9

SE Standard error.

⁽a) Admission rates are based on hospitalisations data from 1 297 public and private hospitals obtained from the Australian Institute of Health and Welfare National Hospital Morbidity Database for 2002-03. Rates were calculated by dividing the number of hospital dental general anaesthetic admissions for each age by the estimated resident population (ERP) of the same age and multiplying by 100 000 (Jamieson and Roberts-Thomson 2006). ERP counts for all ages were provided by the ABS (unpublished).

⁽b) Of the 24 874 children examined, 1 062 (4.3 per cent) were Indigenous.

Table 7A.6.13 Hospital dental procedure rates for children aged 2 to 14 years, per 100 000 children, by sex and Indigenous status, 2002-03 (a) (b)

	Indigenous		Non-Indigenous	
	Mean	SE	Mean	SE
Male				
Extraction	601.5	25.5	450.5	4.7
Pulpal	59.9	8.1	88.2	2.1
Restoration	396.7	20.7	310.9	3.9
Other	91.5	10.0	129.9	2.5
Female				
Extraction	520.0	24.4	470.5	4.9
Pulpal	52.9	7.8	83.0	2.1
Restoration	317.5	19.1	291.3	3.9
Other	58.7	8.2	117.3	2.5

SE Standard error.

⁽a) Procedure rates are based on separation data from 1 297 public and private hospitals obtained from the Australian Institute of Health and Welfare National Hospital Morbidity Database for 2002-03. Data were collected for administrative purposes by hospital-employed dentists and recorded in standardized International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian modification (ICD-10-AM) codes, which are patient record codes used throughout Australian hospitals. There were over 80 ICD-10-AM dental procedure codes which were grouped into 'extraction', pulpal care', 'restorative care', or 'other' (included the provision of splints, crowns or bridges).

⁽b) Of the 24 874 children examined, 1 062 (4.3 per cent) were Indigenous.

Table 7A.6.14 Hospital dental procedure rates for children aged 2 to 14 years, per 100 000 children, by age group and Indigenous status, 2002-03

	Indigenous		Non-Indigenous	
	Mean	SE	Mean	SE
Less than 5 years old				
Extraction	865.4	37.7	390.1	5.5
Pulpal	99.7	12.9	136.1	3.3
Restoration	579.7	30.9	426.3	5.8
Other	129.6	14.7	199.0	3.9
5 to 9 years old				
Extraction	628.7	31.7	530.5	6.2
Pulpal	62.9	10.1	115.1	2.9
Restoration	409.5	25.6	418.5	5.6
Other	85.4	11.7	165.6	3.5
10 to 14 years old				
Extraction	164.7	17.1	456.5	5.8
Pulpal	3.5	2.5	8.6	0.8
Restoration	65.5	10.8	65.9	2.2
Other	7.1	3.5	10.5	0.9

SE Standard error.

⁽a) Procedure rates are based on separation data from 1 297 public and private hospitals obtained from the Australian Institute of Health and Welfare National Hospital Morbidity Database for 2002-03. Data were collected for administrative purposes by hospital-employed dentists and recorded in standardized International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian modification (ICD-10-AM) codes, which are patient record codes used throughout Australian hospitals. There were over 80 ICD-10-AM dental procedure codes which were grouped into 'extraction', pulpal care', 'restorative care', or 'other' (included the provision of splints, crowns or bridges).

⁽b) Of the 24 874 children examined, 1 062 (4.3 per cent) were Indigenous.

Table 7A.6.15 Hospital dental procedure rates for children aged 2 to 14 years, per 100 000 children, by remoteness area and Indigenous status, 2002-03 (a) (b) (c)

	Indigenous		Non-Indigenous	S
	Mean	SE	Mean	SE
Major city				
Extraction	498.6	30.5	436.6	4.2
Pulpal	58.3	10.5	98.6	0.2
Restoration	280.3	22.9	283.5	3.3
Other	122.3	15.2	147.3	2.4
Regional (d)				
Extraction	506.8	24.9	508.9	6.2
Pulpal	32.1	0.6	59.6	0.2
Restoration	318.1	19.8	331.1	5.0
Other	34.5	6.5	76.5	2.4
Remote (e)				
Extraction	738.0	40.6	418.0	17.9
Pulpal	99.0	14.9	104.1	0.9
Restoration	524.3	34.3	342.4	16.2
Other	94.5	14.6	151.9	10.8

SE Standard error.

- (a) Procedure rates are based on separation data from 1 297 public and private hospitals obtained from the Australian Institute of Health and Welfare National Hospital Morbidity Database for 2002-03. Data were collected for administrative purposes by hospital-employed dentists and recorded in standardized International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian modification (ICD-10-AM) codes, which are patient record codes used throughout Australian hospitals. There were over 80 ICD-10-AM dental procedure codes which were grouped into 'extraction', pulpal care', 'restorative care', or 'other' (included the provision of splints, crowns or bridges).
- (b) Of the 24 874 children examined, 1 062 (4.3 per cent) were Indigenous.
- (c) Remoteness areas are derived from the Australian Standard Geographical Classification (ASGC) developed by the ABS. The ASGC Remoteness classification identifies a region in Australia as having a particular degree of remoteness. Remoteness areas comprise five categories: major cities, inner regional, outer regional, remote, and very remote. The degree of remoteness of each place is determined using the Accessibility/Remoteness Index of Australia (ARIA). Places with similar ARIA scores are aggregated to form the remoteness areas in each State and Territory. For more information on how ARIA is defined see chapter 2 of the Report.
- (d) Includes 'inner regional' and 'outer regional' classifications of the ASGC.
- (e) Includes 'remote' and 'very remote' classifications of the ASGC.

Table 7A.7.1

Table 7A.7.1 **K5 level of psychological distress, people aged 18 years and over, age standardised, Australia, 2004-05 (a)**

	Indiger	nous	Non-Inc	digenous
	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)
Low/ Moderate distress level (b)	71.5	1.6	86.8	0.3
High/ Very high distress level (c)	26.6	4.3	13.1	2.2
Not applicable, unable to determine level (d)	1.9	20.5	0.1	25.8
Total	100.0	_	100.0	_

- (a) Estimates with an RSE of 25 per cent to 50 per cent should be interpreted with caution. Estimates with an RSE greater than 50 per cent are considered too unreliable for general use.
- (b) Represents a K5 score of 5-11.
- (c) Represents a K5 score of 12-25.
- (d) Includes refusals and persons with no K5 score.
 - Nil or rounded to zero.

Source: Australian Bureau of Statistics (ABS) 2006, National Aboriginal and Torres Strait Islander Health Survey 2004-05 (NATSIHS 2004-05), Cat. no. 4715.0 (unpublished); National Health Survey 2004-05 (NHS 2004-05), Cat. no. 4362.0 (unpublished).

Table 7A.7.2

Selected indicators of positive well being, Indigenous people aged 18 years and over, by State and Territory, Table 7A.7.2

	2004-	2004-05 (a), (b)	, (b))		-	•)	,			,		•	
	NSM	 	Vic	ပ	Qld	5	WA		SA		Tas		ACT		N		Total	_
	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)
Calm and peaceful																		
All/most of the time	54.7	4.4	51.2	8.3	67.9	3.7	56.9	6.4	55.1	5.5	54.0	5.4	54.1	7.0	60.7	4.6	56.4	1.9
Some of the time	25.5	7.7	27.9	13.1	25.9	7.5	26.2	9.3	27.2	10.6	24.5	12.1	26.9	12.0	22.7	10.4	25.6	3.6
A little of the time	13.6	11.1	12.3	18.6	11.0	13.3	11.2	13.3	11.8	15.0	16.3	14.9	13.9	18.6	7.2	17.5	11.6	6.3
None of the time	5.3	17.4	7.1	21.1	4.0	19.4	3.7	23.9	4.3	25.2	4.8	28.6	5.1	30.5	5.9	20.7	4.8	8.7
Total (c)	100.0	I	100.0	I	100.0	I	100.0	ı	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I
Happy All/most of the time	0	2	200	ď	7	, ,	7	7	7	7	0	0	72	7	7	Ċ	7	7
Some of the time	0.00		0.4.0		1 0	, o	7 - 7		7 - 7	t	5 5 6 0	t 4 0 4	7.0.7	t t	0 7	, , , ,	, , - 0 1 0	- <i>-</i> t
	7.17	0.0	7.77	0.0	0.0	o 0.	0. /	0.0	10./	4:4	0.17	-	0.0			- - -	0.0	4 0
A little of the time	7.8	14.1	8.7	25.3	2.6	15.2	7.1	14.3	6.3	17.4	10.3	18.9	8.0	25.8	3.1	23.6	9.9	7.0
None of the time	2.1	25.6	3.8	28.2	1.3	35.7	1.7	32.5	2.0	40.4	2.7	36.4	2.0	53.2	1.4	31.0	1.8	13.1
Total (c)	100.0	I	100.0	I	100.0	I	100.0	ı	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I
Full of life																		
All/most of the time	50.2	4.7	47.3	8.7	56.0	3.4	55.3	4.3	50.1	5.4	44.9	7.2	52.7	7.5	69.1	3.0	54.6	1.8
Some of the time	28.7	7.6	25.7	16.6	27.9	8.9	25.3	7.2	32.6	7.6	27.5	14.0	29.6	13.1	17.8	9.8	26.6	3.3
A little of the time	13.4	11.2	16.3	19.8	10.0	10.8	10.5	12.1	8.6	14.9	16.1	20.1	10.6	22.0	5.7	17.5	11.1	5.5
None of the time	9.9	16.0	10.1	15.8	5.2	17.3	6.7	18.1	0.9	21.9	11.0	17.4	7.1	29.2	3.6	18.3	6.2	7.3
Total (c)	100.0	I	100.0	I	100.0	I	100.0	ı	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I
Lot of energy																		
All/most of the time	43.3	5.3	36.8	8.5	49.3	4.3	47.0	5.5	42.1	7.8	39.2	9.0	45.5	9.2	61.3	3.9	47.2	2.2
Some of the time	30.4	6.5	38.4	11.2	30.9	6.3	29.5	7.4	32.3	8.3	32.1	9.5	30.3	12.4	24.3	7.8	30.3	3.2
A little of the time	17.9	10.0	14.0	15.5	13.1	11.9	15.2	9.2	17.9	11.6	16.3	11.9	17.2	15.8	6.7	15.1	4.4	2.0
OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009	S																∢	ATTACHM TAB

Table 7A.7.2

Selected indicators of positive well being, Indigenous people aged 18 years and over, by State and Territory, 2004-05 (a), (b) Table 7A.7.2

	NSN	>	Vic		Old		WA		SA		Tas		ACT		Z		Total	
	Prop (%)	Prop RSE (%) (%)	Prop RSE (%)	RSE (%)	Prop (%)	RSE (%)												
None of the time	7.4	16.3	7.4 16.3 10.3 16.0 5.7	16.0	5.7	17.0	6.1 17.7	17.7	6.4	22.8	12.0	20.8	7.0	35.4	4.0	17.6	9.9	7.6
Total (c)	100.0	ı	100.0	1	- 100.0	1	100.0	ı	100.0	1	100.0	I	100.0	1	100.0	1	100.0	1

RSE Relative standard error. Prop = Proportion.

Estimates with an RSE of 25 per cent to 50 per cent should be interpreted with caution. Estimates with an RSE greater than 50 per cent are considered too unreliable for general use. (a)

(b) Relates to the four week period prior to interview.

Includes not known and not stated responses and refusals.

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Nil or rounded to zero.

Source: ABS 2006, NATSIHS 2004-05 (unpublished).

Table 7A.7.3

Table 7A.7.3 **K5 level of psychological distress, people aged 18 years and over, by age groups, Australia, 2004-05 (a)**

	18–2	24	25–	34	35–4	14	45–	54	55	+	Tota	al
	Prop (%)	RSE (%)										
Indigenous												
Low/ Moderate distress level (b) High/ Very high	72.8	2.7	71.4	2.5	69.6	2.9	69.3	3.7	73.8	3.4	71.5	1.6
distress level (c)	26.0	7.3	27.1	6.6	29.2	6.5	29.5	8.7	23.0	10.5	26.6	4.3
Total (d)	100.0	_	100.0	-	100.0	-	100.0	_	100.0	_	100.0	_
Non-Indigenous												
Low/ Moderate distress level (b)	83.8	1.3	87.7	0.8	86.4	0.8	86.2	0.8	88.2	0.3	86.8	0.3
High/ Very high distress level (c)	16.1	7.0	12.3	6.0	13.4	5.0	13.6	4.9	11.7	2.2	13.1	2.2
Total (d)	100.0	-	100.0	-	100.0	_	100.0	-	100.0	_	100.0	_

RSE Relative standard error. Prop = Proportion.

⁽a) Estimates with an RSE of 25 per cent to 50 per cent should be interpreted with caution. Estimates with an RSE greater than 50 per cent are considered too unreliable for general use.

⁽b) Represents a K5 score of 5-11.

⁽c) Represents a K5 score of 12-25.

⁽d) Includes refusals and persons with no K5 score.

⁻ Nil or rounded to zero.

Table 7A.7.4

K5 level of psychological distress, people aged 18 years and over, age standardised, by remoteness areas, Australia, 2004-05 (a), (b) Table 7A.7.4

	Major Cities	ies	Regional	-E	Remote	٥	Total	
	Proportion (%)	RSE (%)						
Indigenous								
Low/ Moderate distress level (c)	73.7	3.2	70.8	2.5	70.1	2.8	71.5	1.6
High/ Very high distress level (d)	25.6	9.1	28.4	0.9	25.2	7.4	26.6	4.3
Total (e)	100.0	I	100.0	I	100.0	I	100.0	I
Non-Indiaenous								
Low/ Moderate distress level (c)	87.1	0.4	86.3	0.8	88.6	2.2	86.8	0.3
High/ Very high distress level (d)	12.8	2.9	13.6	4.7	11.4	17.0	13.1	2.2
Total (e)	100.0	ı	100.0	1	100.0	1	100.0	1

(a) Estimates with an RSE of 25 per cent to 50 per cent should be interpreted with caution. Estimates with an RSE greater than 50 per cent are considered too unreliable for general use.

Regional includes inner and outer regional areas. Remote includes remote and very remote areas. See glossary for definitions of remoteness areas. **Q**

(c) Represents a K5 score of 5–11.

(d) Represents a K5 score of 12–25.

(e) Includes refusals and persons with no K5 score.

Nil or rounded to zero.

Table 7A.7.5

K5 level of psychological distress, people aged 18 years and over, by State and Territory, 2004-05 (a) Table 7A.7.5

	Low/Moderate distress level (distress level (b)		High/Very I	High/Very high distress level (c)	level (c)	Total (d)
	Proportion (%) RSE (%) Rate F		(e)	Proportion (%)	RSE (%)	Rate Ratio (e)	Proportion (%) RSE (%): Ratio (e)
NSM	72.5	2.9	8.0	27.1	7.5	2.1	100.0
Victoria	9.69	5.2	8.0	29.4	12.1	2.1	100.0
Queensland	72.4	2.6	8.0	26.6	7.3	1.9	100.0
WA	70.6	4.0	8.0	27.9	10.3	2.6	100.0
SA	67.1	4.4	8.0	30.2	10.1	2.1	100.0
Tasmania	02:0	5.1	0.7	34.8	9.5	2.9	100.0
ACT	73.8	3.3	8.0	21.0	9.6	2.5	100.0
NT (c)	66.2	0.9	8.0	33.8	11.7	1.5	100.0
Total	71.3	1.5	0.8	27.2	3.8	2.0	100.0

Estimates with an RSE of 25 per cent to 50 per cent should be interpreted with caution. Estimates with an RSE greater than 50 per cent are considered too unreliable for general use. (a)

(b) Represents a K5 score of 5-11.

(c) Represents a K5 score of 12–25.

(d) Includes refusals and persons with no K5 score.

Rate ratios are age standardised within each state to compare Indigenous to non-Indigenous prevalence (e)

- Nil or rounded to zero.

Australian Bureau of Statistics (ABS) 2006, National Aboriginal and Torres Strait Islander Health Survey 2004-05 (NATSIHS 2004-05), Cat. no. 4715.0 (unpublished); National Health Survey 2004-05 (NHS 2004-05), Cat. no. 4362.0 (unpublished). Source:

Table 7A.7.6

K5 level of current psychological distress, by reported stressor in the last 12 months, Indigenous people aged 18 years and over, 2004-05 (a) Table 7A.7.6

	Low/ Moderate distress level (b)	s level (b)	High/ Very high distress level (c)	ess level (c)	Total (d)	
	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)
Serious illness or disability	63.4	3.1	35.0	5.4		
Serious accident	63.0	5.2	33.7	0.6	100.0	I
Death of family member or close friend	0.99	2.4	32.3	4.8	100.0	I
Divorce or separation	61.8	4.7	38.2	7.6	100.0	I
Not able to get a job	63.0	3.6	36.7	6.2	100.0	I
Lost job, made redundant, sacked	64.3	6.3	35.7	11.4	100.0	I
Alcohol related problems	59.1	3.8	39.2	5.7	100.0	I
Drug related problems	59.1	4.2	40.5	6.1	100.0	I
Witness to violence	62.2	4.3	35.6	7.1	100.0	I
Abuse or violent crime	55.8	5.3	42.2	6.9	100.0	I
Trouble with the police	6.09	4.3	38.0	9.9	100.0	I
Gambling problem	59.3	4.4	38.7	6.7	100.0	I
Member of family sent to jail/currently in jail	62.9	3.8	35.1	6.9	100.0	I
Overcrowding at home	58.8	3.9	37.7	5.7	100.0	I
Treated badly because Aboriginal/Torres Strait Islander	61.0	4.5	38.3	7.1	100.0	ı
RSE Relative standard error.						

Estimates with an RSE of 25 per cent to 50 per cent should be interpreted with caution. Estimates with an RSE greater than 50 per cent are considered too unreliable for general use. (a)

Represents a K5 score of 5–11.

(q) <u>ပ</u>

Represents a K5 score of 12–25.

(d) Includes refusals and persons with no K5 score.

- Nil or rounded to zero.

ABS 2006, NATSIHS 2004-05 (unpublished); NHS 2004-05 (unpublished). Source:

Table 7A.7.7

Table 7A.7.7 How often physical health problems were the main cause of negative feelings in the last four weeks, Indigenous people aged 18 years and over, Australia, 2004-05 (a), (b)

	Proportion (%)	RSE (%)
All of the time	5.3	8.9
Most of the time	6.9	9.4
Some of the time	9.0	6.8
A little of the time	9.8	6.9
None of the time	48.0	2.2
Not applicable, refusal, don't know/not stated	21.0	5.0
Total	100.0	_

- (b) Persons aged 18 years and over who scored greater than 1 on a K5 item.
 - Nil or rounded to zero.

⁽a) Estimates with an RSE of 25 per cent to 50 per cent should be interpreted with caution. Estimates with an RSE greater than 50 per cent are considered too unreliable for general use.

Table 7A.7.8

Table 7A.7.8 Whether had days unable to work/carry out normal activities due to negative feelings in last four weeks, Indigenous people aged 18 years and over, Australia, 2004-05 (a), (b)

	Proportion (%)	RSE (%)
Yes	17.1	5.1
No	63.4	1.7
Refusal, don't know/not stated	0.4	35.8
Total (c)	100.0	_

- (a) Estimates with an RSE of 25 per cent to 50 per cent should be interpreted with caution. Estimates with an RSE greater than 50 per cent are considered too unreliable for general use.
- (b) Persons aged 18 years and over who scored greater than 1 on a K5 item.
- (c) Includes Not applicable
 - Nil or rounded to zero.

Table 7A.7.9

Table 7A.7.9 Number of days unable to work/carry out normal activities because of negative feelings in the last four weeks, Indigenous people aged 18 years and over, Australia, 2004-05 (a)

	Proportion (%)	RSE (%)
less than 5 days	91.3	0.7
5–10 days	4.1	13.2
11 or more days	4.3	9.2
Not applicable, refusal, don't know/not stated	0.4	28.4
Total	100.0	_

⁽a) Estimates with an RSE of 25 per cent to 50 per cent should be interpreted with caution. Estimates with an RSE greater than 50 per cent are considered too unreliable for general use.

⁻ Nil or rounded to zero.

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009

Table 7A.7.10

Selected indicators of psychological distress, people aged 18 years and over, age standardised, by Table 7A.7.10

	State a	nd Te	rritory	State and Territory, 2004-05 (a), (b)	-05 (a)	(a)		î	<u>}</u>									
	NSM	^	Vic	ပ	Qld		WA	_	SA		Tas		ACT		(d) NT	(Total	
	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop F	RSE (%)	Prop (%)	RSE (%)	Prop F (%)	RSE (%)	Prop F (%)	RSE (%)
Indigenous																		
Nervous																		
All/most of the time	10.7	14.0	13.9	21.2	8.0	19.5	10.0	16.6	8.8	15.1	13.1	15.6	6.1	34.2	na	na	9.3	7.7
Some of the time	17.2	10.6	19.9	21.3	20.2	10.7	17.0	11.9	19.0	12.8		13.2	21.3	17.6	na	na	19.2	4.9
A little of the time	29.7	7.9	23.2	17.5	22.0	8.0	20.3	9.1	24.5	10.5	26.9	6.6	25.9	14.6	na	na	23.5	4.1
None of the time	41.9	8.9	42.3	10.0	48.9	2.7	49.7	6.5	46.5	7.5	38.5	10.5	46.7	12.2	na	na	46.5	2.9
Total (c)	100.0	1	100.0	I	100	I	100	I	100	I	100.0	I	100.0	I	na	na	100.0	I
Without hope																		
All/most of the time	6.7	17.9	8.4	20.1	7.8	17.4	7.8	20.1		18.3		24.0	8.6	31.8	na	na	7.2	8.3
Some of the time	11.2	13.8	13.8	17.9	12.9	10.7	13.0	14.6	12.8	18.2		13.2	13.5	19.4	na	na	12.8	5.7
A little of the time	17.0	11.6	10.5	29.1	14.7	10.7	15.7	10.0		12.2	4.4	14.2	12.1	27.1	na	na	15.0	5.9
None of the time	64.6	4.1	9.99	7.0	63.9	3.6	58.4	5.4	64.3	2.0	58.3	5.4	8.59	6.7	na	na	63.1	2.0
Total (c)	100.0	I	100.0	I	100	I	100	I	100	I	100.0	I	100.0	I	na	na	100.0	I
Restless or jumpy																		
All/most of the time	14.4	14.3	16.7	20.7	10.5	16.0	13.7	13.3	12.0	16.2	16.2	13.1	16.6	20.0	na	na	12.1	8.9
Some of the time	17.3	9.9	18.3	12.3	22.2	9.4	19.3	12.3	20.1	14.4	25.9	10.9	25.8	15.8	na	na	19.7	8.4
A little of the time	27.1	7.5	25.2	16.6	24.4	9.5	20.2	9.9		12.5	23.6	11.5	21.5	18.7	na	na	23.1	4.4
None of the time	40.7	6.3	39.2	12.8	42.1	6.4	43.1	8.9	43.0	9.8	34.1	9.7	36.2	14.7	na	na	43.3	2.9
Total (c)	100.0	I	100.0	I	100	I	100	I	100	I	100.0	I	100.0	I	na	na	100.0	I
That everything was an effort	effort	,	0		C		1	0				,	1			!	0	,
All/Most of the time	16.1	11.1	19.3	16.1	19.3	10.4	18./	13.2	18.0	14.2	. 7.02	15.4	7.02	24.0	na	na	16.6	5.1

Table 7A.7.10

Selected indicators of psychological distress, people aged 18 years and over, age standardised, by Table 7A 7 10

l able 7A.7.10	Select State	ed inc	Selected indicators of psych State and Territory, 2004-05	s of ps /, 2004	sychol -05 (a)	nologica (a), (b)	ıl distr	ess, p	eoble	aged	18 yea	ars an	ove	Selected indicators of psychological distress, people aged 18 years and over, age standardised, by State and Territory, 2004-05 (a), (b)	standa	ırdise	ı, by	
	NSM	>	Vic	LO CO	Qld	_	WA	4	SA		Tas		ACT		(b) TN	<u> </u>	Total	
	Prop	"	Prop	RSE	Prop		Prop	RSE		RSE (%)		RSE (%)	Prop	RSE (%)		RSE (%)		RSE (%)
	(%)	(%)	(%)	(%)	(%)	(%)	(%)	(%)	(%)	(%)	(%)	(%)	(%)	(%)	(%)	(%)	(%)	(%)
Some of the time	18.7	10.3	18.9	14.8	20.4	9.5	19.5	10.7	19.9	12.4	25.0	13.7	20.5	21.4	па	na	19.8	4.5
A little of the time	25.1	9.9	22.6	17.6	25.3	7.8	18.6	10.5	23.4	10.6	20.7	8.6	23.7	19.6	na	na	22.7	4.4
None of the time	39.7	7.5	38.5	13.6	34.2	6.4	39.1	9.0	37.3	10.6	33.5	10.6	35.1	18.0	Па	na	39.2	3.4
Total (c)	100.0	I	100.0	I	100	I	100	I	100	I	100.0	I	100.0	I	na	na	100.0	I
So sad that nothing could cheer you up	ould cheer	dn nok .	_															
All/most of the time	6.3	15.5	10.3	21.8	6.4	20.9	10.5	16.7	7.5	18.5	8.6	17.7	8.7	34.7	Па	na	7.2	7.5
Some of the time	9.4	13.7	10.4	20.3	16.0	10.3	15.1	12.3	14.3	16.0	12.4	16.1	10.6	27.7	Па	na	13.4	5.4
A little of the time	18.8	12.4	12.3	17.3	17.3	11.5	13.9	13.9	16.6	13.3	18.2	13.8	14.6	22.9	Па	na	16.2	0.9
None of the time	65.1	4 4	66.4	5.1	59.5	3.7	56.8	2.5	58.2	2.8	59.5	6.5	66.1	8.4	Па	na	61.5	2.1
Total (c)	100.0	I	100.0	I	100	I	100	I	100	I	100.0	I	100.0	I	na	па	100.0	I
Non-Indigenous																		
Nervous																		
All/most of the time	5.9	7.7	5.5	9.7	4.4	8.9	3.6	12.5	4.	11.2	5.0	10.0	4.6	15.1	du	du	5.1	4.7
Some of the time	13.1	4.7	16.4	4.6	13.6	2.7	11.4	7.4	13.3	9.4	11.4	7.0	13.2	6.7	С	du	13.8	2.5
A little of the time	28.1	2.6	26.8	2.9	25.7	3.6	25.3	4. 4.	28.8	3.3	24.0	5.3	33.3	3.5	du	du	27.0	1.6
None of the time	52.9	1.6	51.0	2.2	56.2	1.9	29.7	2.1	53.7	2.0	59.4	2.3	48.8	2.6	du	du	53.9	1.0
Total (c)	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	du	du	100.0	I
Hopeless	1	2		9	Ċ	0	1	•	Č	L		L	,	L 0	;	;	Ċ	C
All/Most of the time	2.7	11.3		10.4	3.0	10.6	2.7	14.4 4.	2.4	10.5		15.4	2. 4	18.5	du	du	Z.8	5.8
Some of the time	5.9	7.3	9.9	9.9	6.7	7.0	2.7	10.2	5.3	6.8	5.4	10.3	2.7	12.0	d	du	6.2	3.1

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009

Table 7A.7.10

Selected indicators of psychological distress, people aged 18 years and over, age standardised, by Table 7A.7.10

	State and Territory, 2004-05	nd Te	rritory	, 2004	sycilologi I-05 (a),	(a) (b)		433, L		age age))	<u>0</u>	(a), (b)	., aga			Ġ,	
	NSN	_	Vic		QId		WA	_	SA		Tas		ACT	L	(b) TN	g)	Total	
	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)
A little of the time	13.4	4.9	14.5	4.9	14.2	5.0	12.2	7.6	14.7	5.2	11.8	7.5	15.9	0.9	du	du	13.8	2.7
None of the time	78.0	1.0	75.4	1.2	76.0	<u></u>	79.4	1.5	77.5	<u></u>	79.4	1.3	76.0	1.7	du	du	77.1	9.0
Total (c)	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	100.0	1	d	du	100.0	I
Restless or fidgety																		
All/most of the time	7.0	9.9	7.3	6.3	7.8	6.4	6.7	9.4	7.7	8.5	7.5	8.6	6.5	12.7	du	du	7.3	3.5
Some of the time	18.0	4.1	19.8	4.1	19.2	4.2	18.2	6.3	19.7	3.4	16.2	5.4	22.3	5.2	ď	du	18.9	2.1
A little of the time	27.6	2.6	28.5	2.9	26.6	3.7	27.4	4.0	29.7	3.2	26.9	4.3	34.5	4.2	d	du	27.9	<u>4</u> .
None of the time	47.5	1.8	44.0	2.5	46.3	5.6	47.7	3.0	42.9	1.9	49.3	2.7	36.7	3.5	ď	du	45.9	1.2
Total (c)	100.0	I	100.0	1	100.0	I	100.0	1	100.0	I	100.0	I	100.0	I	du	du	100.0	I
That everything was an effort	ın effort																	
All/most of the time	7.6	4.7	7.2	6.9	8.5	6.4	7	6.6	7	2.7	8.7	7.8	7.2	10.6	du	du	7.6	လ
Some of the time	13.6	4.4	15	4.9	16.2	4.9	13.8	5.2	14.9	5.5	12.1	6.3	14.6	6.5	d	du	14.6	2.5
A little of the time	25.7	2.6	25.7	3.2	24	3.1	25.7	4.3	26	3.4	23.1	2	26.8	6.3	d	du	25.3	1.5
None of the time	53	1.5	51.7	1.9	51.1	1 .8	53.6	2.4	52.1	2.0	26	2.4	51.4	3.1	du	du	52.4	0.8
Total (c)	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	du	du	100.0	I
So sad that nothing could cheer you up	ould cheer	dn nok																
All/most of the time	2.4	10.1	2.5	10.5	6 .	15.6	2.0	17.5	1.9	12.1	1.9	15.0	1.7	22.0	du	du	2.2	2.0
Some of the time	5.5	7.7	5.2	8.5	5.1	8.4	5.0	1.1	5.1	9.7	4.2	12.7	5.4	14.5	du	du	5.2	4.0
A little of the time	11.9	5.3	12.2	5.4	12.5	5.3	11.8	7.6	12.4	5.3	10.4	8.3	11.8	8.1	du	du	12.0	2.3
None of the time	80.2	1.0	79.8	1.0	80.6	1.0	81.2	1.2	80.5	6.0	83.4	1.3	81.2	1.5	du	du	80.4	0.5
Total (c)	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	du	du	100.0	ı

Table 7A.7.10

Selected indicators of psychological distress, people aged 18 years and over, age standardised, by State and Territory, 2004-05 (a), (b) Table 7A.7.10

Total	Prop RSE	(%) (%)
(b) TN	Prop RSE	(%) (%)
ACT		(%) (%)
Tas	Prop RSE	(%) (%)
SA	Prop RSE	(%) (%)
WA		(%) (%)
Qld	Prop RSE	(%) (%)
Vic	Prop RSE	
NSM	Prop RSE	(%) (%)

RSE Relative standard error. Prop = Proportion.

(a) Relates to the four week period prior to interview.

Estimates with an RSE of 25 per cent to 50 per cent should be interpreted with caution. Estimates with an RSE greater than 50 per cent are considered too unreliable for general use. **Q**

(c) Includes not known and not stated responses and refusals.

Since 2000, the sample in the NT for some social surveys (including the 2004-05 National Health Survey) has been reduced to a level such that NT records contribute appropriately to national estimates but will not support reliable estimates for the NT. **©**

na Not available. – Nil or rounded to zero. np Not published.

Table 7A.7.11

Table 7A.7.11 Selected indicators of psychological distress, people aged 18 years and over, age standardised, by sex, Australia, 2004-05 (a), (b)

	Male	es	Fema	les	Tota	al
	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)
Indigenous						
Nervous						
All/most of the time	6.5	13.2	11.7	8.9	9.3	7.7
Some of the time	17.1	7.9	21.1	5.7	19.2	4.9
A little of the time	22.6	6.0	24.2	5.3	23.5	4.1
None of the time	52.2	4.0	41.6	3.9	46.5	2.9
Total (c)	100.0	_	100.0	_	100.0	_
Without hope						
All/most of the time	6.8	13.5	7.5	9.5	7.2	8.3
Some of the time	10.0	10.2	15.1	7.1	12.8	5.7
A little of the time	14.0	9.2	15.8	6.5	15.0	5.9
None of the time	67.2	2.6	59.5	2.5	63.1	2.0
Total (c)	100.0	_	100.0	_	100.0	_
Restless or jumpy						
All/most of the time	10.5	12.1	13.6	8.0	12.1	6.8
Some of the time	18.8	7.7	20.4	5.5	19.7	4.8
A little of the time	23.0	6.2	23.2	6.0	23.1	4.4
None of the time	46.0	4.3	41.0	3.7	43.3	2.9
Total (c)	100.0	_	100.0	_	100.0	_
That everything was ar	n effort					
All/most of the time	14.2	8.8	18.7	6.0	16.6	5.1
Some of the time	17.1	7.3	22.1	5.6	19.8	4.5
A little of the time	22.1	6.6	23.1	6.2	22.7	4.4
None of the time	44.9	4.6	34.2	4.6	39.2	3.4
Total (c)	100.0	_	100.0	_	100.0	_
So sad that nothing co.	uld cheer you	ир				
All/most of the time	5.1	14.1	9.1	8.8	7.2	7.5
Some of the time	10.3	10.2	16.0	5.7	13.4	5.4
A little of the time	14.2	9.6	17.9	6.9	16.2	6.0
None of the time	68.7	2.6	55.1	2.8	61.5	2.1
Total (c)	100.0	_	100.0	_	100.0	_

Table 7A.7.11

Table 7A.7.11 Selected indicators of psychological distress, people aged 18 years and over, age standardised, by sex, Australia, 2004-05 (a), (b)

	Male	es	Fema	les	Tota	al
	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)
Non-Indigenous						
Nervous						
All/most of the time	3.8	6.2	6.4	5.3	5.1	4.7
Some of the time	12.2	4.0	15.4	3.0	13.8	2.5
A little of the time	26.3	2.4	27.8	2.2	27.0	1.6
None of the time	57.6	1.2	50.3	1.4	53.9	1.0
Total (c)	100.0	_	100.0	_	100.0	_
Hopeless						
All/most of the time	2.4	9.9	3.3	6.1	2.8	5.8
Some of the time	5.0	5.6	7.3	3.8	6.2	3.1
A little of the time	12.3	4.0	15.2	3.2	13.8	2.7
None of the time	80.1	0.7	74.1	0.7	77.1	0.6
Total (c)	100.0	_	100.0	_	100.0	_
Restless or fidgety						
All/most of the time	7.6	4.8	6.9	4.7	7.3	3.5
Some of the time	18.4	3.1	19.3	2.8	18.9	2.1
A little of the time	28.4	2.1	27.4	1.8	27.9	1.4
None of the time	45.5	1.8	46.3	1.5	45.9	1.2
Total (c)	100.0	_	100.0	_	100.0	_
That everything was a	n effort					
All/most of the time	6.8	5.4	8.4	4.1	7.6	3
Some of the time	13.3	4.5	15.8	3	14.6	2.5
A little of the time	24.1	2.5	26.5	2	25.3	1.5
None of the time	55.7	1.1	49.1	1.1	52.4	0.8
Total (c)	100.0	_	100.0	_	100.0	_
So sad that nothing co	uld cheer you	ир				
All/most of the time	1.8	9.1	2.6	6.4	2.2	5.0
Some of the time	3.9	5.8	6.5	4.4	5.3	4.0
A little of the time	10.2	4.1	13.8	3.3	12.0	2.3
None of the time	83.9	0.7	76.9	0.7	80.4	0.5
Total (c)	100.0		100.0		100.0	

⁽a) Estimates with an RSE of 25 per cent to 50 per cent should be interpreted with caution. Estimates with an RSE greater than 50 per cent are considered too unreliable for general use.

⁽b) Relates to the four week period prior to interview.

⁽c) Includes not known and not stated responses and refusals.

Table 7A.7.11

Table 7A.7.11 Selected indicators of psychological distress, people aged 18 years and over, age standardised, by sex, Australia, 2004-05 (a), (b)

Males	Females	Total
Proportion (%) RSE (%)	Proportion (%) RSE (%)	Proportion (%) RSE (%)

⁻ Nil or rounded to zero.

Table 7A.7.12

Selected indicators of nsychological distress, people aged 18 years and oyer, by age groups. Australia. Table 7A.7.12

l able 7A.7.12	Selected Indic 2004-05 (a), (b)	idicato , (b)	rs ot psych	ologic	al distress,	beople	aged 18 y	ears an	d over, by	age gro	Selected indicators of psychological distress, people aged 18 years and over, by age groups, Australia 2004-05 (a), (b)	<u>a</u> <u>a</u>
	18–24		25–34		35–44		45–54		22+		Total	
	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)
Indigenous												
Nervous												
All/most of the time	6.2	14.5	9.2	11.2	9.5	13.2	11.2	15.1	9.4	16.4	8.9	8.9
Some of the time	22.4	9.3	18.9	7.4	20.8	8.5	19.6	11.1	16.8	13.2	19.9	4.3
A little of the time	32.1	9.9	26.5	6.5	24.9	7.0	21.3	9.2	18.0	10.6	25.5	3.6
None of the time	38.2	6.3	44.7	4.7	43.6	4.3	46.7	6.2	53.3	6.4	4.44	2.6
Total (c)	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I
Without hope												
All/most of the time	6.2	16.5	7.0	13.6	8.8	11.6	7.7	18.0	6.2	20.0	7.2	7.4
Some of the time	13.3	10.7	12.3	10.6	14.8	9.6	11.8	13.3	12.1	14.3	13.0	5.1
A little of the time	16.8	9.4	16.9	8.4	14.7	10.1	15.0	12.3	13.0	15.0	15.6	5.2
None of the time	62.2	3.5	62.0	3.4	60.2	3.5	64.0	4.	65.7	3.9	62.4	1.8
Total (c)	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I
Restless or jumpy												
All/most of the time	10.3	13.9	13.6	13.4	13.9	10.4	13.9	14.1	9.7	15.9	12.5	0.9
Some of the time	21.8	8.3	21.8	0.9	19.2	8.4	18.8	10.2	18.1	10.6	20.3	4.2
A little of the time	25.6	7.7	25.6	7.4	25.8	7.4	22.2	9.0	19.2	12.1	24.3	3.9
None of the time	41.1	5.5	38.0	5.0	39.9	5.2	43.8	6.1	49.9	5.3	41.5	2.6
Total (c)	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I

Table 7A.7.12

Selected indicators of psychological distress, people aged 18 years and over, by age groups, Australia, Table 7A.7.12

	2004-05 (a), (b)	, (b)		1) 		ı)		
	18–24		25–34		35–44		45–54		+99		Total	
	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)
That everything was an effort	n effort											
All/most of the time	12.3	10.4	19.8	8.1	17.4	9.5	17.1	10.6	15.4	13.0	16.6	4.5
Some of the time	22.9	8.7	19.6	8.0	22.5	8.5	20.3	9.3	16.3	11.4	20.7	4.0
A little of the time	26.0	8.1	23.0	8.4	22.2	7.7	21.2	11.0	22.2	11.3	23.1	3.9
None of the time	37.3	5.5	36.4	5.8	37.1	0.9	40.1	7.0	42.8	8.9	38.1	3.0
Total (c)	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I
So sad that nothing could cheer you up	uld cheer you u	Q!										
All/most of the time	5.4	15.6	7.1	11.6	8.6	13.5	7.8	15.0	8.9	17.9	7.1	9.9
Some of the time	14.3	11.4	12.7	9.3	13.2	9.7	14.1	11.0	13.0	12.4	13.4	8.4
A little of the time	15.8	10.0	15.6	10.5	15.8	10.8	16.1	12.0	17.1	13.9	16.0	5.3
None of the time	63.5	3.5	63.6	3.2	61.5	3.5	2.09	3.7	59.5	4.3	62.1	1.8
Total (c)	100.0	1	100.0	I	100.0	I	100.0	I	100.0	1	100.0	I
Non-Indigenous												
Nervous												
All/most of the time	5.1	11.2	3.9	9.3	5.2	8.5	2.7	9.1	5.6	7.8	5.2	4.7
Some of the time	15.4	8.3	16.1	4.6	13.8	4.8	14.4	6.1	11.2	5.5	13.7	2.5
A little of the time	34.4	4.2	32.7	3.1	29.9	3.5	26.6	3.4	18.3	3.2	26.8	1.6
None of the time	45.1	3.2	47.2	2.2	51.0	2.0	53.1	1.9	64.7	1 .	54.1	1.0
Total (c)	100.0	1	100.0	I	100.0	I	100.0	I	100.0	1	100.0	I

Table 7A.7.12

Selected indicators of psychological distress, people aged 18 years and over, by age groups, Australia, Table 7A.7.12

	2004-05 (a), (b)	, (b)		ı						1		
	18–24		25–34		35–44		45–54		+99		Total	
	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)
Hopeless												
All/most of the time	2.7	16.6	2.5	12.5	2.3	11.7	3.4	10.7	3.1	9.1	2.8	5.8
Some of the time	6.7	11.7	9.9	7.6	9.9	5.8	5.6	7.4	2.7	6.1	6.2	3.1
A little of the time	18.6	5.9	17.0	4.5	15.6	4.3	12.5	0.9	9.1	4.6	13.7	2.7
None of the time	71.9	1.8	73.9	1.3	75.4	1.1	78.2	1.1	81.9	0.7	77.2	9.0
Total (c)	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I
Restless or fidgety												
All/most of the time	10.3	8.5	7.4	7.9	7.0	7.9	6.9	7.8	6.2	0.9	7.2	3.5
Some of the time	26.9	4.1	22.5	4.3	18.6	4.0	18.6	4.7	13.2	4.5	18.7	2.1
A little of the time	32.3	4.2	31.5	3.0	30.3	2.4	27.3	3.3	22.2	2.8	27.7	4.
None of the time	30.5	4.1	38.5	3.4	44.0	2.2	47.0	2.5	58.2	4.	46.2	1.2
Total (c)	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I
That everything was an effort	n effort											
All/most of the time	7.6	10.4	9.9	9.1	7.0	5.9	8.0	6.9	8.5	4.2	7.7	3.0
Some of the time	15.5	9.9	15.4	4.6	16.2	4.9	14.2	5.8	12.7	4.4	14.5	2.5
A little of the time	28.1	3.9	29.1	3.4	28.0	2.6	25.2	3.9	19.8	3.1	25.2	1.5
None of the time	48.8	2.8	48.8	2.2	48.7	1.9	52.4	2.1	58.8	4.	52.5	8.0
Total (c)	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I

Table 7A.7.12

Selected indicators of psychological distress, people aged 18 years and over, by age groups, Australia, 2004-05 (a), (b) **Table 7A.7.12**

	18–24		25–34		35–44		45–54		+99		Total	
	Proportion RSE (%) (%)	rtion RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)	Proportion (%)	RSE (%)
So sad that nothing could cheer you up	uld cheer you u	Q.										
All/most of the time	1.6	1.6 21.0	1.6	13.8	2.4	12.3	2.8	11.8	2.4	9.6	2.2	5.0
Some of the time	5.5	11.8	4.5	10.2	5.5	10.3	5.5	9.7	5.3	5.3	5.3	0.4
A little of the time	14.9	8.2	12.7	6.2	13.1	5.9	11.6	6.3	9.6	5.1	12.0	2.3
None of the time	6.77	4.	81.1	1.	78.9	1.2	79.9	1.0	82.3	0.7	80.4	0.5
Total (c)	100.0	I	100.0	I	100.0	I	100.0	I	100.0	1	100.0	I

(a) Estimates with an RSE of 25 per cent to 50 per cent should be interpreted with caution. Estimates with an RSE greater than 50 per cent are considered too unreliable for general use.

(b) Relates to the four week period prior to interview.

(c) Includes not known and not stated responses and refusals.

Nil or rounded to zero.

Source:

Table 7A.7.13

A.7.13 Selected indicators of psychological distress, people aged 18 years and over, age standardised, by	remoteness areas, Australia, 2004-05 (a), (b), (c)
Table 7A.7.13	

	Lemor	eness	remoteness areas, Australia, 2004-00 (a), (b), (c)	AUSITA	IIa, 201	, co-+	a), (D), (<u>5</u>								
	Major cities	cities	Inner regional	jional	Outer regional	er Jal	Total non-remote	ıl note	Remote	te	Very remote	note	Total remote	note	Total	
	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)
Indigenous																Ī
Nervous																
All/most of the time	10.5	14.6	12.3	14.9	9.2	18.4	10.5	9.3	8.6	18.2	na	na	na	na	9.3	7.7
Some of the time	18.4	10.3	18.9	11.3	19.0	9.4	18.8	0.9	16.9	18.0	na	na	na	na	19.2	6.4
A little of the time	25.7	8.4	24.0	9.4	27.8	7.5	25.9	4.9	22.6	14.0	na	na	na	na	23.5	4.1
None of the time	44.7	6.3	44.8	7.7	42.7	6.2	44.1	4.0	48.9	6.5	na	na	na	na	46.5	5.9
Total (d)	100.0	I	100.0	I	100.0	I	100.0	I	100.0	1	na	na	na	na	100.0	I
Without hope																
All/most of the time	7.6	15.6	7.2	19.9	8.6	15.6	7.7	10.3	7.3	19.9	na	na	na	na	7.2	8.3
Some of the time	11.4	11.6	11.6	13.8	14.0	12.2	12.3	7.2	15.5	15.2	na	na	na	na	12.8	2.5
A little of the time	13.9	10.2	16.5	12.7	15.6	11.8	15.1	7.3	15.3	16.8	na	na	na	na	15.0	5.9
None of the time	66.4	3.5	64.7	4.1	60.3	3.9	64.2	2.4	59.2	7.0	na	na	na	na	63.1	2.0
Total (d)	100.0	1	100.0	I	100.0	I	100.0	I	100.0	I	na	na	na	na	100.0	I
Restless or jumpy																
All/most of the time	15.7	12.0	13.6	15.8	12.7	13.0	14.1	7.9	11.6	19.7	na	na	na	na	12.1	8.9
Some of the time	16.9	10.2	21.0	11.5	22.8	7.9	19.8	0.9	18.4	13.0	na	na	na	na	19.7	4.8
A little of the time	28.0	7.7	26.1	9.0	22.6	0.6	25.8	2.0	22.1	15.9	na	na	na	na	23.1	4 4
None of the time	38.7	6.2	39.3	8.3	40.4	0.9	39.5	4.0	46.1	9.3	na	na	na	na	43.3	2.9
Total (d)	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	na	na	na	na	100.0	1
They are sew paidty ago, a ted T	offort															

That everything was an effort

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009

Table 7A.7.13

	remote	ness	remoteness areas, Australi	or poy Austra	lia, 200	4-05 ((a, 2004-05 (a), (b), (c)	(c)					ia, 2004-05 (a), (b), (c)		(a) (b)	
	Major cities	ities	Inner regional		Outer regional	er Jal	Total non-remote	al note	Remote	ote	Very remote	mote	Total remote	note	Total	
	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)
All/most of the time	18.7	8.9	17.2	12.4	18.3	10.7	18.1	0.9	16.5	17.5	na	na	na	na	16.6	5.1
Some of the time	18.0	9.8	21.3	12.3	19.4	9.7	19.3	2.7	22.0	11.6	na	па	na	Па	19.8	4.5
A little of the time	28.7	8.7	21.3	10.1	23.2	8.2	25.0	5.3	18.4	17.2	na	na	na	Па	22.7	4.
None of the time	33.9	7.5	40.2	9.5	37.6	8.9	36.9	4.7	41.2	12.0	na	na	na	na	39.2	3.4
Total (d)	100.0	1	100.0	I	100.0	I	100.0	1	100.0	I	na	na	na	Па	100.0	I
So sad that nothing could cheer you up	uld cheer	dn nox														
All/most of the time	7.8	16.0	6.5	19.1	7.7	13.0	7.3	9.4	7.5	21.4	na	na	na	Па	7.2	7.5
Some of the time	11.3	12.7	11.7	15.3	13.4	10.5	12.0	7.5	16.7	12.1	na	na	na	na	13.4	5.4
A little of the time	15.5	13.3	16.6	13.4	19.1	11.3	17.0	7.4	17.1	13.9	na	па	na	Па	16.2	6.0
None of the time	64.6	3.8	65.1	4.7	57.7	4.0	62.8	2.6	56.8	7.0	na	na	na	na	61.5	2.1
Total (d)	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	na	na	па	na	100.0	I
Non-Indigenous																
Nervous																
All/most of the time	5.3	2.7	5.0	8.3	4.5	13.9	5.2	4.7	1.9	35.9	na	na	na	na	5.1	4.7
Some of the time	14.5	2.8	12.5	5.9	11.8	7.2	13.8	2.5	11.6	19.3	na	na	na	na	13.8	2.5
A little of the time	27.6	1.9	26.2	3.6	25.6	4 4.	27.1	1.6	22.7	10.8	na	na	na	Па	27.0	1.6
None of the time	52.4	- -	56.2	2.1	57.9	2.3	53.8	1.0	63.8	5.6	na	na	na	na	53.9	1.0
Total (d)	100.0	1	100.0	I	100.0	I	100.0	1	100.0	I	na	na	na	Па	100.0	I
Hopeless																

Table 7A.7.13

Table 7A.7.13	Selecte remote	ed ind	Selected indicators of psych remoteness areas, Australia,	of psy \ustra∣	rcholog Iia, 200	ological di 2004-05 (a	distress, p (a), (b), (c)	peopl c)	e aged	18 ye	ars and	over,	age staı	ndard	ological distress, people aged 18 years and over, age standardised, by 2004-05 (a), (b), (c)	
	Major cities	ities	Inner regional	lional	Outer regional	er nal	Total non-remote	l note	Remote	te	Very remote	note	Total remote	note	Total	
	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)
All/most of the time	2.6	7.1	3.5	10.6	3.3	16.9	2.8	5.8	2.8	40.0	na	na	na	na	2.8	5.8
Some of the time	6.2	3.9	6.2	6.4	6.4	11.8	6.2	3.1	3.9	31.3	na	па	па	na	6.2	3.1
A little of the time	13.7	3.3	13.9	9.9	14.3	7.8	13.8	2.7	12.7	16.4	na	па	па	na	13.8	2.7
None of the time	77.4	0.7	76.4	4.	75.7	1 .8	77.0	9.0	9.08	3.4	na	па	па	na	77.1	9.0
Total (d)	100.0	1	100.0	1	100.0	I	100.0	1	100.0	I	na	na	па	na	100.0	I
Restless or fidgety All/most of the time	6.7	4.3	89 89:	6.5	8.3	8.5	7.3	3.5	7.8	24.1	na	na	па	na	7.3	3.5
Some of the time	18.9	2.3	18.7	4.7	19.6	5.2	19.0	2.2	11.4	15.6	na	па	na	na	18.9	2.1
A little of the time	28.3	1.8	26.3	3.6	27.0	4.5	27.8	4.	32.8	12.0	na	па	па	na	27.9	4 .
None of the time	46.0	1.5	46.1	2.8	45.0	2.5	45.9	1.2	48.0	8.6	na	па	na	na	45.9	1.2
Total (d)	100.0	1	100.0	1	100.0	I	100.0	1	100.0	I	na	na	па	na	100.0	I
That everything was an effort	n effort															
All/most of the time	7.4	3.4	8.1	7.3	8.	9.4	9.7	က	7.2	24.2	na	па	na	na	7.6	က
Some of the time	14.3	က	14.4	4.7	15.4	5.9	14.5	2.5	14.9	15.8	na	п	na	na	14.6	2.5
A little of the time	25.5	1.9	25.1	3.2	25.0	2.7	25.3	1.5	25.6	12.3	na	па	па	na	25.3	1.5
None of the time	52.7	[-	52.3	2.0	51.3	2.7	52.4	0.8	52.2	2	na	na	па	na	52.4	8.0
Total (d)	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	na	па	na	na	100.0	I
So sad that nothing could cheer you up	uld cheer _.	dn noƙ														
All/most of the time	2.2	2.8	2.4	11.5	0.1	20.2	2.2	5.1	7.5	40.6	na	п	na	na	2.2	2.0
Some of the time	5.3	4.8	5.4	8.2	4.7	13.9	5.3	4.0	3.0	26.7	na	па	па	na	5.3	4.0

Table 7A.7.13

Selected indicators of psychological distress, people aged 18 years and over, age standardised, by remoteness areas, Australia, 2004-05 (a), (b), (c) **Table 7A.7.13**

							(-), (-), (-)	()								
	Major cities	ities	Inner regional	ional	Outer regional	er nal	Total non-remote	l note	Remote	ote	Very remote	note	Total remote	ote	Total	
	Prop RSE (%) (%)	Prop RSE (%)	Prop RSE (%) (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop RSE (%)	RSE (%)	Prop F	RSE (%)	Prop (%)	RSE (%)
A little of the time	12.2 2.6	2.6	10.9 6.3	6.3	13.0	7.8	12.1	2.3	9.7	16.8	na	na	na	na	12.0	2.3
None of the time	80.1	0.5	81.1		80.1	1.7	80.3	0.5	82.8	2.2	na	na	na	Па	80.4	0.5
Total (d)	100.0	I	100.0	I	100.0	I	100.0	1	100.0	1	na	na	na	na	100.0	I

RSE Relative standard error. Prop = Proportion.

(a) Estimates with an RSE of 25 per cent to 50 per cent should be interpreted with caution. Estimates with an RSE greater than 50 per cent are considered too unreliable for general use.

(b) Relates to the four week period prior to interview.

Data for very remote areas is not available for the non-Indigenous population because it is not considered reliable. Total remote is not comparable between the Indigenous and non-Indigenous population. See glossary for definitions of remoteness areas. <u>ပ</u>

(d) Includes not known and not stated responses and refusals.

na Not available. – Nil or rounded to zero.

Source: ABS 2006, NATSIHS 2004-05 (unpublished); NHS 2004-05 (unpublished).

Table 7A.7.14

Table 7A.7.14 Selected indicators of positive well being, Indigenous people aged 18 years and over, by sex, Australia, 2004-05 (a), (b)

	Mal	е	Fema	le	Tota	ıl
	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)
Calm and peaceful						_
All/most of the time	60.5	2.7	52.9	2.7	56.4	1.9
Some of the time	23.9	5.9	27.0	4.5	25.6	3.6
A little of the time	9.6	10.5	13.4	6.7	11.6	6.3
None of the time	4.2	14.8	5.4	10.0	4.8	8.7
Total (c)	100.0	_	100.0	_	100.0	_
Нарру						
All/most of the time	72.6	2.1	70.3	1.8	71.4	1.4
Some of the time	18.1	7.6	19.5	5.6	18.8	4.6
A little of the time	6.0	11.1	7.1	9.0	6.6	7.0
None of the time	1.7	19.1	2.0	16.7	1.8	13.1
Total (c)	100.0	_	100.0	_	100.0	_
Full of life						
All/most of the time	58.3	2.7	51.3	2.6	54.6	1.8
Some of the time	25.7	5.6	27.4	3.9	26.6	3.3
A little of the time	8.6	8.9	13.3	6.7	11.1	5.5
None of the time	5.9	12.3	6.5	8.5	6.2	7.3
Total (c)	100.0	_	100.0	_	100.0	_
Lot of energy						
All/most of the time	53.7	2.9	41.4	3.2	47.2	2.2
Some of the time	26.7	5.0	33.5	4.0	30.3	3.2
A little of the time	12.1	8.2	16.5	6.3	14.4	5.0
None of the time	6.0	12.8	7.1	8.6	6.6	7.6
Total (c)	100.0		100.0		100.0	

RSE Relative standard error. Prop = Proportion.

Source: ABS 2006, NATSIHS 2004-05 (unpublished).

⁽a) Estimates with an RSE of 25 per cent to 50 per cent should be interpreted with caution. Estimates with an RSE greater than 50 per cent are considered too unreliable for general use.

⁽b) Relates to the four week period prior to interview.

⁽c) Includes not known and not stated responses and refusals.

⁻ Nil or rounded to zero.

Table 7A.7.15

Table 7A.7.15	Selected indicators of po Australia, 2004-05 (a), (b)	ndicato 2004-0	ors of posit 5 (a), (b)	tive wel	l being, Ind	ligenous	s people ag	ed 18 y	ears and ov	rer, by a	Selected indicators of positive well being, Indigenous people aged 18 years and over, by age groups, Australia, 2004-05 (a), (b)	
	18–24		25–34		35-44		45–54		25+		Total	
	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)
Calm and peaceful All/most of the time	57.6	3.7	52.5	4. 1.	57.6	3.7	56.1	5.0	8.09	4 5.	56.4	6.
Some of the time	26.7	7.0	30.5	7.4	22.5	8.0	22.8	10.0	22.1	10.4	25.6	3.6
A little of the time	10.4	13.2	11.0	10.5	13.5	10.3	12.9	12.6	10.3	16.9	11.6	6.3
None of the time	3.9	21.1	4.8	17.4	4.9	19.1	7.0	19.3	3.8	21.4	4.8	8.7
Total (c)	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I
Нарру												
All/most of the time	71.3	2.8	72.1	2.9	70.9	2.5	70.2	3.6	72.4	3.4	71.4	4 .
Some of the time	20.6	9.4	19.5	9.6	18.5	8.0	19.1	12.0	14.7	14.5	18.8	4.6
A little of the time	5.6	16.4	6.1	14.1	7.0	13.9	7.1	16.0	7.7	20.5	9.9	7.0
None of the time	4.	27.0	1.2	32.4	2.1	22.2	2.7	30.2	2.5	32.0	8.1	13.1
Total (c)	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	100.0	ı
Full of life												
All/most of the time	55.3	4.0	27.7	3.5	55.9	3.5	52.4	4.7	47.0	6.1	54.6	1.8
Some of the time	29.0	8.0	26.0	8.9	24.9	6.4	26.8	8.8	26.5	10.5	26.6	3.3
A little of the time	10.5	12.6	11.3	6.6	10.7	11.6	11.1	15.2	12.5	13.1	11.1	5.5
None of the time	4.0	18.3	3.9	19.2	6.9	14.8	8.4	13.7	10.9	15.9	6.2	7.3
Total (c)	100.0	1	100.0	I	100.0	I	100.0	I	100.0	I	100.0	1

Table 7A.7.15

Table 7A.7.15	Selected indicators of positive well being, Indigenous people aged 18 years and over, by age groups,
	Australia, 2004-03 (a), (b)

	18–24		25–34		35–44		45–54		+99		Total	
	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)
Lot of energy												
All/most of the time	49.9	4.4	52.8	3.6	45.5	4.2	43.5	5.5	38.0	7.2	47.2	2.2
Some of the time	31.7	6.5	27.4	2.8	31.6	0.9	29.9	7.3	32.1	9.6	30.3	3.2
A little of the time	13.9	11.5	14.0	9.5	14.6	9.3	16.4	11.5	13.8	12.0	14.4	5.0
None of the time	3.4	21.5	4.6	17.9	6.7	14.7	9.3	14.7	13.0	14.7	9.9	7.6
Total (c)	100.0	I	100.0	1	100.0	1	100.0	1	100.0	1	100.0	I

RSE Relative standard error. Prop = Proportion.

(a) Estimates with an RSE of 25 per cent to 50 per cent should be interpreted with caution. Estimates with an RSE greater than 50 per cent are considered too unreliable for general use.

(b) Relates to the four week period prior to interview.

(c) Includes not known and not stated responses and refusals.

Nil or rounded to zero.

Source: ABS 2004-05 NATSIHS (unpublished).

Table 7A.7.16

tors of positive well being, Indigenous people aged 18 years and over, by	(0
Selected indicators of positive well being,	remoteness areas, Australia, 2004-05 (a), (b)
Table 7A.7.16	

Table 7A.7.16	Selected indicators remoteness areas,	d indic	•	f posit Istralia	of positive well being, In Australia, 2004-05 (a), (b)	being 05 (a),	, Indige (b)	snou	of positive well being, Indigenous people aged 18 years and over, by Australia, 2004-05 (a), (b)	ged 18	years a	and ove	er, by	
	Major Cities	ities	Regional (b)	(q) II	Total non-remote	l note	Remote	te te	Very Remote	note	Total Remote	mote	Total	
	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)
Calm and peaceful All/most of the time	52.3	4.3	56.8	3.0	54.9	2.6	62.7	3.6	59.2	3.7	60.3	2.7	56.4	6:1
Some of the time	26.4	7.8	25.4	5.5	25.8	4.5	22.3	11.0	26.0	7.3	24.9	5.9	25.6	3.6
A little of the time	15.4	9.8	11.2	10.2	13.0	7.4	10.2	15.6	7.4	13.8	8.3	10.6	11.6	6.3
None of the time	4.8	16.1	5.3	13.2	5.1	10.1	2.0	31.1	5.1	17.9	4.	15.6	4.8	8.7
Total (d)	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I
Нарру														
All/most of the time	70.9	2.8	9.69	2.2	70.2	1.8	70.4	3.4	76.3	2.2	74.5	1.8	71.4	4.1
Some of the time	18.7	8.6	20.0	8.9	19.5	2.7	19.5	13.1	16.3	7.7	17.3	8.9	18.8	4.6
A little of the time	7.5	13.1	7.2	10.8	7.3	8.4	0.9	16.0	4.1	14.0	4.6	10.3	9.9	7.0
None of the time	1.9	27.8	2.1	19.0	2.0	15.6	1 .	44.3	1 .	27.0	4.	23.1	4.6	13.1
Total (d)	100.0	I	100.0	I	100.0	1	100.0	I	100.0	I	100.0	I	100.0	I
Full of life														
All/most of the time	52.1	3.8	51.4	3.1	51.7	2.4	53.2	5.1	65.8	2.7	62.0	2.5	54.6	1.8
Some of the time	26.4	6.9	28.9	2.0	27.8	4.1	28.1	9.5	21.3	5.8	23.4	5.1	26.6	3.3
A little of the time	12.5	6.6	12.2	8.6	12.3	6.5	10.5	16.5	7.0	13.4	8.1	10.4	11.1	5.5
None of the time	8.0	11.6	6.4	12.7	7.1	8.2	5.4	19.7	3.3	14.4	4.0	11.5	6.2	7.3
Total (d)	100.0	I	100.0	I	100.0	I	100.0	1	100.0	I	100.0	I	100.0	I
Lot of energy All/most of the time	42.5	5.1	9.44	3.5	43.9	2.8	43.6	8.0	60.7	3.4 4.6	55.5	3.2	47.2	2.2

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009

Table 7A.7.16

rell being, Indigenous people aged 18 years and over, by	
Selected indicators of positive well being, Indigenous	remoteness areas, Australia, 2004-05 (a), (b)
Table 7A.7.16	

			2, 22			(A)	2							
Some of the time	32.6 6.5	6.5	30.3	4.8	31.3	3.8	35.8	10.2	24.4	2.8	27.9	5.0	30.3	3.2
A little of the time	16.7 8.6	8.6	15.8	7.9	16.2	2.8	10.9	17.8	9.6	13.0	10.0	10.6	14.4	2.0
None of the time	7.2	7.2 11.8	7.9	12.0	9.7	8.5	8.9	20.4	2.9	17.6	4.1	13.4	9.9	9.7
Total (d)	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	100.0	I	100.0	1

RSE Relative standard error. Prop = Proportion.

(a) Estimates with an RSE of 25 per cent to 50 per cent should be interpreted with caution. Estimates with an RSE greater than 50 per cent are considered too unreliable for general use.

(b) Regional includes inner and outer regional areas. Remote includes remote and very remote areas. See glossary for definitions of remoteness areas.

(c) Relates to the four week period prior to interview.

(d) Includes not known and not stated responses and refusals.

Nil or rounded to zero.

Source: ABS 2004-05 NATSIHS (unpublished).

Table 7A.7.17

Table 7A.7.17	K5 level of current of age, 2004-05 (a)	∋l of cı 2004-	urrent p .05 (a)	osycho	ologica	al dist	K5 level of current psychological distress, by selected health characteristics, Indigenous people 18–64 years of age, 2004-05 (a)	select	ed hea	lith ch	aracte	eristics	s, Indige	snou	peop	le 18–6	4 year	Ø
		No	Non-remote	0				Re	Remote					T	Total			
	Low/moderate (b)	derate	High/very high (c)	y high	Total	(p)	Low/moderate (b)		High/very high (c)	/ high	Total (d)	(p)	Low/moderate (b)	erate	High/very high (c)	very (c)	Total (d)	-
	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)
Self-assessed health status Excellent/Very Good	atus 47	3.6	24	7.3	40	3.5	42	6.4	29	8.6	38	9.4	46	3.0	26	5.7	40	2.8
Good	35	4.8	33	5.7	34	3.7	42	4.9	40	7.2	42	4.2	37	3.5	35	4.5	36	2.7
Fair/poor	19	6.8	43	4.8	25	4.7	16	7.5	31	7.6	20	6.1	18	5.4	40	4.1	24	3.9
Number of long-term health conditions	alth condi	tions																
None	19	6.9	7	17.9	15	6.2	31	7.5	19	11.9	28	6.7	22	5.2	10	10.7	19	4.6
_	20	7.0	6	12.7	17	6.2	23	7.2	13	13.4	20	6.5	21	5.2	10	9.6	18	9.4
2	20	7.1	15	10.3	19	5.9	16	7.4	17	11.1	17	5.4	19	5.8	15	7.5	18	4.5
3 or more	4	4.2	69	3.0	49	3.1	29	7.3	52	0.9	35	5.2	38	3.7	64	2.6	45	5.6
Type of long–term condition	tion																	
Arthritis	16	7.6	27	7.3	19	5.5	7	13.3	16	13.9	10	9.5	4	6.9	24	6.9	16	5.0
Asthma	16	7.7	26	7.6	19	5.3	10	10.4	13	12.0	7	8.3	4	6.7	23	8.9	16	8.4
Back pain/problems neck, disc disorders	19	6.7	33	6.2	23	4.7	17	15.0	31	7.1	20	9.6	19	9.9	33	5.0	22	4. 4.
Diabetes/high sugar levels	∞	10.0	7	12.2	o	7.7	4	8.3	18	11.5	16	6.3	10	7.0	2	8.6		5.3

Table 7A.7.17

Table 7A.7.17	K5 level of current of age, 2004-05 (a)	l of cu 2004-	K5 level of current psychologic of age, 2004-05 (a)	sycho	ologica	al dist	ress, by	selec	ted hea	alth ch	ıaract	eristic	al distress, by selected health characteristics, Indigenous people 18–64 years	snous	peop	le 18–(34 yeal	ဖု
		No	Non-remote					Ř	Remote						Total			
	Low/moderate (b)	lerate	High/very high (c)	/ high	Total ((p)	Low/moderate (b)		High/very high (c)	y high	Total (d)	(p)	Low/moderate (b)	erate	High/very high (c)	very (c)	Total (d)	(p
	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)
Ear/hearing problems	13	7.7	21	8.3	15	0.9	13	12.5	20	11.7	15	8.4	13	6.7	21	9.9	15	8.4
Eye/sight problems	49	3.3	54	4.0	51	2.6	36	5.5	49	5.2	39	3.9	45	2.8	53	3.2	47	2.2
Heart and circulatory problems/diseases	17	7.4	24	7.1	19	5.7	20	9.0	31	8.5	23	6.5	8	5.9	26	5.6	20	4. 4.
Neoplasms/cancer	~	23.9	က	24.1	7	17.1	*I	40.8	*I	47.1	*I	32.5	~	21.3	7	23.2	~	15.7
Osteoporosis	7	20.9	က	24.0	7	16.7	 *	60.1	× *	61.0	*	43.0	~	19.9	7	22.5	7	15.5
Risk behaviours																		
Current daily smoker	45	3.8	61	3.9	49	2.9	51	4.0	55	5.5	52	3.3	47	2.9	29	3.3	50	2.2
Risky/high risk alcohol consumption in last																		
Wdek	16	8.0	19	9.5	17	9.9	13	10.0	19	16.1	15	8.9	15	9.9	19	8.0	16	5.4

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009

Table 7A.7.17

Table 7A.7.17	K5 level of current psychologica of age, 2004-05 (a)	l of cu 2004-(ırrent p 05 (a)	sycho	ologica	al dist	il distress, by selected health characteristics, Indigenous people 18–64 years	seleci	ted hea	lth ch	aracte	eristic	s, Indige	snous	beop	le 18–(54 yeaı	့်
		Noi	Non-remote					R	Remote						Total			
	Low/moderate (b)	erate	High/very high (c)	/ high	Total ((p)	Low/moderate (b)		High/very high (c)	/ high	Total (d)	(p)	Low/moderate (b)	erate	High/very high (c)	very (c)	Total (d)	d)
	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)	Prop (%)	RSE (%)
Health-related actions Consulted other health professional in last 2 weeks	5	9	27	7.3	6	6.7	28	4.	33	6.7	30		6	6	29	ວ	22	9.4
Consulted doctor (GP and specialist) in last 2 weeks	21	5.7	35	6.2	25	4.5	22	8.2	31	80.3	24	6.2	2	9.4	34	5.1	25	3.7
Total consulted GP or OHP	36	5.3	62	5.4	43	4.2	20	5.6	65	6.9	55	4 4	40	3.8	63	4.3	47	3.2
Days away from work or study (d)	10	9.2		13.2	7	7.6	10	11.6	16	12.6	7	8.8	10	7.5	15	10.2	7	6.0
Other days of reduced activity	12	9.9	27	7.4	16	6.5	7	9.9	25	10.0	15	7.7	1	7.5	27	0.9	16	5.0
Total	100	I	100	I	100	1	100	ı	100	ı	100	ı	100	ı	100	ı	100	I
Total persons aged 18 and over ('000)	132.9		51.2		185.5		51.3		18.9		72.8		184.1		70.2		258.3	

Table 7A.7.17

K5 level of current psychological distress, by selected health characteristics, Indigenous people 18-64 years of age, 2004-05 (a) **Table 7A.7.17**

Remote Total	th Total (d) Low/moderate High/very high Total (d) Low/moderate High/very (b) (c) (c) (b) high (c)	Prop RSE Pro
		RSE (%
Remote		RSE (%)
	1 (p)	RSE (%)
	·	RSE Prop (%)
Non-remote	High/very hig (c)	Prop R8 (%) (°
No	Low/moderate High/very high (b) (c)	Prop RSE (%)

OHP Other health professional. RSE Relative standard error. Prop = Proportion.

(a) Estimates with a relative standard error (RSE) of 25 per cent to 50 per cent (*) should be used with caution. Estimates with a RSE greater than 50 per cent (**) are considered too unreliable for general use.

(b) Represents a K5 score of 5–11.

(c) Represents a K5 score of 12–25.

(d) Includes refusals and persons with no K5 score.

Nil or rounded to zero.

Source: ABS 2004-05 NATSIHS (unpublished).

Table 7A.7.18

Table 7A.7.18

Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2001-02 (a), (b)

	Qld	WA	SA	NT	Qld, WA, SA and public hospitals in the NT
	ı	Rate per 1	000 popula	ation	
Organic mental disorders (ICD-10-AM codes F00-F09) (c)					
Indigenous persons	0.9	0.9	0.8	0.8	0.8
Non-Indigenous persons	0.5	0.6	0.6	0.3	0.6
Substance use disorder (ICD-10-AM codes F10-F19) (d)					
Indigenous persons	6.4	11.7	11.5	2.7	7.4
Non-Indigenous persons	2.4	1.8	1.4	0.5	2.0
Mood and neurotic disorders (ICD-10-AM codes F30-F48) (e)					
Indigenous persons	5.9	8.8	13.8	1.5	6.4
Non-Indigenous persons	8.6	7.9	6.0	1.7	7.8
Schizophrenia, schizo typal and delusional disorders (ICD-10-AM codes F20-F29)					
Indigenous persons	4.3	5.6	6.9	1.7	4.3
Non-Indigenous persons	2.5	1.6	2.6	1.2	2.2
Other mental disorders (f)					
Indigenous persons	1.1	0.9	2.0	0.2	1.0
Non-Indigenous persons	0.9	1.1	8.0	0.2	0.9
All mental and behavioural disorders (ICD-10-AM codes F00-F99)					
Indigenous persons	18.6	27.9	35.0	6.8	19.8
Non-Indigenous persons	14.9	13.1	11.4	3.9	13.4

Table 7A.7.18

Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2001-02 (a), (b)

ICD-10-AM International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification.

- (a) Indigenous data are reported for Queensland, Western Australia, South Australia and the Northern Territory only. These four jurisdictions are considered to have the highest level of accuracy of Indigenous identification, although the level of accuracy varies by jurisdiction and hospital. Data for these four jurisdictions over-represent Indigenous populations in less urbanised and more remote locations. Hospitalisation data for four jurisdictions should not be assumed to represent the hospitalisation experience in the other jurisdictions. Data are based on state of usual residence.
- (b) Directly age standardised using the 2001 Australian population.
- (c) Includes brain disorders due to brain damage and dysfunction, such as dementia.
- (d) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.
- (e) Includes depressive and anxiety disorders.
- (f) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.

Table 7A.7.19

Table 7A.7.19 Hospitalisation rate, per 1000 population, for mental and behavioural disorders (ICD-10-AM codes F00-F99), by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2001-02 (a), (b)

	Ir	ndigenous		Non	-Indigenoi	us	Tota	al persons	
-	male	female	total	male	female	total	male	female	total
Age group (years)									
under 1	0.3	0.6	0.4	0.2	0.4	0.3	0.2	0.4	0.3
1–4	0.1	0.2	0.1	0.5	0.3	0.4	0.4	0.3	0.4
5–14	7.2	8.4	7.8	6.4	9.0	7.6	6.4	8.9	7.7
15–24	34.1	30.8	32.5	17.9	18.5	18.2	18.7	19.1	18.9
25–34	40.3	28.4	34.1	18.3	22.1	20.2	19.2	22.4	20.8
35–44	30.8	23.6	27.0	15.0	18.8	16.9	15.5	18.9	17.2
45–54	17.6	11.2	14.3	11.3	8.6	9.9	11.4	8.6	10.0
55–64	14.6	12.8	13.7	14.4	13.2	13.8	14.4	13.2	13.8
65–74	22.3	12.5	16.8	8.3	12.1	10.3	8.5	12.2	10.4
75+	12.1	8.4	9.9	14.2	17.5	16.2	14.2	17.5	16.1
All ages (c)	22.3	17.6	19.8	12.6	14.2	13.4	13.0	14.4	13.7

- (a) Indigenous data are reported for Queensland, Western Australia, South Australia and the Northern Territory only. These four jurisdictions are considered to have the highest level of accuracy of Indigenous identification, although the level of accuracy varies by jurisdiction and hospital. Data for these four jurisdictions over-represent Indigenous populations in less urbanised and more remote locations. Hospitalisation data for four jurisdictions should not be assumed to represent the hospitalisation experience in the other jurisdictions.
- (b) Data are based on state of usual residence.
- (c) Directly age-standardised using the 2001 Australian population.

Table 7A.7.20

Table 7A.7.20

Hospitalisations by Indigenous status (number),
Queensland, WA, SA, and public hospitals in the NT, 2001-02
(a)

		Indigenou	'S	No	n-Indigenous	
-	male	female	total (f)	male	female	total (f)
Organic mental disorders (ICD-10-AM codes F00-F09) (b)	78	32	110	1 897	2 048	3 945
Substance use disorder (ICD–10–AM codes F10–F19) (c)	1 251	651	1 902	9 121	4 881	14 002
Mood and neurotic disorders (ICD-10-AM codes F30-F48) (d)	601	1 086	1 687	21 993	32 571	54 564
Schizophrenia, schizo typal and delusional disorders (ICD–10–AM codes F20–F29)	777	518	1 295	9 314	6 379	15 693
Other mental disorders (e)	128	137	265	1 995	4 248	6 243
All mental and behavioural disorders (ICD-10-AM codes F00-F99)	2 835	2 424	5 259	44 320	50 127	94 447
Other hospitalisations	58 071	80 151	138 278	1 056 457	1 206 203	2 262 682
Total hospitalisations	60 906	82 575	143 537	1 100 777	1 256 330	2 357 129

- (a) Indigenous data are reported for Queensland, Western Australia, South Australia and the Northern Territory only. These four jurisdictions are considered to have the highest level of accuracy of Indigenous identification, although the level of accuracy varies by jurisdiction and hospital. Data for these four jurisdictions over-represent Indigenous populations in less urbanised and more remote locations. Hospitalisation data for four jurisdictions should not be assumed to represent the hospitalisation experience in the other jurisdictions. Data are based on state of usual residence.
- (b) Includes brain disorders due to brain damage and dysfunction, such as dementia.
- (c) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.
- (d) Includes depressive and anxiety disorders.
- (e) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.

Table 7A.7.20

Hospitalisations by Indigenous status (number), Queensland, WA, SA, and public hospitals in the NT, 2001-02 (a)

⁽f) Includes separations where sex is not stated.

Table 7A.7.21 Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, Queensland, WA, SA, and public hospitals in NT, 2002-03 (a), (b)

	Qld	WA	SA	NT Qld, WA	spitals in the NT
		Rate per 1	1000 popula	ation	
Organic mental disorders (ICD-10-AM codes F00-F09) (c)					
Indigenous persons	8.0	1.4	1.2	0.4	0.9
Non-Indigenous persons	0.4	0.6	0.6	0.3	0.5
Substance use disorder (ICD-10-AM codes F10-F19) (d)					
Indigenous persons	6.8	12.7	9.8	3.8	7.9
Non-Indigenous persons	2.2	1.7	1.4	0.8	1.9
Mood and neurotic disorders (ICD-10-AM codes F30-F48) (e)					
Indigenous persons	5.8	10.0	15.2	1.9	6.9
Non-Indigenous persons	8.4	7.8	6.9	2.1	7.8
Schizophrenia, schizo typal and delusional disorders (ICD–10–AM codes F20–F29)					
Indigenous persons	5.8	7.3	8.3	2.2	5.6
Non-Indigenous persons	2.4	1.6	2.8	1.2	2.3
Other mental disorders (f)					
Indigenous persons	0.9	1.0	1.9	0.1	0.9

Table 7A.7.21

Table 7A.7.21 Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, Queensland, WA, SA, and public hospitals in NT, 2002-03 (a), (b)

Non-Indigenous persons	0.8	0.8	0.7	0.2	0.7
All mental and behavioural disorders (ICD-10-AM codes F00-F99)					
Indigenous persons	20.1	32.5	36.4	8.4	22.1
Non-Indigenous persons	14.2	12.6	12.4	4.6	13.2

- (a) Indigenous data are reported for Queensland, Western Australia, South Australia and the Northern Territory only. These four jurisdictions are considered to have the highest level of accuracy of Indigenous identification, although the level of accuracy varies by jurisdiction and hospital. Data for these four jurisdictions over-represent Indigenous populations in less urbanised and more remote locations. Hospitalisation data for four jurisdictions should not be assumed to represent the hospitalisation experience in the other jurisdictions. Data are based on state of usual residence.
- (b) Directly age standardised using the 2001 Australian population.
- (c) Includes brain disorders due to brain damage and dysfunction, such as dementia.
- (d) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.
- (e) Includes depressive and anxiety disorders.
- (f) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.

Table 7A.7.22

Table 7A.7.22 Hospitalisation rate, per 1000 population, for mental and behavioural disorders (ICD-10-AM codes F00-F99), by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2002-03 (a), (b)

	I.	ndigenous		Nor	า-Indigenou	IS	T	otal persor	S
	male	female	total	male	female	total	male	female	total
Age group (years)									
under 1	_	_	-	0.1	0.2	0.1	0.1	0.2	0.1
1–4	0.2	0.2	0.2	0.4	0.3	0.4	0.4	0.3	0.4
5–14	1.5	2.0	1.7	1.3	1.5	1.4	1.3	1.5	1.4
15–24	23.8	22.6	23.2	13.0	16.9	14.9	13.5	17.2	15.3
25–34	46.9	37.1	41.8	17.7	20.3	19.0	18.9	21.0	20.0
35–44	41.9	33.6	37.5	15.3	21.2	18.3	16.1	21.6	18.9
45–54	25.8	24.7	25.2	16.0	18.1	17.1	16.2	18.3	17.3
55–64	18.2	13.4	15.6	14.3	14.5	14.4	14.3	14.5	14.4
65–74	22.7	11.5	16.5	9.2	13.1	11.2	9.4	13.1	11.3
75+	9.5	14.4	12.4	15.1	17.4	16.5	15.1	17.4	16.4
All ages (c)	24.1	20.3	22.1	12.0	14.5	13.2	12.4	14.7	13.6

- (a) Indigenous data are reported for Queensland, Western Australia, South Australia and the Northern Territory only. These four jurisdictions are considered to have the highest level of accuracy of Indigenous identification, although the level of accuracy varies by jurisdiction and hospital. Data for these four jurisdictions over-represent Indigenous populations in less urbanised and more remote locations. Hospitalisation data for four jurisdictions should not be assumed to represent the hospitalisation experience in the other jurisdictions.
- (b) Data are based on state of usual residence.
- (c) Directly age-standardised using the 2001 Australian population.
 - Nil or rounded to zero.

Table 7A.7.23

Table 7A.7.23 Hospitalisations by Indigenous status (number), Queensland, WA, SA, and public hospitals in NT, 2002-03 (a)

	I	Indigenous		No	on-Indigenous	S
	male	female	total (f)	male	female	total (f)
Organic mental disorders (ICD-10-AM codes F00-F09) (b)	50	39	89	1 816	1 890	3 706
Substance use disorder (ICD-10-AM codes F10-F19) (c)	1 219	670	1 889	8 461	5 244	13 705
Mood and neurotic disorders (ICD-10-AM codes F30-F48) (d)	597	1 099	1 696	21 216	35 124	56 340
Schizophrenia, schizo typal and delusional disorders (ICD–10–AM codes F20–F29)	871	624	1 496	9 555	6 545	16 102
Other mental disorders (e)	107	151	258	1 650	3 641	5 291
All mental and behavioural disorders (ICD-10-AM codes F00-F99)	2 844	2 583	5 428	42 698	52 444	95 144
Other hospitalisations	60 237	84 796	145 129	1 084 722	1 225 071	2 309 815
Total hospitalisations	63 081	87 379	150 557	1 127 420	1 277 515	2 404 959

- (a) Indigenous data are reported for Queensland, Western Australia, South Australia and the Northern Territory only. These four jurisdictions are considered to have the highest level of accuracy of Indigenous identification, although the level of accuracy varies by jurisdiction and hospital. Data for these four jurisdictions over-represent Indigenous populations in less urbanised and more remote locations. Hospitalisation data for four jurisdictions should not be assumed to represent the hospitalisation experience in the other jurisdictions. Data are based on state of usual residence.
- (b) Includes brain disorders due to brain damage and dysfunction, such as dementia.
- (c) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.
- (d) Includes depressive and anxiety disorders.
- (e) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.
- (f) Includes separations where sex is not stated.

Table 7A.7.24

Table 7A.7.24 Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2003-04 (a) (b)

	Qld	WA	SA	NT	Qld, WA, SA and public hospitals in NT
		Rate per 1	1000 popula	ntion	
Organic mental disorders (ICD-10-A	AM codes F00-I	F09) (c)			
Indigenous persons	0.6	1.4	2.7	0.5	1.0
Non-Indigenous persons	0.4	0.6	0.5	0.6	0.5
Substance use disorder (ICD-10-AM	/I codes F10–F1	19) (d)			
Indigenous persons	6.6	12.5	12.4	3.7	8.0
Non-Indigenous persons	2.3	1.7	1.5	0.8	2.0
Mood and neurotic disorders (ICD-1	0-AM codes F3	30–F48) (e)			
Indigenous persons	5.3	9.3	17.0	2.1	6.7
Non-Indigenous persons	8.2	7.6	6.4	2.0	7.6
Schizophrenia, schizo typal and delu	sional disorders	s (ICD-10-	AM codes F	20–F29)	
Indigenous persons	5.6	6.5	8.9	2.4	5.4
Non-Indigenous persons	2.5	1.7	2.9	1.3	2.3
Other mental disorders (f)					
Indigenous persons	0.8	8.0	1.9	0.3	0.8
Non-Indigenous persons	0.7	8.0	0.7	0.2	0.7
All mental and behavioural disord	ers (ICD-10-A	M codes F	00–F99)		
Indigenous persons	18.8	30.5	43.0	9.0	21.8
Non-Indigenous persons	14.2	12.3	12.1	4.8	13.1

- (a) Indigenous data are reported for Queensland, Western Australia, South Australia and the Northern Territory only. These four jurisdictions are considered to have the highest level of accuracy of Indigenous identification, although the level of accuracy varies by jurisdiction and hospital. Data for these four jurisdictions over-represent Indigenous populations in less urbanised and more remote locations. Hospitalisation data for four jurisdictions should not be assumed to represent the hospitalisation experience in the other jurisdictions. Data based on state of usual residence.
- (b) Directly age standardised using the 2001 Australian population.
- (c) Includes brain disorders due to brain damage and dysfunction, such as dementia.
- (d) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.
- (e) Includes depressive and anxiety disorders.
- (f) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.

Table 7A.7.24 Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2003-04 (a) (b)

	Qld	WA	SA	NT	Qld, WA, SA and public hospitals in NT
--	-----	----	----	----	--

Source:

Table 7A.7.25

Table 7A.7.25 Hospitalisation rate, per 1000 population, for mental and behavioural disorders (ICD-10-AM codes F00-F99), by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2003-04 (a), (b)

	I	ndigenous		Non	-Indigend	ous	Total persons		
- -	male	female	total	male f	emale	total	male fe	emale	total
Age group (years)									
under 1	_	0.3	0.1	0.1	0.1	0.1	0.1	0.1	0.1
1–4	0.5	0.2	0.3	0.5	0.2	0.4	0.5	0.2	0.4
5–14	1.6	2.0	1.8	1.5	1.8	1.6	1.5	1.8	1.7
15–24	23.1	22.6	22.9	12.4	15.2	13.8	13.0	15.6	14.2
25–34	45.9	34.5	40.0	17.9	20.2	19.0	19.1	20.8	19.9
35–44	39.8	34.5	37.0	15.0	21.2	18.1	15.8	21.6	18.7
45–54	23.3	26.2	24.8	14.7	19.4	17.0	14.8	19.6	17.2
55–64	24.7	14.8	19.4	14.7	15.2	14.9	14.8	15.2	15.0
65–74	18.2	10.2	13.8	8.9	13.5	11.2	9.0	13.5	11.3
75+	10.7	10.6	10.6	14.8	16.0	15.5	14.8	16.0	15.5
All ages (c)	23.7	20.1	21.8	11.7	14.5	13.1	12.1	14.7	13.4

⁽a) Indigenous data are reported for Queensland, Western Australia, South Australia and the Northern Territory only. These four jurisdictions are considered to have the highest level of accuracy of Indigenous identification, although the level of accuracy varies by jurisdiction and hospital. Data for these four jurisdictions over-represent Indigenous populations in less urbanised and more remote locations. Hospitalisation data for four jurisdictions should not be assumed to represent the hospitalisation experience in the other jurisdictions.

⁽b) Data based on state of usual residence.

⁽c) Directly age-standardised using the 2001 Australian population.

⁻ Nil or rounded to zero.

Table 7A.7.26

Table 7A.7.26 Hospitalisations by Indigenous status (number),
Queensland, WA, SA, and public hospitals in the NT,
2003-04 (a)

		Indigenou	IS	N	on-Indigeno	us
•	male	female	total (f)	male	female	total (f)
Organic mental disorders (ICD–10–AM codes F00–F09) (b)	44	44	88	1 826	1 773	3 599
Substance use disorder (ICD-10-AM codes F10-F19) (c)	1 215	695	1 910	8 985	5 449	14 434
Mood and neurotic disorders (ICD–10–AM codes F30–F48) (d)	514	1 184	1 698	20 161	35 599	55 760
Schizophrenia, schizo typal and delusional disorders (ICD–10–AM codes F20–F29)	933	569	1 502	9 975	6 982	16 957
Other mental disorders (e)	132	123	255	1 694	3 449	5 143
All mental and behavioural disorders (ICD-10-AM codes F00-F99)	2 838	2 615	5 453	42 641	53 252	95 893
Other hospitalisations	65 680	90 602	156 282	1 120 878	1 259 587	2 380 466
Total hospitalisations	68 518	93 217	161 735	1 163 519	1 312 839	2 476 359

- (a) Indigenous data are reported for Queensland, Western Australia, South Australia and the Northern Territory only. These four jurisdictions are considered to have the highest level of accuracy of Indigenous identification, although the level of accuracy varies by jurisdiction and hospital. Data for these four jurisdictions over-represent Indigenous populations in less urbanised and more remote locations. Hospitalisation data for four jurisdictions should not be assumed to represent the hospitalisation experience in the other jurisdictions. Data based on state of usual residence.
- (b) Includes brain disorders due to brain damage and dysfunction, such as dementia.
- (c) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.
- (d) Includes depressive and anxiety disorders.
- (e) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.
- (f) Includes separations where sex is not stated.

Table 7A.7.27

Table 7A.7.27 Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, Queensland, WA, SA, and public hospitals in NT, 2004-05 (a), (b)

	Qld	WA	SA	NT	Qld, WA, SA and public hospitals in NT
		Rate per 1	000 popula	tion	
Organic mental disorders (ICD-	-10-AM codes F	00-F09) (c)			
Indigenous	0.6	1.2	1.8	0.8	0.9
Non-Indigenous	0.4	0.5	0.5	0.3	0.5
Substance use disorder (ICD-	10-AM codes F10)–F19) (d)			
Indigenous	6.0	11.7	13.7	4.0	7.7
Non-Indigenous	2.4	1.8	1.6	0.9	2.0
Mood and neurotic disorders (I	CD-10-AM code	s F30–F48) ((e)		
Indigenous	5.4	8.4	15.0	2.6	6.5
Non-Indigenous	7.7	8.3	5.5	2.6	7.3
Schizophrenia, schizo typal and	d delusional disor	ders (ICD-1	0-AM codes	F20-F29)	
Indigenous	5.7	6.8	10.8	3.0	5.8
Non-Indigenous	2.5	1.8	2.8	1.5	2.4
Other mental disorders (f)					
Indigenous	0.9	0.8	1.6	0.2	0.8
Non-Indigenous	0.8	0.7	0.6	0.2	0.7
All mental and behavioural d	isorders (ICD-1	0-AM code:	s F00–F99)		
Indigenous	18.5	28.9	42.8	10.6	21.7
Non-Indigenous	13.8	13.2	11.0	5.5	12.9

- (a) Indigenous data are reported for Queensland, Western Australia, South Australia and the Northern Territory only. Hospitalisation data for four jurisdictions should not be assumed to represent the hospitalisation experience in the other jurisdictions. Data are based on state of usual residence.
- (b) Directly age standardised using the 2001 Australian population.
- (c) Includes brain disorders due to brain damage and dysfunction, such as dementia.
- (d) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.
- (e) Includes depressive and anxiety disorders.
- (f) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.

Table 7A.7.28

Table 7A.7.28 Hospitalisation rate, per 1000 population, for mental and behavioural disorders (ICD-10-AM codes F00-F99), by Indigenous status, Queensland, WA, SA, and public hospitals in NT, 2004-05 (a)

	Indigenous			Non-I	ndigenous	(c)	To	otal persons	
- -	male	female	total	male	female	total	male	female	total
Age group (years)									
under 1	_	1.1	0.5	0.1	0.1	0.1	0.1	0.2	0.2
1–4	0.3	0.6	0.4	0.4	0.3	0.3	0.4	0.3	0.3
5–14	1.3	2.0	1.6	1.1	1.9	1.5	1.1	1.9	1.5
15–24	21.1	21.9	21.5	12.3	16.6	14.4	12.7	16.9	14.8
25–34	44.5	37.9	41.1	17.5	20.6	19.0	18.6	21.3	19.9
35–44	43.3	32.9	37.8	15.1	20.6	17.9	15.9	21.1	18.5
45–54	22.5	25.6	24.1	13.5	19.4	16.4	13.7	19.5	16.6
55–64	17.8	13.1	15.3	14.9	15.0	15.0	14.9	15.0	15.0
65–74	21.3	10.0	15.0	8.8	12.4	10.6	8.9	12.4	10.7
75+	12.6	13.9	13.4	12.8	14.9	14.0	12.8	14.9	14.0
All ages (b)	23.3	20.2	21.7	11.3	14.5	12.9	11.7	14.7	13.2

- (b) Directly age-standardised using the 2001 Australian population.
- (c) Non-Indigenous includes those with a not stated Indigenous status.

⁽a) Indigenous data are reported for Queensland, Western Australia, South Australia and the Northern Territory only. Hospitalisation data for four jurisdictions should not be assumed to represent the hospitalisation experience in the other jurisdictions. Data are based on state of usual residence.

Table 7A.7.29

Table 7A.7.29

Hospitalisations by Indigenous status (number), Queensland, WA, SA, and public hospitals in NT, 2004-05 (a)

_	lı	ndigenous		ı	Von-Indigen	ous
	male	female	total (b)	male	female	total (b)
Organic mental disorders (ICD–10–AM codes F00–F09) (c)	55	52	107	1 804	1 620	3 424
Substance use disorder (ICD-10-AM codes F10-F19) (d)	1 155	710	1 865	9 335	5 773	15 108
Mood and neurotic disorders (ICD-10-AM codes F30-F48) (e)	530	1 130	1 660	19 199	35 419	54 618
Schizophrenia, schizo typal and delusional disorders (ICD–10–AM codes F20–F29)	966	671	1 637	10 151	7 374	17 525
Other mental disorders (f)	113	136	249	1 551	3 877	5 428
All mental and behavioural disorders (ICD-10-AM codes F00-F99)	2 819	2 699	5 518	42 040	54 063	96 103
Other hospitalisations	70 482	95 101	165 584	1 161 264	1 292 655	2 453 923
Total hospitalisations	73 301	97 800	171 102	1 203 304	1 346 718	2 550 026

- (a) Indigenous data are reported for Queensland, Western Australia, South Australia and the Northern Territory only. Hospitalisation data for four jurisdictions should not be assumed to represent the hospitalisation experience in the other jurisdictions. Data are based on state of usual residence.
- (b) Includes separations where sex is not stated.
- (c) Includes brain disorders due to brain damage and dysfunction, such as dementia.
- (d) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.
- (e) Includes depressive and anxiety disorders.
- (f) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.

Table 7A.7.30

Table 7A.7.30 Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2005-06 (a), (b)

	Qld	WA	SA	NT	Qld, WA, SA and public hospitals in NT
		Rate per 1	000 popul	ation	
Organic mental disorders (ICD–10–AM codes F00–F09) (c)					
Indigenous persons	8.0	1.7	8.0	0.8	0.9
Non-Indigenous persons (d)	0.4	0.5	0.5	0.5	0.5
Substance use disorder (ICD-10-AM codes F10-F19) (e)					
Indigenous persons	6.3	12.6	15.2	5.2	8.4
Non-Indigenous persons (d)	2.3	1.9	1.5	1.0	2.0
Mood and neurotic disorders (ICD–10–AM codes F30–F48) (f)					
Indigenous persons	5.2	8.2	14.8	3.2	6.4
Non-Indigenous persons (d)	7.6	7.4	5.4	2.5	7.0
Schizophrenia, schizo typal and delusional disorders (ICD–10–AM codes F20–F29)					
Indigenous persons	5.0	6.6	8.2	3.9	5.5
Non-Indigenous persons (d)	2.4	1.7	2.4	1.5	2.2
Other mental disorders (g)					
Indigenous persons	0.6	0.7	1.2	0.3	0.6
Non-Indigenous persons (d)	0.6	0.9	0.6	0.2	0.7
All mental and behavioural disorders (ICD-10-AM codes F00-F99)					
Indigenous persons	18.0	29.7	40.1	13.4	21.9
Non-Indigenous persons (d)	13.3	12.4	10.5	5.7	12.4

Table 7A.7.30

Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2005-06 (a), (b)

ICD-10-AM International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification.

- (a) Indigenous data are reported for the following jurisdictions: Queensland, WA, SA and NT.
- (b) Directly age standardised using the 2001 Australian population.
- (c) Includes brain disorders due to brain damage and dysfunction, such as dementia.
- (d) Non-Indigenous includes hospitalisations identified as not stated Indigenous status.
- (e) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.
- (f) Includes depressive and anxiety disorders.
- (g) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.

Table 7A.7.31

Table 7A.7.31 Hospitalisation rate, per 1000 population, for mental and behavioural disorders (ICD-10-AM codes F00-F99), by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2005-06 (a)

	Indigenous			Non-I	ndigenous	(b)	Total persons		
	male	female	total	male	female	total	male	female	total
Age group (years)									
under 1	_	_	_	0.2	0.1	0.2	0.2	0.1	0.2
1–4	np	np	0.2	0.3	0.3	0.3	0.3	0.3	0.3
5–14	1.7	1.9	1.8	1.1	1.6	1.3	1.1	1.7	1.4
15–24	20.7	21.1	20.9	11.2	13.7	12.4	11.7	14.1	12.9
25–34	42.1	34.5	38.2	15.7	18.6	17.1	16.7	19.3	18.0
35–44	45.1	30.5	37.4	14.9	19.5	17.2	15.8	19.9	17.8
45–54	28.4	29.9	29.2	13.5	19.6	16.6	13.8	19.8	16.8
55–64	17.9	12.6	15.1	15.9	15.5	15.7	15.9	15.4	15.7
65–74	23.3	11.2	16.5	8.5	12.7	10.7	8.7	12.7	10.7
75+	12.2	16.3	14.6	14.0	15.5	14.9	14.0	15.5	14.9
All ages (c)	24.2	19.8	21.9	11.0	13.7	12.4	11.4	14.0	12.7

⁽a) Indigenous data are reported for the following jurisdictions: Queensland, WA, SA and NT.

⁽b) Non-Indigenous includes those with a not stated Indigenous status.

⁽c) Directly age-standardised using the 2001 Australian population.

[–] Nil or rounded to zero. **np** Not published due to less than 5 separations.

Table 7A.7.32

Hospitalisations by Indigenous status (number), Queensland, WA, SA, and public hospitals in the NT, 2005-06 (a)

		Indigenous		No	n-Indigenous	(b)
-	male	female	total (c)	male	female	total (c)
Organic mental disorders (ICD–10–AM codes F00–F09) (d)	54	53	107	1 762	1 707	3 469
Substance use disorder (ICD-10-AM codes F10-F19) (e)	1 292	783	2 075	9 481	6 054	15 535
Mood and neurotic disorders (ICD-10-AM codes F30-F48) (f)	553	1 092	1 645	19 994	34 059	54 053
Schizophrenia, schizo typal and delusional disorders (ICD-10-AM codes F20-F29)	956	619	1 575	9 330	7 194	16 524
Other mental disorders (g)	89	107	196	1 376	3 686	5 062
All mental and behavioural disorders (ICD-10-AM codes F00-F99)	2 944	2 654	5 598	41 943	52 700	94 643
Other hospitalisations	75 601	102 315	177 916	1 208 741	1 337 951	2 546 695
Total hospitalisations	78 545	104 969	183 514	1 250 684	1 390 651	2 641 338

- (a) Indigenous data are reported for the following jurisdictions: Queensland, WA, SA and NT.
- (b) Non-Indigenous includes hospitalisations reported as not stated Indigenous status.
- (c) Includes separations where sex is not stated.
- (d) Includes brain disorders due to brain damage and dysfunction, such as dementia.
- (e) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.
- (f) Includes depressive and anxiety disorders.
- (g) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.

Source: AIHW National Hospital Morbidity Database (unpublished).

Table 7A.7.32

Table 7A.7.33

Table 7A.7.33 Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status,
Queensland, WA, SA, and public hospitals in the NT, 2006-07 (a), (b)

	Qld	WA	SA	NT	Qld, WA, SA and public hospitals in NT
	R	ate per 1	1000 pop	ulation	
Organic mental disorders (ICD-10-AM codes F00-F09) (c)					
Indigenous persons	0.7	1.4	0.7	1.0	1.0
Non-Indigenous persons (d)	0.4	0.6	0.6	0.4	0.5
Substance use disorder (ICD-10-AM codes F10-F19) (e)					
Indigenous persons	6.3	12.1	15.7	4.7	8.2
Non-Indigenous persons (d)	2.3	1.9	1.7	0.9	2.1
Mood and neurotic disorders (ICD-10-AM codes F30-F48) (f)					
Indigenous persons	5.1	7.7	13.6	2.8	6.0
Non-Indigenous persons (d)	7.9	7.9	5.8	1.8	7.4
Schizophrenia, schizo typal and delusional disorders (ICD–10–AM codes F20–F29)					
Indigenous persons	5.2	7.7	9.2	3.7	5.8
Non-Indigenous persons (d)	2.2	1.7	2.5	1.4	2.1
Other mental disorders (g)					
Indigenous persons	0.7	0.5	1.1	0.2	0.6
Non-Indigenous persons (d)	0.6	0.9	0.6	0.1	0.7
All mental and behavioural disorders (ICD-10-AM codes F00-F99)					
Indigenous persons	18.0	29.4	40.2	12.3	21.7
Non-Indigenous persons (d)	13.4	12.9	11.2	4.8	12.7

⁽a) Indigenous data are reported for the following jurisdictions: Queensland, WA, SA and NT.

⁽b) Directly age standardised using the 2001 Australian population.

⁽c) Includes brain disorders due to brain damage and dysfunction, such as dementia.

⁽d) Non-Indigenous includes hospitalisations identified as not stated Indigenous status.

Table 7A.7.33 Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status,
Queensland, WA, SA, and public hospitals in the NT, 2006-07 (a), (b)

Qld, WA, SA and					
public hospitals in	NT	SA	WA	Qld	
NT					

Rate per 1000 population

- (e) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.
- (f) Includes depressive and anxiety disorders.
- (g) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.

Table 7A.7.34

Table 7A.7.34 Hospitalisation rate, per 1000 population, for mental and behavioural disorders (ICD-10-AM codes F00-F99), by Indigenous status, Queensland, WA, SA, and public hospitals in the NT, 2006-07 (a), (b)

	lı	ndigenous		Non-	Indigenous	s (c)	Total persons		
	male	female	total	male	female	total	male f	emale	total
Age group (years)									
under 1	np	np	np	0.2	0.2	0.2	0.1	0.2	0.2
1–4	np	np	0.3	0.3	0.3	0.3	0.3	0.3	0.3
5–14	1.6	2.0	1.8	1.0	1.2	1.1	1.1	1.3	1.2
15–24	20.4	19.9	20.2	10.3	12.3	11.3	10.8	13.4	12.1
25–34	45.5	34.2	39.7	15.8	16.6	16.2	17.0	18.0	17.5
35–44	48.9	30.8	39.3	15.5	19.5	17.5	16.6	20.2	18.4
45–54	30.2	26.6	28.3	14.0	19.1	16.6	14.4	19.4	16.9
55–64	17.8	11.3	14.3	21.0	13.9	17.4	21.0	14.1	17.5
65–74	14.8	11.1	12.7	12.6	12.5	12.6	12.6	12.5	12.5
75+	12.8	10.2	11.3	18.1	21.0	19.7	18.0	18.0	18.0
All ages (c)	24.8	18.8	21.6	12.0	13.3	12.7	12.5	13.5	13.1

np Not published due to less than 5 separations.

⁽a) Indigenous data are reported for the following jurisdictions: Queensland, WA, SA and NT.

⁽b) Directly age-standardised using the 2001 Australian population.

⁽c) Non-Indigenous includes those with a not stated Indigenous status.

Table 7A.7.35

Table 7A.7.35

Hospitalisations by Indigenous status (number),
Queensland, WA, SA, and public hospitals in the NT, 200607 (a)

		Indigenous		No	n-Indigenous	s (b)
	male	female	total (c)	male	female	total (c)
Organic mental disorders (ICD–10–AM codes F00–F09) (d)	63	42	105	1 780	1 820	3 600
Substance use disorder (ICD-10-AM codes F10-F19) (e)	1 332	811	2 143	9 694	6 342	16 036
Mood and neurotic disorders (ICD-10-AM codes F30-F48) (f)	585	1 017	1 602	23 844	34 015	57 859
Schizophrenia, schizo typal and delusional disorders (ICD–10–AM codes F20–F29)	1 070	644	1 714	9 366	6 693	16 059
Other mental disorders (g)	94	104	198	1 367	3 690	5 057
All mental and behavioural disorders (ICD-10-AM codes F00-F99)	3 144	2 618	5 762	46 051	52 560	98 611
Other hospitalisations	77 876	105 900	183 776	1 256 458	1 395 023	2 651 490
Total hospitalisations	81 020	108 518	189 538	1 302 509	1 447 583	2 750 101

⁽a) Indigenous data are reported for the following jurisdictions: Queensland, WA, SA and NT.

Table 7A.7.35

Hospitalisations by Indigenous status (number), Queensland, WA, SA, and public hospitals in the NT, 2006-07 (a)

- (b) Non-Indigenous includes hospitalisations reported as not stated Indigenous status.
- (c) Includes separations where sex is not stated.
- (d) Includes brain disorders due to brain damage and dysfunction, such as dementia.
- (e) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.
- (f) Includes depressive and anxiety disorders.
- (g) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.

Table 7A.7.36

Table 7A.7.36 Male Indigenous standardised hospital separation ratios for mental and behavioural disorders, Queensland, WA, SA, and public hospitals in NT, 2001-02 to 2006-07 (a), (b)

			,		(- // (- /	
	Unit	Qld	WA	SA	NT	Qld, WA, SA and public hospitals in NT
2001-02						
Organic mental	Number	30	19	np	np	78
disorders	Rate ratio	2.4	1.5	-	•	
(ICD-10-AM codes	95% CI	1.5 to 3.9	0.8 to 2.7	np np	np np	
F00-F09) (c)	0070 01	1.0 to 0.0	0.0 to 2.7	119	110	1.1 to 2.0
Substance use	Number	510	438	166	137	1 251
disorder (ICD-10-AM	Rate ratio	3.1	6.5	8.8	4.9	4.0
codes F10-F19) (d)	95% CI	2.8 to 3.4	5.8 to 7.3	7.3 to 10.6	3.6 to 6.7	
Mood and neurotic						
disorders	Number	277	177	100	47	601
(ICD-10-AM codes	Rate ratio	0.7	1.0	1.5	0.8	0.8
F30-F48) (e)	95% CI	0.6 to 0.8	0.8 to 1.2	1.2 to 1.9	0.6 to 1.2	0.7 to 0.8
Schizophrenia, schizo	Number	380	225	96	76	777
typal and delusional	Rate ratio	1.9	3.0	2.2	1.2	1.9
disorders	95% CI	1.7 to 2.2	2.6 to 3.6	1.8 to 2.8	0.9 to 1.6	1.7 to 2.1
(ICD-10-AM codes		0 =.=			0.0 10 1.0	
Other mental	Number	78	30	np	np	128
Other mental disorders (f)	Rate ratio	2.8	1.0	np	np	1.9
4.00.40.0 (1)	95% CI	2.2 to 3.6	0.7 to 1.5	np	np	1.5 to 2.3
All mental and	Number	1 275	889	384	287	2 835
behavioural	Rate ratio					
disorders	95% CI	1.6 1.5 to 1.7	2.5 2.3 to 2.7	2.9 2.6 to 3.3	1.9 1.6 to 2.3	1.8 1.7 to 1.8
(ICD-10-AM codes F00-F99)	33 /0 01	1.5 (6 1.7	2.0 10 2.7	2.0 10 0.0	1.0 to 2.0	1.7 to 1.0
2002-03						
Organic mental	Number	19	22	np	np	50
disorders	Rate ratio	1.5	2.1	np	np	1.5
(ICD-10-AM codes	95% CI	0.8 to 2.8	1.2 to 3.6	np	np	1.0 to 2.2
F00-F09) (c)	3370 01	3.0 to 2.0	1.2 10 0.0	קוי	ıη	1.0 to 2.2
Substance use	Number	470	463	135	151	1 219
disorder (ICD-10-AM	Rate ratio	3.7	7.4	6.7	4.9	4.6
codes F10-F19) (d)	95% CI	3.4 to 4.1	6.7 to 8.3	5.5 to 8.1	3.7 to 6.5	4.3 to 4.9

Table 7A.7.36

Table 7A.7.36 Male Indigenous standardised hospital separation ratios for mental and behavioural disorders, Queensland, WA, SA, and public hospitals in NT, 2001-02 to 2006-07 (a), (b)

	Unit	Qld	WA	SA	NT	Qld, WA, SA and public hospitals in NT
Mood and neurotic	Number	265	183	108	41	597
disorders (ICD-10-AM codes	Rate ratio	8.0	1.2	1.8	0.7	0.8
F30–F48) (e)	95% CI	0.7 to 0.9	1.0 to 1.4	1.5 to 2.2	0.5 to 1.0	0.8 to 0.9
Schizophrenia, schizo	Number	415	274	120	62	871
typal and delusional disorders	Rate ratio	2.5	4.4	2.7	1.4	2.5
(ICD–10–AM codes	95% CI	2.3 to 2.8	3.8 to 5.1	2.2 to 3.3	1.0 to 2.0	2.3 to 2.7
	Number	60	33	np	np	107
Other mental disorders (f)	Rate ratio	1.9	1.9	np	np	1.7
disorders (I)	95% CI	1.4 to 2.6	1.3 to 2.7	np	np	1.3 to 2.2
All mental and	Number	1 229	975	378	262	2 844
behavioural	Rate ratio	1.8	3.2	2.9	1.7	2.0
disorders (ICD-10-AM codes F00-F99)	95% CI	1.7 to 1.9	2.9 to 3.4	2.6 to 3.3	1.5 to 2.1	1.9 to 2.1
2003-04						
Organic mental	Number	11	np	10	np	44
disorders (ICD-10-AM codes	Rate ratio	1.0	np	5.9	np	1.9
F00–F09) (c)	95% CI	0.5 to 2.1	np	2.8 to 12.5	np	1.3 to 2.7
Substance use	Number	447	445	183	140	1 215
disorder (ICD-10-AM	Rate ratio	3.4	7.8	8.3	4.5	4.5
codes F10-F19) (d)	95% CI	3.0 to 3.8	7.0 to 8.8	7.1 to 9.8	3.4 to 5.9	4.2 to 4.8
Mood and neurotic	Number	200	164	102	48	514
disorders (ICD–10–AM codes	Rate ratio	0.6	1.1	1.6	0.8	0.8
F30–F48) (e)	95% CI	0.5 to 0.8	1.0 to 1.3	1.3 to 2.0	0.6 to 1.1	0.7 to 0.8
Schizophrenia, schizo	Number	424	275	135	99	933
typal and delusional disorders	Rate ratio	2.4	3.9	2.7	2.0	2.4
(ICD–10–AM codes	95% CI	2.2 to 2.7	3.4 to 4.4	2.3 to 3.3	1.5 to 2.6	2.2 to 2.6

Table 7A.7.36

Table 7A.7.36 Male Indigenous standardised hospital separation ratios for mental and behavioural disorders, Queensland, WA, SA, and public hospitals in NT, 2001-02 to 2006-07 (a), (b)

	=					
	Unit	Qld	WA	SA	NT	Qld, WA, SA and public hospitals in NT
	Number	71	np	17	np	132
Other mental disorders (f)	Rate ratio	1.9	np	3.0	np	1.7
districts (I)	95% CI	1.4 to 2.4	np	1.8 to 4.9	np	1.4 to 2.1
All mental and	Number	1 153	940	447	298	2 838
behavioural disorders	Rate ratio	1.7	3.2	3.4	1.8	2.0
(ICD-10-AM codes F00-F99)	95% CI	1.6 to 1.8	3.0 to 3.4	3.0 to 3.8	1.5 to 2.1	1.9 to 2.1
2004-05 Organic mental	Number	22	16	0	٥	55
disorders	Number Rate ratio	1.5	16 2.3	9 4.0	8 1.3	55 1.9
(ICD-10-AM codes	95% CI	0.8 to 2.7	1.2 to 4.3	1.6 to 10.1	0.4 to 4.1	1.3 to 2.7
F00-F09) (c)	95 /0 CI	0.0 to 2.7	1.2 (0 4.3	1.0 to 10.1	0.4 (0 4.1	1.5 (0 2.7
Substance use	Number	416	386	177	176	1 155
disorder (ICD-10-AM	Rate ratio	3.1	6.4	8.4	4.9	4.2
codes F10-F19) (d)	95% CI	2.8 to 3.5	5.7 to 7.2	7.1 to 10.0	3.8 to 6.3	3.9 to 4.5
Mood and neurotic	Number	196	169	99	66	530
disorders (ICD-10-AM codes	Rate ratio	0.7	1.2	1.9	0.8	0.9
F30–F48) (e)	95% CI	0.6 to 0.8	1.0 to 1.4	1.5 to 2.4	0.6 to 1.1	0.8 to 1.0
Schizophrenia, schizo	Number	431	273	152	110	966
typal and delusional disorders	Rate ratio	2.4	3.5	3.2	1.6	2.4
(ICD-10-AM codes	95% CI	2.2 to 2.65	3.1 to 4.1	2.7 to 3.8	1.3 to 2.1	2.3 to 2.6
	Number	67	30	10	6	113
Other mental disorders (f)	Rate ratio	2.0	2.2	2.8	1.1	1.8
districts (I)	95% CI	1.5 to 2.7	1.4 to 3.2	1.3 to 5.8	0.4 to 3.0	1.5 to 2.3
All mental and	Number	1 132	874	447	366	2 819
behavioural	Rate ratio	1.7	2.9	3.7	1.9	2.1
disorders (ICD-10-AM codes F00-F99)	95% CI	1.6 to 1.8	2.7 to 3.2	3.3 to 4.2	1.6 to 2.2	2.0 to 2.2

Table 7A.7.36

Table 7A.7.36 Male Indigenous standardised hospital separation ratios for mental and behavioural disorders, Queensland, WA, SA, and public hospitals in NT, 2001-02 to 2006-07 (a), (b)

	•	•	,		(// (/	
	Unit	Qld	WA	SA	NT	Qld, WA, SA and public hospitals in NT
2005-06						_
Organic mental	Number	12	23	9	10	54
disorders (ICD-10-AM codes	Rate ratio	1.4	3.5	1.3	0.8	2.0
F00–F09) (c)	95% CI	0.7 to 3.0	2.1 to 5.8	0.6 to 2.6	0.4 to 1.8	1.4 to 2.8
Substance use	Number	408	460	216	208	1,292
disorder (ICD-10-AM	Rate ratio	3.2	6.8	9.8	5.7	4.7
codes F10-F19) (d)	95% CI	2.9 to 3.6	6.1 to 7.6	8.4 to 11.5	4.5 to 7.3	4.4 to 5.0
Mood and neurotic	Number	209	159	104	81	553
disorders (ICD-10-AM codes	Rate ratio	0.7	0.9	2.2	1.1	0.9
F30–F48) (e)	95% CI	0.6 to 0.9	0.8 to 1.1	1.7 to 2.7	0.8 to 1.6	0.8 to 1.0
Schizophrenia, schizo	Number	413	274	134	135	956
typal and delusional disorders	Rate ratio	2.5	4.0	3.1	2.0	2.7
(ICD–10–AM codes	95% CI	2.3 to 2.8	3.5 to 4.6	2.6 to 3.7	1.5 to 2.6	2.4 to 2.5
	Number	44	26	12	7	89
Other mental disorders (f)	Rate ratio	2.2	1.8	2.7	0.9	1.8
4,00,40,0	95% CI	1.4 to 3.5	1.2 to 2.7	1.5 to 5.1	0.4 to 2.2	1.4 to 2.4
All mental and	Number	1,086	942	475	441	2,944
behavioural	Rate ratio	1.8	3.0	3.9	2.3	2.2
disorders (ICD-10-AM codes F00-F99)	95% CI	1.7 to 1.9	2.8 to 3.3	3.5 to 4.3	2.0 to 2.6	2.1 to 2.3
2006-07						
Organic mental disorders	Number	24	26	n.p.	9	63
(ICD-10-AM codes	Rate ratio	2.4	3.4	n.p.	1.3	2.4
F00-F09) (c)	95% CI	1.4 to 4.1	2.1 to 5.4	n.p.	0.5 to 3.7	1.7 to 3.3
Substance use	Number	465	450	226	191	1,332
disorder (ICD-10-AM	Rate ratio	3.3	6.3	8.6	4.4	4.4
codes F10-F19) (d)	95% CI	3.0 to 3.7	5.7 to 7.0	7.4 to 10.0	3.5 to 5.6	4.2 to 4.7

Table 7A.7.36

Table 7A.7.36 Male Indigenous standardised hospital separation ratios for mental and behavioural disorders, Queensland, WA, SA, and public hospitals in NT, 2001-02 to 2006-07 (a), (b)

	Unit	Qld	WA	SA	NT	Qld, WA, SA and public hospitals in NT
Mood and neurotic	Number	242	159	119	65	585
disorders (ICD-10-AM codes	Rate ratio	0.6	0.9	2.1	1.0	0.7
F30–F48) (e)	95% CI	0.5 to 0.7	0.7 to 1.1	1.7 to 2.6	0.7 to 1.4	0.7 to 0.8
aisoraers	^O Number	430	366	133	141	1,070
	Rate ratio	2.6	5	2.9	2.2	2.9
	95% CI	2.4 to 2.9	4.4 to 5.6	2.4 to 3.5	1.7 to 2.8	2.7 to 3.1
011.	Number	54	21	11	8	94
Other mental disorders (f)	Rate ratio	2.2	1.3	2.8	1.3	1.6
disorders (i)	95% CI	1.6 to 2.9	0.8 to 2.1	1.2 to 6.2	0.5 to 3.2	1.3 to 2.1
All mental and	Number	1,215	1,022	493	414	3,144
behavioural	Rate ratio	1.7	2.9	3.7	2.2	2.1
disorders (ICD-10-AM codes F00-F99)	95% CI	1.6 to 1.8	2.7 to 3.2	3.3 to 4.1	1.9 to 2.6	2.0 to 2.1

- (a) Indigenous data are reported for Queensland, Western Australia, South Australia and the Northern Territory only. Hospitalisation data for four jurisdictions should not be assumed to represent the hospitalisation experience in the other jurisdictions. Data are based on state of usual residence.
- (b) Rate ratio was calculated from directly age standardised data using the 2001 Australian population.
- (c) Includes brain disorders due to brain damage and dysfunction, such as dementia.
- (d) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.
- (e) Includes depressive and anxiety disorders.
- (f) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.

np Not published due to less than 5 separations.

Table 7A.7.37

Table 7A.7.37 Female Indigenous standardised hospital separation ratios for mental and behavioural disorders, Queensland, WA, SA, and public hospitals in NT, 2001-02 to 2006-07 (a), (b)

	Unit	Qld	WA	SA	NT	Qld, WA, SA and public hospitals in NT
2001-02						_
Organic mental disorders	Number	9	11	np	np	32
(ICD-10-AM codes	Rate ratio	1.0	1.3	np	np	1.1
F00-F09) (c)	95% CI	0.5 to 2.0	0.6 to 2.7	np	np	0.7 to 1.6
Substance use disorder	Number	239	266	106	40	651
(ICD-10-AM codes	Rate ratio	2.1	6.6	8.4	6.6	3.3
F10–F19) (d)	95% CI	1.9 to 2.5	5.7 to 7.6	6.7 to 10.4	3.5 to 12.4	3 to 3.6
Mood and neurotic	Number	386	387	265	48	1 086
disorders (ICD-10-AM	Rate ratio	0.6	1.2	2.8	0.9	0.9
codes F30-F48) (e)	95% CI	0.6 to 0.7	1.0 to 1.3	2.4 to 3.2	0.6 to 1.4	0.8 to 0.9
Schizophrenia, schizo typal	Number	211	179	89	39	518
and delusional disorders	Rate ratio	1.6	4.2	3.2	2.2	2.0
(ICD-10-AM codes F20-F29)	95% CI	1.4 to 1.8	3.5 to 5.0	2.5 to 4.2	1.4 to 3.5	1.8 to 2.2
	Number	50	41	np	np	137
Other mental disorders (f)	Rate ratio	0.6	0.8	np	np	0.7
	95% CI	0.4 to 0.8	0.6 to 1.1	np	np	0.6 to 0.8
	Number	895	884	504	141	2 424
All mental and behavioural disorders	Rate ratio	0.9	1.9	3.2	1.6	1.2
(ICD-10-AM codes F00-F99)	95% CI	0.9 to 1.0	1.7 to 2.0	2.9 to 3.6	1.2 to 2.1	1.2 to 1.3
2002-03						
Organic mental disorders	Number	13	17	np	np	39
(ICD-10-AM codes	Rate ratio	2.1	2.4	np	np	1.9
F00-F09) (c)	95% CI	1.1 to 3.8	1.4 to 4.2	np	np	1.3 to 2.7
Substance use disorder	Number	233	289	90	58	670
(ICD-10-AM codes	Rate ratio	2.3	7.5	7.6	6.2	3.6
OVERCOMING INDIGENOUS DISADVANTAGE: KEY NDICATORS 2009						ATTACHMENT TABLES

Table 7A.7.37

Table 7A.7.37 Female Indigenous standardised hospital separation ratios for mental and behavioural disorders, Queensland, WA, SA, and public hospitals in NT, 2001-02 to 2006-07 (a), (b)

	Unit	Qld	WA	SA	NT	Qld, WA, SA and public hospitals in NT
F10-F19) (d)	95% CI	2.0 to 2.6	6.5 to 8.6	6.0 to 9.6	3.7 to 10.2	3.3 to 3.9
Mood and neurotic disorders (ICD-10-AM	Number Rate ratio	358 0.7	419 1.3	260 2.4	62 1.2	1 099 0.9
codes F30-F48) (e)	95% CI	0.6 to 0.7	1.2 to 1.5	2.1 to 2.8	0.9 to 1.7	0.8 to 0.9
Schizophrenia, schizo typa and delusional disorders (ICD-10-AM codes	Number Rate ratio	251 2.2	193 4.8	107 3.4	73 3.2	624 2.5
F20–F29)	95% CI	1.9 to 2.6	4.1 to 5.7	2.8 to 4.2	2.2 to 4.6	2.3 to 2.7
	Number	67	41	np	np	151
Other mental disorders (f)	Rate ratio	0.9	1.0	np	np	0.9
	95% CI	0.7 to 1.2	0.7 to 1.4	np	np	0.8 to 1.1
All mental and	Number	922	959	500	202	2 583
behavioural disorders (ICD-10-AM codes F00-F99)	Rate ratio 95% CI	1.1 1.0 to 1.2	2.2 2.0 to 2.3	3.0 2.7 to 3.3	2.2 1.8 to 2.7	1.4 1.3 to 1.5
2003-04						
Organic mental disorders	Number	15	13	10	np	44
(ICD-10-AM codes	Rate ratio	1.9	2.2	4.2	np	2.2
F00-F09) (c)	95% CI	1.1 to 3.5	1.1 to 4.1	2.1 to 8.5	np	1.5 to 3.0
Substance use disorder	Number	242	276	104	73	695
(ICD-10-AM codes	Rate ratio	2.2	7.1	8.4	5.9	3.5
F10–F19) (d)	95% CI	1.9 to 2.5	6.1 to 8.1	6.8 to 10.3	3.7 to 9.4	3.2 to 3.8
Mood and neurotic	Number	395	399	315	75	1 184
disorders (ICD-10-AM	Rate ratio	0.6	1.2	3.2	1.3	0.9
codes F30–F48) (e)	95% CI	0.6 to 0.7	1.1 to 1.4	2.9 to 3.6	1.0 to 1.8	0.9 to 1.0
Schizophrenia, schizo typa	Number	232	174	110	53	569

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009 ATTACHMENT TABLES

Table 7A.7.37

Table 7A.7.37 Female Indigenous standardised hospital separation ratios for mental and behavioural disorders, Queensland, WA, SA, and public hospitals in NT, 2001-02 to 2006-07 (a), (b)

	Unit	Qld	WA	SA	NT	Qld, WA, SA and public hospitals in NT
(ICD–10–AM codes	Rate ratio	2.0	4.1	3.7	2.0	2.2
F20-F29)	95% CI	1.7 to 2.3	3.5 to 4.9	3.0 to 4.6	1.3 to 3.0	2.0 to 2.4
	Number	47	np	38	np	123
Other mental disorders (f)	Rate ratio	0.7	np	2.6	np	8.0
	95% CI	0.5 to 1.0	np	1.8 to 3.6	np	0.7 to 1.0
All mental and	Number	931	885	577	222	2 615
behavioural disorders	Rate ratio	1.0	2.0	3.7	2.1	1.4
(ICD-10-AM codes F00-F99)	95% CI	1.0 to 1.1	1.8 to 2.1	3.4 to 4.1	1.7 to 2.6	1.3 to 1.5
2004-05						
Organic mental disorders	Number	13	16	9	14	52
(ICD-10-AM codes	Rate ratio	1.7	2.2	3.5	3.9	2.2
F00–F09) (c)	95% CI	0.9 to 3.5	1.3 to 3.9	1.5 to 8.2	1.3 to 11.1	1.6 to 3.2
Substance use disorder	Number	214	301	129	66	710
(ICD-10-AM codes	Rate ratio	1.9	6.9	9.9	4.6	3.4
F10–F19) (d)	95% CI	1.6 to 2.2	6.0 to 7.9	8.2 to 12.1	3.0 to 7.1	3.1 to 3.7
Mood and neurotic	Number	398	359	273	100	1 130
disorders (ICD-10-AM	Rate ratio	0.7	0.9	3.3	1.3	0.9
codes F30–F48) (e)	95% CI	0.6 to 0.8	0.8 to 1.0	2.9 to 3.7	1.0 to 1.7	0.8 to 0.9
Schizophrenia, schizo typa	l Number	274	211	118	68	671
and delusional disorders (ICD-10-AM codes	Rate ratio	2.1	4.1	4.7	3.4	2.5
F20-F29)	95% CI	1.8 to 2.4	3.5 to 4.8	3.7 to 5.9	2.3 to 5.0	2.3 to 2.7
	Number	64	28	34	10	136
Other mental disorders (f)	Rate ratio	0.7	0.7	2.4	1.0	0.7
	95% CI	0.51 to 0.9	0.5 to 1.1	1.7 to 3.4	0.5 to 2.1	0.6 to 0.9

Table 7A.7.37

Table 7A.7.37 Female Indigenous standardised hospital separation ratios for mental and behavioural disorders, Queensland, WA, SA, and public hospitals in NT, 2001-02 to 2006-07 (a), (b)

	Unit	Qld	WA	SA	NT	Qld, WA, SA and public hospitals in NT
All mental and	Number	963	915	563	258	2 699
behavioural disorders (ICD-10-AM codes F00-F99)	Rate ratio 95% CI	1.1 1.0 to 1.1	1.7 1.6 to 1.9	4.1 3.7 to 4.5	2.1 1.8 to 2.6	1.4 1.3 to 1.5
2005-06						
Organic mental disorders	Number	18	22	5	8	53
(ICD-10-AM codes	Rate ratio	2.9	2.8	1.8	2.9	2.6
F00-F09) (c)	95% CI	1.7 to 5.0	1.7 to 4.7	0.6 to 5.5	1.0 to 8.6	1.9 to 3.6
Substance use disorder	Number	260	301	147	75	783
(ICD-10-AM codes	Rate ratio	2.1	6.8	10.7	5.5	3.6
F10–F19) (d)	95% CI	1.8 to 2.4	5.9 to 7.8	8.9 to 12.9	3.7 to 8.3	3.3 to 3.9
Mood and neurotic	Number	360	365	255	112	1,092
disorders (ICD-10-AM	Rate ratio	0.7	1.2	3.1	1.5	0.9
codes F30–F48) (e)	95% CI	0.6 to 0.7	1.0 to 1.3	2.7 to 3.5	1.2 to 1.9	0.9 to 1.0
Schizophrenia, schizo typa	l Number	218	194	99	108	619
and delusional disorders (ICD-10-AM codes	Rate ratio	1.7	3.9	3.8	4.0	2.3
F20-F29)	95% CI	1.5 to 2.0	3.3 to 4.5	3.1 to 4.7	2.9 to 5.4	2.1 to 2.5
	Number	43	24	24	16	107
Other mental disorders (f)	Rate ratio	0.6	0.4	1.6	1.7	0.6
	95% CI	0.4 to 0.8	0.3 to 0.7	1.0 to 2.4	0.9 to 3.3	0.5 to 0.7
All mental and	Number	899	906	530	319	2,654
behavioural disorders	Rate ratio	1.0	1.9	3.8	2.5	1.4
(ICD-10-AM codes F00-F99)	95% CI	1.0 to 1.1	1.8 to 2.1	3.4 to 4.1	2.1 to 3.0	1.4 to 1.5
2006-07						
Organic mental disorders	Number	12	17	n.p.	10	42

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009 ATTACHMENT TABLES

Table 7A.7.37 Female Indigenous standardised hospital separation ratios for mental and behavioural disorders, Queensland, WA, SA, and public hospitals in NT, 2001-02 to 2006-07 (a), (b)

	Unit	Qld	WA	SA	NT	Qld, WA, SA and public hospitals in NT
(ICD-10-AM codes	Rate ratio	1.1	1.9	n.p.	4.3	1.6
F00-F09) (c)	95% CI	0.6 to 2.3	1.1 to 3.4	n.p.	1.6 to 11.3	1.1 to 2.3
Substance use disorder	Number	247	321	159	84	811
(ICD-10-AM codes	Rate ratio	2.0	6.4	10.6	7.4	3.5
F10-F19) (d)	95% CI	1.7 to 2.3	5.7 to 7.3	8.9 to 12.6	4.9 to 11.1	3.3 to 3.8
Mood and neurotic	Number	355	331	228	103	1,017
disorders (ICD-10-AM	Rate ratio	0.7	1.0	2.5	2.2	0.9
codes F30-F48) (e)	95% CI	0.6 to 0.8	0.9 to 1.1	2.2 to 2.9	1.7 to 2.9	0.8 to 0.9
Schizophrenia, schizo typa and delusional disorders	Namber	231	199	119	95	644
(ICD-10-AM codes	Rate ratio	2.1	4.2	5	3.1	2.7
F20-F29)	95% CI	1.8 to 2.4	3.7 to 4.9	4.1 to 6.1	2.3 to 4.3	2.5 to 2.9
	Number	58	18	19	9	104
Other mental disorders (f)	Rate ratio	8.0	0.3	1.5	1.6	0.6
	95% CI	0.6 to 1.0	0.2 to 0.5	0.9 to 2.3	0.7 to 3.7	0.5 to 0.7
All mental and	Number	903	886	528	301	2,618
behavioural disorders	Rate ratio	1.1	1.8	3.6	3.2	1.4
(ICD-10-AM codes F00-F99)	95% CI	1.0 to 1.2	1.7 to 1.9	3.2 to 3.9	2.6 to 3.8	1.4 to 1.5

Table 7A.7.37

Female Indigenous standardised hospital separation ratios for mental and behavioural disorders, Queensland, WA, SA, and public hospitals in NT, 2001-02 to 2006-07 (a), (b)

Unit	Qld	WA	SA	Qld, WA, SA and public hospitals in NT
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CI confidence interval. ICD–10–AM International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification.

- (a) Indigenous data are reported for Queensland, Western Australia, South Australia and the Northern Territory only. Hospitalisation data for four jurisdictions should not be assumed to represent the hospitalisation experience in the other jurisdictions. Data are based on state of usual residence.
- (b) Rate ratio was calculated from directly age standardised data using the 2001 Australian population.
- (c) Includes brain disorders due to brain damage and dysfunction, such as dementia.
- (d) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.
- (e) Includes depressive and anxiety disorders.
- (f) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.

np Not published due to less than 5 separations.

Table 7A.7.38

Table 7A.7.38 Indigenous standardised hospital separation ratios for mental and behavioural disorders, Queensland, WA, SA, and public hospitals in NT, 2001-02 to 2006-07 (a), (b)

	Unit	Qld	WA	SA	NT	Qld, WA, SA and public hospitals in NT
2001-02						
Organic mental disorders	Number	39	30	12	29	110
(ICD-10-AM codes	Rate ratio	1.7	1.4	1.3	2.9	1.5
F00-F09) (c)	95% CI	1.1 to 2.4	0.9 to 2.3	0.6 to 2.9	1.4 to 5.8	1.2 to 1.9
Substance use disorder	Number	749	704	272	177	1 902
(ICD-10-AM codes	Rate ratio	2.7	6.4	8.5	5.0	3.7
F10–F19) (d)	95% CI	2.5 to 2.9	5.9 to 7.0	7.4 to 9.8	3.8 to 6.6	3.5 to 3.9
Mood and neurotic	Number	663	564	365	95	1 687
disorders (ICD-10-AM	Rate ratio	0.7	1.1	2.3	0.9	0.8
codes F30–F48) (e)	95% CI	0.6 to 0.8	1.0 to 1.2	2.0 to 2.6	0.7 to 1.2	0.8 to 0.9
Schizophrenia, schizo typal	l Number	591	404	185	115	1 295
and delusional disorders (ICD-10-AM codes	Rate ratio	1.8	3.4	2.7	1.4	1.9
F20–F29)	95% CI	1.6 to 1.9	3.0 to 3.8	2.2 to 3.2	1.1 to 1.8	1.8 to 2.0
	Number	128	71	54	12	265
Other mental disorders (f)	Rate ratio	1.3	0.9	2.6	0.9	1.1
	95% CI	1.1 to 1.5	0.7 to 1.1	1.9 to 3.5	0.4 to 1.8	0.9 to 1.2
All mental and	Number	2 170	1 773	888	428	5 259
behavioural disorders	Rate ratio	1.3	2.1	3.1	1.7	1.5
(ICD-10-AM codes F00-F99)	95% CI	1.2 to 1.3	2.0 to 2.3	2.9 to 3.3	1.5 to 2.0	1.4 to 1.5
2002-03						
Organic mental disorders	Number	32	39	10	8	89
(ICD–10–AM codes	Rate ratio	1.8	2.2	2.1	1.1	1.7
F00-F09) (c)	95% CI	1.2 to 2.8	1.5 to 3.3	1.0 to 4.4	0.4 to 2.9	1.3 to 2.2
Substance use disorder	Number	703	752	225	209	1 889
(ICD-10-AM codes	Rate ratio	3.0	7.4	6.9	4.8	4.1
F10–F19) (d)	95% CI	2.8 to 3.3	6.8 to 8.0	6.0 to 8.0	3.8 to 6.2	3.9 to 4.4

Table 7A.7.38

Table 7A.7.38 Indigenous standardised hospital separation ratios for mental and behavioural disorders, Queensland, WA, SA, and public hospitals in NT, 2001-02 to 2006-07 (a), (b)

	Unit	Qld	WA	SA	NT	Qld, WA, SA and public hospitals in NT
Mood and neurotic	Number	623	602	368	103	1 696
disorders (ICD-10-AM	Rate ratio	0.7	1.3	2.2	0.9	0.9
codes F30-F48) (e)	95% CI	0.6 to 0.8	1.2 to 1.4	2.0 to 2.5	0.7 to 1.1	0.8 to 0.9
Schizophrenia, schizo typal	Number	666	467	227	136	1 496
and delusional disorders (ICD-10-AM codes	Rate ratio	2.4	4.5	3.0	1.8	2.5
F20–F29)	95% CI	2.2 to 2.6	4.0 to 5.0	2.6 to 3.4	1.4 to 2.4	2.3 to 2.6
	Number	127	74	48	9	258
Other mental disorders (f)	Rate ratio	1.2	1.3	2.7	0.8	1.2
	95% CI	1.0 to 1.5	1.0 to 1.6	1.9 to 4.0	0.4 to 1.8	1.0 to 1.3
All mental and	Number	2 151	1 934	878	465	5 428
behavioural disorders	Rate ratio	1.4	2.6	2.9	1.8	1.7
(ICD-10-AM codes F00-F99)	95% CI	1.3 to 1.5	2.4 to 2.7	2.7 to 3.2	1.6 to 2.1	1.6 to 1.7
2003-04						
Organic mental disorders	Number	26	33	20	9	88
(ICD-10-AM codes	Rate ratio	1.5	2.4	5.0	0.9	2.0
F00-F09) (c)	95% CI	0.9 to 2.3	1.6 to 3.6	3.0 to 8.3	0.4 to 2.1	1.6 to 2.6
Substance use disorder	Number	689	721	287	213	1 910
(ICD-10-AM codes	Rate ratio	2.8	7.4	8.2	4.7	4.1
F10–F19) (d)	95% CI	2.6 to 3.1	6.8 to 8.1	7.2 to 9.4	3.7 to 5.9	3.9 to 4.3
Mood and neurotic	Number	595	563	417	123	1 698
disorders (ICD-10-AM	Rate ratio	0.6	1.2	2.7	1.1	0.9
codes F30–F48) (e)	95% CI	0.6 to 0.7	1.1 to 1.3	2.4 to 2.9	0.8 to 1.3	0.8 to 0.9
Schizophrenia, schizo typal	Number	656	449	245	152	1 502
and delusional disorders (ICD-10-AM codes	Rate ratio	2.2	3.9	3.1	1.9	2.3
F20-F29)	95% CI	2.0 to 2.4	3.5 to 4.3	2.7 to 3.6	1.5 to 2.4	2.2 to 2.4
	Number	118	59	55	23	255
Other mental disorders (f)	Rate ratio	1.1	1.0	2.7	1.4	1.1
OVERCOMING INDIGENOUS						ATTACHMEN

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009 ATTACHMENT TABLES

Table 7A.7.38

Table 7A.7.38 Indigenous standardised hospital separation ratios for mental and behavioural disorders, Queensland, WA, SA, and public hospitals in NT, 2001-02 to 2006-07 (a), (b)

	Unit	Qld	WA	SA	NT	Qld, WA, SA and public hospitals in NT
	95% CI	0.9 to 1.4	0.8 to 1.4	2.0 to 3.6	0.8 to 2.4	1.0 to 1.3
All mental and	Number	2 084	1 825	1 024	520	5 453
behavioural disorders (ICD-10-AM codes F00-F99)	Rate ratio 95% CI	1.3 1.3 to 1.4	2.5 2.3 to 2.6	3.6 3.3 to 3.8	1.9 1.6 to 2.1	1.7 1.6 to 1.7
2004-05						
Organic mental disorders	Number	35	32	18	22	107
(ICD-10-AM codes	Rate ratio	1.6	2.2	3.7	2.5	2.0
F00-F09) (c)	95% CI	1.0 to 2.5	1.4 to 3.4	2.0 to 6.9	1.2 to 5.4	1.6 to 2.6
Substance use disorder	Number	630	687	306	242	1 865
(ICD-10-AM codes	Rate ratio	2.5	6.5	8.7	4.6	3.8
F10–F19) (d)	95% CI	2.3 to 2.8	5.9 to 7.1	7.7 to 9.9	3.7 to 5.7	3.6 to 4.0
Mood and neurotic	Number	594	528	372	166	1 660
disorders (ICD-10-AM	Rate ratio	0.7	1.0	2.7	1.0	0.9
codes F30–F48) (e)	95% CI	0.6 to 0.8	0.9 to 1.1	2.5 to 3.1	0.8 to 1.3	0.8 to 0.9
Schizophrenia, schizo typal	Number	705	484	270	178	1 637
and delusional disorders (ICD–10–AM codes	Rate ratio	2.2	3.7	3.8	2.0	2.4
F20-F29)	95% CI	2.0 to 2.4	3.4 to 4.1	3.3 to 4.4	1.6 to 2.4	2.3 to 2.6
	Number	131	58	44	16	249
Other mental disorders (f)	Rate ratio	1.0	1.1	2.5	1.1	1.0
	95% CI	0.9 to 1.3	0.8 to 1.5	1.8 to 3.5	0.6 to 1.9	0.9 to 1.2
All mental and	Number	2 095	1 789	1 010	624	5 518
behavioural disorders	Rate ratio	1.3	2.2	3.9	1.9	1.7
(ICD–10–AM codes F00–F99)	95% CI	1.3 to 1.4	2.1 to 2.3	3.6 to 4.2	1.7 to 2.2	1.6 to 1.7
2005-06						
Organic mental disorders	Number	30	45	14	18	107
(ICD-10-AM codes	Rate ratio	2.2	3.1	1.6	1.6	2.3
F00-F09) (c)	95% CI	1.4 to 3.4	2.2 to 4.4	0.8 to 3.2	0.8 to 3.1	1.8 to 2.9
VERCOMING INDIGENOUS USADVANTAGE: KEY						ATTACHME TABL

INDICATORS 2009

Table 7A.7.38

Table 7A.7.38 Indigenous standardised hospital separation ratios for mental and behavioural disorders, Queensland, WA, SA, and public hospitals in NT, 2001-02 to 2006-07 (a), (b)

	Unit	Qld	WA	SA	NT	Qld, WA, SA and public hospitals in NT
Substance use disorder	Number	668	761	363	283	2,075
(ICD-10-AM codes F10-F19) (d)	Rate ratio	2.7	6.7	9.9	5.4	4.2
1 10–1 1 <i>9)</i> (d)	95% CI	2.5 to 2.9	6.1 to 7.2	8.8 to 11.2	4.4 to 6.6	4.0 to 4.4
Mood and neurotic	Nissaalaaa	500	504	250	400	4.045
disorders (ICD-10-AM codes F30-F48) (e)	Number	569	524	359	193	ŕ
30400 1 30 1 10) (0)	Rate ratio	0.7	1.1	2.7	1.3	0.9
Schizophrenia, schizo typal	95% CI	0.6 to 0.8	1.0 to 1.2	2.4 to 3.0	1.1 to 1.6	0.9 to 1.0
and delusional disorders (ICD–10–AM codes	Number	631	468	233	243	1,575
F20–F29)	Rate ratio	2.1	3.9	3.3	2.6	2.5
·	95% CI	1.9 to 2.3	3.5 to 4.3	2.9 to 3.8	2.1 to 3.1	2.3 to 2.6
Other mental disorders (f)	Number	87	50	36	23	196
	Rate ratio	1.0	0.8	1.9	1.3	0.9
	95% CI	0.8 to 1.3	0.6 to 1.0	1.3 to 2.7	0.8 to 2.2	0.8 to 1.1
All mental and						
behavioural disorders (ICD–10–AM codes	Number	1,985	1,848	1,005	760	5,598
F00-F99)	Rate ratio	1.3	2.4	3.8	2.3	1.8
·	95% CI	1.3 to 1.4	2.3 to 2.5	3.6 to 4.1	2.1 to 2.6	1.7 to 1.8
2006-07						
Organic mental disorders	Number	36	43	7	19	105
(ICD-10-AM codes	Rate ratio	1.7	2.6	1.2	2.4	2.0
F00–F09) (c)	95% CI	1.1 to 2.6	1.8 to 3.7	0.5 to 3.1	1.2 to 4.6	1.6 to 2.5
Substance use disorder	Number	712	771	385	275	2,143
(ICD-10-AM codes	Rate ratio	2.7	6.3	9.2	5.0	4.0
F10–F19) (d)	95% CI	2.5 to 3.0	5.8 to 6.8	8.2 to 10.3	4.1 to 6.2	3.8 to 4.2
Mood and neurotic	Number	597	490	347	168	1,602
disorders (ICD-10-AM	Rate ratio	0.6	1.0	2.3	1.5	8.0
codes F30-F48) (e)	95% CI	0.6 to 0.7	0.9 to 1.1	2.1 to 2.6	1.2 to 1.8	0.8 to 0.9
Schizophrenia, schizo typal	Number	661	565	252	236	1,714
VERCOMING INDIGENOUS						ATTACHME

TABLES

DISADVANTAGE: KEY

INDICATORS 2009

Table 7A.7.38

Table 7A.7.38 Indigenous standardised hospital separation ratios for mental and behavioural disorders, Queensland, WA, SA, and public hospitals in NT, 2001-02 to 2006-07 (a), (b)

	Unit	Qld	WA	SA	NT	Qld, WA, SA and public hospitals in NT
and delusional disorders (ICD-10-AM codes	Rate ratio	2.4	4.6	3.7	2.6	2.8
F20–F29)	95% CI	2.2 to 2.6	4.2 to 5.1	3.2 to 4.2	2.1 to 3.1	2.6 to 2.9
Other mental disorders (f)	Number Rate ratio 95% CI	112 1.2 1.0 to 1.4	39 0.6 0.4 to 0.8	30 1.8 1.2 to 2.7	17 1.4 0.8 to 2.7	198 0.9 0.8 to 1.0
All mental and behavioural disorders (ICD-10-AM codes F00-F99)	Number Rate ratio 95% CI	2,118 1.3 1.3 to 1.4	1,908 2.3 2.2 to 2.4	1,021 3.6 3.4 to 3.8	715 2.6 2.3 to 2.9	5,762 1.7 1.7 to 1.8

Indigenous standardised hospital separation ratios for mental and behavioural disorders, Queensland, WA, SA, and public hospitals in NT, 2001-02 to 2006-07 (a), (b)

Qld, WA, SA					
and public	NT	SA	WA	Qld	Unit
hospitals in NT					

CI confidence interval. ICD–10–AM International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification.

- (a) Indigenous data are reported for Queensland, Western Australia, South Australia and the Northern Territory only. Hospitalisation data for four jurisdictions should not be assumed to represent the hospitalisation experience in the other jurisdictions. Data are based on state of usual residence.
- (b) Rate ratio was calculated from directly age standardised data using the 2001 Australian population.
- (c) Includes brain disorders due to brain damage and dysfunction, such as dementia.
- (d) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.
- (e) Includes depressive and anxiety disorders.
- (f) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.

Table 7A.7.39

Table 7A.7.39 Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, NSW,

Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05 (a), (b)

	NSW	Vic	Qld	WA	SA	NT	NSW, Vic, Qld, WA, SA and public hospitals in NT
Organic mental disorders (ICD–10–AM codes			ı	Rate per 1	1000 popul	lation	
F00–F09) (c)							
Indigenous persons	0.7	np	0.6	1.2	1.8	0.8	0.8
Non-Indigenous (d)	0.5	0.7	0.4	0.5	0.5	0.3	0.5
Substance use disorder (ICD-10-AM codes F10-F19) (d)							
Indigenous persons	12.6	8.3	6.0	11.7	13.7	4.0	9.2
Non-Indigenous (d)	2.6	2.2	2.4	1.8	1.6	0.9	2.3
Mood and neurotic disorders (ICD-10-AM codes F30-F48) (e)							
Indigenous persons	10.4	8.8	5.4	8.4	15.0	2.6	7.8
Non-Indigenous (d)	6.1	9.4	7.7	8.3	5.4	2.6	7.4
Schizophrenia, schizo typal and delusional disorders (ICD–10–AM codes F20–F29)							
Indigenous persons	5.6	5.7	5.7	6.8	10.8	3.0	5.8
Non-Indigenous (d)	2.1	3.0	2.5	1.8	2.8	1.5	2.5
Other mental disorders (f)							
Indigenous persons	1.4	0.5	0.9	8.0	1.6	0.3	0.9

Table 7A.7.39

Table 7A.7.39

Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05 (a), (b)

	NSW	Vic	Qld	WA	SA	NT	NSW, Vic, Qld, WA, SA and public hospitals in NT
Non-Indigenous (d)	1.7	1.3	0.8	0.7	0.6	0.2	1.2
All mental and behavioural disorders (ICD-10-AM codes F00-F99) Indigenous persons	30.6	23.4	18.5	28.9	42.8	10.6	24.5
Non-Indigenous (d)	13.1	16.5	13.8	13.2	10.9	5.5	13.9

ICD-10-AM International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification.

- (a) Indigenous data are reported for NSW, Victoria, Queensland, WA, SA and NT.
- (b) Directly age standardised using the 2001 Australian population.
- (c) Includes brain disorders due to brain damage and dysfunction, such as dementia.
- (d) Non-Indigenous includes hospitalisations identified as not stated Indigenous status.
- (e) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.
- (f) Includes depressive and anxiety disorders.
- (g) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.
 - Nil or rounded to zero. np Not published.

Table 7A.7.40

Table 7A.7.40 Hospitalisation rate, per 1000 population, for mental and behavioural disorders (ICD-10-AM codes F00-F99), by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05 (a)

	lr	ndigenous		(Other (b)		Total persons		
	male	female	total	male	female	total	male	female	total
Age group (years)									
under 1	_	0.9	0.4	2.0	1.7	1.9	1.9	1.7	1.8
1–4	0.6	0.4	0.5	0.7	0.6	0.7	0.7	0.6	0.7
5–14	2.1	1.9	2.0	3.2	2.1	2.7	3.1	2.1	2.6
15–24	22.7	22.6	22.7	12.5	18.0	15.2	12.9	18.2	15.5
25–34	47.9	40.1	43.9	17.4	19.5	18.5	18.2	20.1	19.1
35–44	48.9	35.2	41.7	15.9	21.6	18.8	16.6	21.9	19.2
45–54	29.6	31.5	30.6	14.2	20.1	17.2	14.4	20.3	17.4
55–64	23.7	14.1	18.7	16.0	16.5	16.3	16.1	16.5	16.3
65–74	21.2	13.6	17.0	9.7	14.6	12.2	9.8	14.6	12.3
75+	16.5	21.2	19.3	20.3	18.4	19.2	20.3	18.4	19.2
All ages (c)	26.6	22.5	24.5	12.5	15.4	13.9	12.8	15.5	14.1

- (a) Indigenous data are reported for NSW, Victoria, Queensland, WA, SA and NT.
- (b) Other includes hospitalisations identified as not Indigenous as well as those with a not stated Indigenous status.
- (c) Directly age-standardised using the 2001 Australian population.
 - Nil or rounded to zero.

Table 7A.7.41

Hospitalisations by Indigenous status (number), NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05 (a)

		Indigenous			Other (b)	
	male	female	total (c)	male	female	total (c)
Organic mental disorders (ICD–10–AM codes F00–F09) (d)	77	67	144	5 181	5 518	10 699
Substance use disorder (ICD–10–AM codes F10–F19) (e)	2 272	1 272	3 544	26 184	17 333	43 517
Mood and neurotic disorders (ICD-10-AM codes F30-F48) (f)	1 024	1 874	2 898	53 516	90 297	143 813
Schizophrenia, schizo typal and delusional disorders (ICD–10–AM codes F20–F29)	1 445	1 095	2 540	25 844	20 690	23 274
Other mental disorders (g)	237	263	500	7 429	15 447	22 877
All mental and behavioural disorders (ICD-10-AM codes F00-F99)	5 055	4 571	9 626	118 154	149 285	267 440
Other hospitalisations	92 586	122 499	215 007	2 952 867	3 312 986	6 263 776
Total hospitalisations	97 641	127 070	224 716	3 071 021	3 462 271	6 533 363

- (a) Indigenous data are reported for NSW, Victoria, Queensland, WA, SA and NT.
- (b) Other includes hospitalisations identified as not Indigenous as well as those with a not stated Indigenous status.
- (c) Includes separations where sex is not stated.
- (d) Includes brain disorders due to brain damage and dysfunction, such as dementia.

Table 7A.7.41 Hospitalisations by Indigenous status (number), NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05 (a)

- (e) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.
- (f) Includes depressive and anxiety disorders.
- (g) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.

Table 7A.7.42

Table 7A.7.42 Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2005-06 (a), (b)

	NSW	Vic	Qld	WA	SA	NT	NSW, Vic, Qld, WA, SA and public hospitals in NT
			R	ate per 1	000 рор	ulation	
Organic mental disorders (ICD–10–AM codes F00–F09) (c)							
Indigenous persons	0.9	0.1	0.8	1.7	0.8	0.8	0.9
Other persons(g)	0.5	0.6	0.4	0.5	0.5	0.5	0.5
Substance use disorder (ICD-10-AM codes F10-F19) (d)							
Indigenous persons	12.5	6.2	6.3	12.6	15.2	5.2	9.5
Other persons(g)	2.8	2.4	2.3	1.9	1.5	1.0	2.4
Mood and neurotic disorders (ICD–10–AM codes F30–F48) (e)							
Indigenous persons	9.6	7.5	5.2	8.2	14.8	3.2	7.4
Other persons(g)	6.5	9.3	7.6	7.4	5.4	2.5	7.5
Schizophrenia, schizo typal and delusional disorders (ICD–10–AM codes F20–F29)							
Indigenous persons	6.4	5.6	5.0	6.6	8.2	3.9	5.7
Other persons(g)	2.0	3.1	2.4	1.7	2.4	1.5	2.4
Other mental disorders (f)							
Indigenous persons	2.3	1.1	0.6	0.7	1.2	0.3	1.2

Table 7A.7.42

Table 7A.7.42

Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2005-06 (a), (b)

	NSW	Vic	Qld	WA	SA	NT	NSW, Vic, Qld, WA, SA and public hospitals in NT
			R	ate per 1	000 pop	oulation	
Other persons(g)	1.6	1.2	0.6	0.9	0.6	0.2	1.1
All mental and behavioural disorders (ICD-10-AM codes F00-F99)							
Indigenous persons	31.7	20.6	18.0	29.7	40.1	13.4	24.7
Other persons(g)	13.5	16.6	13.3	12.4	10.5	5.7	13.9

ICD-10-AM International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification.

- (a) Indigenous data are reported for NSW, Victoria, Queensland, WA, SA and NT.
- (b) Directly age standardised using the 2001 Australian population.
- (c) Includes brain disorders due to brain damage and dysfunction, such as dementia.
- (d) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.
- (e) Includes depressive and anxiety disorders.
- (f) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.
- (g) Other includes hospitalisations identified as not Indigenous as well as those with a not stated Indigenous status.

Table 7A.7.43

Table 7A.7.43 Hospitalisation rate, per 1000 population, for mental and behavioural disorders (ICD-10-AM codes F00-F99), by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2005-06 (a)

	Ir	ndigenous		0	ther (b)		Total persons		
	male	female	total	male	female	total	male	female	total
Age group (years)									
under 1	np	np	np	2.1	2.0	2.0	2.0	1.9	2.0
1–4	0.3	0.7	0.5	0.7	0.6	0.6	0.6	0.6	0.6
5–14	5.0	1.7	3.4	2.9	2.2	2.6	3.0	2.2	2.6
15–24	22.5	23.0	22.8	11.3	16.6	13.9	11.7	16.8	14.2
25–34	48.8	39.8	44.1	16.8	19.5	18.1	17.6	20.0	18.8
35–44	52.7	34.5	43.1	16.1	21.6	18.9	16.8	21.9	19.3
45–54	32.9	28.6	30.7	14.5	21.0	17.8	14.8	21.1	18.0
55–64	20.6	15.2	17.8	16.3	17.7	17.0	16.3	17.7	17.0
65–74	22.1	12.0	16.5	10.5	14.5	12.5	10.6	14.5	12.6
75+	21.3	15.0	17.5	19.4	18.8	19.0	19.4	18.8	19.0
All ages (b)	23.4	19.2	21.3	12.4	15.7	14.1	12.6	15.8	14.2

- (a) Indigenous data are reported for NSW, Victoria, Queensland, WA, SA and NT.
- (b) Other includes hospitalisations identified as not Indigenous as well as those with a not stated Indigenous status.
- (c) Directly age-standardised using the 2001 Australian population.
 - Nil or rounded to zero. **np** Not published.

Table 7A.7.44

Table 7A.7.44	Hospitalisations by Indigenous status (number), NSW,
	Victoria, Queensland, WA, SA, and public hospitals in the
	NT, 2005-06 (a)

	I.	ndigenous			Other (b)	
	male	female	total (c)	male	female	total (c)
Organic mental disorders (ICD-10-AM codes F00-F09) (d)	81	71	152	5 001	5 544	10 545
Substance use disorder (ICD–10–AM codes F10–F19) (e)	2 436	1 331	3 767	27 279	19 105	46 384
Mood and neurotic disorders (ICD–10–AM codes F30–F48) (f)	1 111	1 816	2 927	54 183	92 538	146 721
Schizophrenia, schizo typal and delusional disorders (ICD–10–AM codes F20–F29)	1 517	1 035	2 552	24 977	20 664	45 641
Other mental disorders (g)	359	326	685	6 772	14 441	21 214
All mental and behavioural disorders (ICD-10-AM codes F00-F99)	5 504	4 579	10 083	118 212	152 292	270 505
Other hospitalisations	99 942	133 080	233 023	3 078 865	3 432 948	6 511 848
Total hospitalisations	105 446	137 659	243 106	3 197 077	3 585 240	6 782 353

- (a) Indigenous data are reported for NSW, Victoria, Queensland, WA, SA and NT.
- (b) Other includes hospitalisations identified as not Indigenous as well as those with a not stated Indigenous status.
- (c) Includes separations where sex is not stated.
- (d) Includes brain disorders due to brain damage and dysfunction, such as dementia.

Table 7A.7.44 Hospitalisations by Indigenous status (number), NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2005-06 (a)

- (e) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.
- (f) Includes depressive and anxiety disorders.
- (g) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.

Table 7A.7.45

Table 7A.7.45

Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2006-07 (a), (b)

	NSW	Vic	Qld	WA	SA	NT	NSW, Vic, Qld, WA, SA and public hospitals in NT
				Rate per 1	1000 popul	ation	
Organic mental disorders (ICD-10-AM codes F00-F09) (c)							
Indigenous persons	0.5	0.4	0.7	1.4	0.7	1.0	0.8
Other persons(g)	0.6	0.7	0.4	0.6	0.6	0.4	0.6
Substance use disorder (ICD-10-AM codes F10-F19) (d)							
Indigenous persons	13.4	8.9	6.3	12.1	15.7	4.7	9.9
Other persons(g)	3.2	2.2	2.3	1.9	1.7	0.9	2.5
Mood and neurotic disorders (ICD-10-AM codes F30-F48) (e)							
Indigenous persons	9.9	11.7	5.1	7.7	13.6	2.8	7.6
Other persons(g)	6.9	9.2	7.9	7.9	5.8	1.8	7.7
Schizophrenia, schizo typal and delusional disorders (ICD–10–AM codes F20–F29)							
Indigenous persons	6.8	6.0	5.2	7.7	9.2	3.7	6.1
Other persons(g)	2.0	2.8	2.2	1.7	2.5	1.4	2.3
Other mental disorders (f)							
Indigenous persons	2.0	1.0	0.7	0.5	1.1	0.2	1.0

Table 7A.7.45

Table 7A.7.45 Age-standardised hospitalisation rates for mental and behavioural disorders, by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2006-07

(a), (b)

	NSW	Vic	Qld	WA	SA	NT	NSW, Vic, Qld, WA, SA and public hospitals in NT
				Rate per 1	000 popu	lation	
Other persons(g)	1.5	1.2	0.6	0.9	0.6	0.1	1.1
All mental and behavioural disorders (ICD-10-AM codes F00-F99)							
Indigenous persons	32.6	28.1	18.0	29.4	40.2	12.3	25.4
Other persons(g)	14.1	16.1	13.4	12.9	11.2	4.8	14.1

ICD-10-AM International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification.

- (a) Indigenous data are reported for NSW, Victoria, Queensland, WA, SA and NT.
- (b) Directly age standardised using the 2001 Australian population.
- (c) Includes brain disorders due to brain damage and dysfunction, such as dementia.
- (d) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.
- (e) Includes depressive and anxiety disorders.
- (f) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.
- (g) Other includes hospitalisations identified as not Indigenous as well as those with a not stated Indigenous status.

Table 7A.7.46

Table 7A.7.46 Hospitalisation rate, per 1000 population, for mental and behavioural disorders (ICD-10-AM codes F00-F99), by Indigenous status, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2006-07 (a)

	Ind	igenous		Non-	Indigenous	(b)	Total	l persons	S
	male f	emale	total	male	female	total	male f	emale	total
Age group (years)									
under 1	np	np	np	2.3	1.9	2.1	2.2	1.8	1.8
1–4	0.3	0.4	0.3	0.6	0.5	0.5	0.5	0.5	0.5
5–14	4.5	2.3	3.4	2.9	1.8	2.3	2.9	1.9	2.4
15–24	22.3	21.7	22.0	10.6	15.7	13.2	11.0	16.6	13.8
25–34	50.0	41.3	45.5	17.1	18.8	18.0	17.9	19.8	18.8
35–44	57.9	36.3	46.4	16.1	21.5	18.8	17.0	21.9	19.5
45–54	36.0	29.8	32.8	14.8	20.7	17.8	15.1	20.9	18.0
55–64	22.5	14.7	18.4	19.1	16.7	17.9	19.1	16.8	17.9
65–74	16.8	13.0	14.7	12.7	15.6	14.2	12.8	15.3	14.1
75+	16.9	11.8	13.8	21.6	22.7	22.2	21.6	19.2	20.2
All ages (b)	24.3	19.6	21.9	12.9	15.5	14.2	13.2	15.6	14.5

⁽a) Indigenous data are reported for NSW, Victoria, Queensland, WA, SA and NT.

⁽b) Other includes hospitalisations identified as not Indigenous as well as those with a not stated Indigenous status.

⁽b) Directly age-standardised using the 2001 Australian population.

Table 7A.7.47

Table 7A.7.47 **Hospitalisations by Indigenous status (number), NSW, Victoria,** Queensland, WA, SA, and public hospitals in the NT, 2006-07 (a)

	1	ndigenous			Other (b)	
	male	female	total (c)	male	female	total (c)
Organic mental disorders (ICD–10–AM codes F00–F09) (d)	81	55	136	5 180	5 783	10 963
Substance use disorder (ICD–10–AM codes F10–F19) (e)	2 520	1 470	3 990	29 123	19 512	48 635
Mood and neurotic disorders (ICD-10-AM codes F30-F48) (f)	1 132	1 921	3 053	58 616	93 231	151 847
Schizophrenia, schizo typal and delusional disorders (ICD–10–AM codes F20–F29)	1 725	1 072	2 797	23 986	20 088	44 074
Other mental disorders (g)	365	246	611	6 499	14 613	21 112
All mental and behavioural disorders (ICD-10-AM codes F00-F99)	5 823	4 764	10 587	123 404	153 227	276 631
Other hospitalisations	103 754	138 834	242 588	3 205 944	3 567 454	6 773 432
Total hospitalisations	109 577	143 598	253 175	3 329 348	3 720 681	7 050 063

- (a) Indigenous data are reported for NSW, Victoria, Queensland, WA, SA and NT.
- (b) Other includes hospitalisations identified as not Indigenous as well as those with a not stated Indigenous status.
- (c) Includes separations where sex is not stated.
- (d) Includes brain disorders due to brain damage and dysfunction, such as dementia.
- (e) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.
- (f) Includes depressive and anxiety disorders.
- (g) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009

Table 7A.7.48

Male Indigenous standardised hospital separation ratios for mental and behavioural **Table 7A.7.48**

disord 2005-0	disorders, NSW, Victori 2005-06, 2006-07 (a), (b)	Victoria, (7 (a), (b)	Jueensland	a, wA, sA,	and publi	disorders, NSW, Victoria, Queensland, WA, SA, and public hospitals in the N1, 2004-05, 2005-06, 2006-07 (a), (b)	In the NI,	2004-05,
	Unit	NSN	Vic	Qld	WA	SA	TN 1	NSW, Vic, Qld, WA, SA and public hospitals in NT
2004-05								
Organic mental disorders	Number	18	du	22	16	6	du	77
(ICD-10-AM codes	Rate ratio	1.6	9.0	1.5	2.3	3.9	1.2	1.6
F00-F09) (c)	95% CI	0.8 to 3.0	0.2 to 1.6	0.8 to 2.7	1.2 to 4.3	1.6 to 10.0	0.4 to 3.6	1.2 to 2.2
Substance use disorder	Number	1 017	100	416	386	177	176	2 272
(ICD-10-AM codes	Rate ratio	5.3	3.3	3.1	6.4	8.4	4.9	4.5
F10-F19) (d)	95% CI	5.0 to 5.7	2.7 to 4.1	2.8 to 3.5	5.7 to 7.2	7.1 to 10.0	3.8 to 6.3	4.3 to 4.8
Mood and neurotic disorders Number	s Number	440	54	196	169	66	99	1 024
(ICD-10-AM codes	Rate ratio	1.5	0.7	0.7	1.2	1.9	0.8	1.0
F30–F48) (e)	95% CI	1.4 to 1.7	0.5 to 0.9	0.6 to 0.8	1.0 to 1.4	1.5 to 2.4	0.6 to 1.1	1.0 to 1.1
Schizophrenia, schizo typal	Number	410	69	431	273	152	110	1 445
and delusional disorders	Rate ratio	2.5	1.6	2.4	3.6	3.2	1.6	2.4
(102–10–20) F20–F29)	95% CI	2.3 to 2.8	1.3 to 2.1	2.2 to 2.7	3.1 to 4.1	2.7 to 3.8	1.2 to 2.1	2.2 to 2.5
	Number	115	du	29	30	10	du	237

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009

Table 7A.7.48

Male Indigenous standardised hospital separation ratios for mental and behavioural **Table 7A.7.48**

disord	disorders, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05, 2005-06, 2006-07 (a), (b)	Victoria, ((a), (b)	3cd indeposition	d, WA, SA,	and public	c hospitals	in the NT	2004-05,
	Unit	NSN	Vic	DID	WA	SA	TN 1	NSW, Vic, Qld, WA, SA and public hospitals in NT
Other mental disorders (f)	Rate ratio 95% CI	0.7 to 1.0	0.9 0.4 to 1.7	2.0 1.5 to 2.7	2.2 1.5 to 3.3	2.8 1.4 to 5.8	1.2 0.4 to 3.1	1.1 0.9 to 1.3
All mental and behavioural disorders (ICD–10–AM codes F00–F99)	Number Rate ratio 95% CI	2 000 2.6 2.4 to 2.7	236 1.4 1.2 to 1.6	1 132 1.7 1.6 to 1.8	874 2.9 2.7 to 3.2	447 3.7 3.3 to 4.2	366 1.8 1.6 to 2.1	5 055 2.1 2.1 to 2.2
2005-06 Organic mental disorders (ICD–10–AM codes F00–F09) (c)	Number Rate ratio 95% CI	24 2.0 1.1 to 3.6	du du	12 1.4 0.7 to 3.0	23 3.5 2.1 to 5.8	9 1.3 0.6 to 2.6	10 0.8 0.4 to 1.8	81 1.7 1.3 to 2.3
Substance use disorder (ICD–10–AM codes F10–F19) (d)	Number Rate ratio 95% CI	1 036 5.2 4.8 to 5.6	108 3.2 2.7 to 3.9	408 3.2 2.9 to 3.6	460 6.8 6.1 to 7.6	216 9.8 8.4 to 11.5	208 5.7 4.5 to 7.3	2 436 4.7 4.5 to 4.9
Mood and neurotic disorders Number (ICD-10-AM codes Rate rati	s Number Rate ratio	499	59	209	0.9	104	1.7	1.1

Table 7A.7.48

Male Indigenous standardised hospital separation ratios for mental and behavioural disorders, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05, 2005-06, 2006-07 (a) (b) **Table 7A.7.48**

2005-(2005-06, 2006-07 (a), (b)	' (a), (b)						
	Unit	NSN	Vic	PIO	WA	SA	NT	NSW, Vic, Qld, WA, SA and public hospitals in NT
F30-F48) (e)	95% CI	1.4 to 1.8	0.6 to 1.1	0.6 to 0.9	0.8 to 1.1	1.7 to 2.7	0.8 to 1.6	1.0 to 1.2
Schizophrenia, schizo typal and delusional disorders	Number Rate ratio	474	87	413	274	134	135	1517
(ICD-10-AM codes F20-F29)	95% CI	2.9 to 3.7	1.5 to 2.3	2.3 to 2.8	3.5 to 4.6	2.6 to 3.7	1.5 to 2.6	2.5 to 2.8
	Number	254	16	4	26	12	7	359
Other mental disorders (f)	Rate ratio	1.9	1.8	2.2	1.8	2.7	0.0	1.7
	95% CI	1.6 to 2.1	1.1 to 3.1	1.4 to 3.5	1.2 to 2.7	1.5 to 5.1	0.4 to 2.2	1.5 to 1.9
All mental and	Number	2 287	273	1 086	942	475	44	5 504
Denavioural disorders	Rate ratio	2.9	1.6	1.8	3.0	3.9	2.3	2.3
F00–F99)	95% CI	2.7 to 3.0	1.4 to 1.8	1.7 to 1.9	2.8 to 3.3	3.5 to 4.3	2.0 to 2.6	2.2 to 2.4
2006-07								
Organic mental disorders	Number	17	du	24	26	du	တ	81
(ICD-10-AM codes	Rate ratio	1.2	du	2.4	3.4	du	1.3	1.8
F00-F09) (c)	95% CI	0.6 to 2.4	du	1.4 to 4.1	2.1 to 5.4	du	0.5 to 3.7	1.3 to 2.4

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009

Table 7A.7.48

Male Indigenous standardised hospital separation ratios for mental and behavioural **Table 7A.7.48**

disorc 2005-(disorders, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05 2005-06, 2006-07 (a), (b)	Victoria, ((a), (b)	Aueenslan c	4, WA, SA,	and publi	c hospitals	in the NT,	2004-05,
	Unit	NSN	Vic	PIO	WA	SA	TN 1	NSW, Vic, Qld, WA, SA and public hospitals in NT
Substance use disorder	Number Pate ratio	1076	112	465	450	226	191	2 520
F10–F19) (d)	95% CI	4.5 to 5.1	2.7 to 4.0	3.0 to 3.7	5.7 to 7.0	7.4 to 10.0	3.5 to 5.6	4.2 to 4.6
Mood and neurotic disorders Number	s Number	460	87	242	159	119	65	1 132
(ICD-10-AM codes	Rate ratio	4.	1.2	9.0	6.0	2.1	1.0	1.0
130-1-40) (6)	95% CI	1.3 to 1.6	0.9 to 1.4	0.5 to 0.7	0.7 to 1.1	1.7 to 2.6	0.7 to 1.4	0.9 to 1.1
Schizophrenia, schizo typal	Number	553	102	430	366	133	141	1 725
and delusional disorders	Rate ratio	3.6	2.5	2.6	2.0	2.9	2.2	3.0
F20-F29)	95% CI	3.3 to 4.0	2.1 to 3.1	2.4 to 2.9	4.4 to 5.6	2.4 to 3.5	1.7 to 2.8	2.9 to 3.2
	Number	258	13	54	21	<u></u>	8	365
Other mental disorders (f)	Rate ratio	2.1	1.4	2.2	1.3	2.8	1.3	1.7
	95% CI	1.8 to 2.4	0.8 to 2.4	1.6 to 2.9	0.8 to 2.1	1.2 to 6.2	0.5 to 3.2	1.5 to 1.9
All mental and	Number	2 364	315	1 215	1 022	493	414	5 823

Table 7A.7.48

disorders, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05, Male Indigenous standardised hospital separation ratios for mental and behavioural 2005-06, 2006-07 (a), (b) **Table 7A.7.48**

Unit NSW Vic	Dentavioural disorders Rate ratio 2.8 1.9	95% CI 2.6 to 2.9 1.7 to 2.1 1.6 to 1.8 2.7 to 3.2 3.3 to 4.1 1.9 to 2.6
Old	1.7	1.6 to 1.8
WA	2.9	2.7 to 3.2
SA	3.7	3.3 to 4.1
NT hc	2.2	1.9 to 2.6
NSW, Vic, Qld, WA, SA and public nospitals in NT	2.3	2.2 to 2.3

CI confidence interval. ICD-10-AM International Statistical Classification of Diseases and Related Health Problems, 10th Revision,

Australian Modification.

(a) Indigenous data are reported for NSW, Victoria, Queensland, WA, SA and NT.

(b) Rate ratio was calculated from directly age standardised data using the 2001 Australian population.

(c) Includes brain disorders due to brain damage and dysfunction, such as dementia.

(d) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.

(e) Includes depressive and anxiety disorders.

(f) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.

np Not published.

Source: AIHW National Hospital Morbidity Database (unpublished).

Table 7A.7.49

Female Indigenous standardised hospital separation ratios for mental and behavioural disorders, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05, 2005-06, 2006-07 (a), **Q** Table 7A.7.49

	Unit	NSW	Vic	QId	WA	SA	IN	NSW, Vic, Qld, WA, SA and public hospitals in NT
2004-05								
Organic mental disorders	Number	15	I	13	16	တ	4	29
(ICD-10-AM codes F00-F09)	Rate ratio	1 .	I	1.7	2.2	3.5	3.6	1.5
(c)	95% CI	1.4 to 1.4	I	0.9 to 3.5	1.2 to 3.9	1.5 to 8.2	1.2 to 10.2	1.2 to 2.1
Substance use disorder	Number	466	96	214	301	129	99	1 272
(ICD-10-AM codes F10-F19)	Rate ratio	4.0	4.4	1.9	6.9	10.1	4.9	3.4
(p)	95% CI	4.0 to 4.0	3.6 to 5.5	1.6 to 2.2	6.0 to 7.9	8.3 to 12.2	3.2 to 7.5	3.2 to 3.6
Mood and neurotic disorders	Number	209	137	398	359	273	100	1874
(ICD-10-AM codes F30-F48)	Rate ratio	1.8	1.1	0.7	0.0	3.3	1.3	1.0
(e)	95% CI	1.8 to 1.8	0.9 to 1.3	0.6 to 0.8	0.8 to 1.0	2.9 to 3.7	1.0 to 1.7	1.0 to 1.1
Schizophrenia, schizo typal and Number	Number	342	82	274	211	118	99	1 095
delusional disorders	Rate ratio	2.8	2.3	2.1	4.1	4.7	3.6	2.4
(ICD-10-AM codes F20-F29)	95% CI	2.8 to 2.8	1.8 to 2.8	1.8 to 2.4	3.5 to 4.8	3.7 to 6.0	2.4 to 5.3	2.2 to 2.5
	Number	120	7	9	28	34	10	263
Other mental disorders (f)	Rate ratio	0.8	0.2	0.7	0.7	2.4	1.0	9.0
	95% CI	0.8 to 0.8	0.1 to 0.5	0.5 to 0.9	0.5 to 1.1	1.7 to 3.5	0.5 to 2.2	0.5 to 0.7

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009

Table 7A.7.49

Female Indigenous standardised hospital separation ratios for mental and behavioural disorders, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05, 2005-06, 2006-07 (a), **Q** Table 7A.7.49

	Unit	NSW	Vic	Old	WA	SA	TN	NSW, Vic, Qld, WA, SA and public hospitals in NT
All mental and behavioural disorders (ICD-10-AM codes	Number Rate ratio	1 550	322	963	915	563	258	4 571
F00-F99) 2005-06	95% CI	2.1 to 2.1	1.3 to 1.6	1.0 to 1.2	1.6 to 1.9	3.8 to 4.6	1.8 to 2.7	1.4 to 1.5
Organic mental disorders	Number	18	I	18	22	2	80	71
(ICD-10-AM codes F00-F09)	Rate ratio	1.6	I	2.9	2.8	1.8	2.9	1.9
(c)	95% CI	1.6 to 1.6	I	1.7 to 5.0	1.7 to 4.7	0.6 to 5.5	1.0 to 8.6	1.4 to 2.5
Substance use disorder	Number	481	29	260	301	147	75	1 331
(ICD-10-AM codes F10-F19)	Rate ratio	3.5	2.1	2.1	8.9	10.7	5.5	3.1
(p)	95% CI	3.5 to 3.5	1.6 to 2.6	1.8 to 2.4	5.9 to 7.8	8.9 to 12.9	3.7 to 8.3	2.9 to 3.3
Mood and neurotic disorders	Number	287	137	360	365	255	112	1 816
(ICD-10-AM codes F30-F48)	Rate ratio	1.3	0.8	0.7	1.2	3.1	1.5	6.0
(e)	95% CI	1.3 to 1.3	0.7 to 1.0	0.6 to 0.7	1.0 to 1.3	2.7 to 3.5	1.2 to 1.9	0.9 to 1.0
Schizophrenia, schizo typal and Number	Number	334	82	218	194	66	108	1 035
delusional disorders	Rate ratio	က	1.9	1.7	3.9	3.8	4.0	2.2
(ICD-10-AM codes F20-F29)	95% CI	3.0 to 3.0	1.5 to 2.3	1.5 to 2.0	3.3 to 4.5	3.1 to 4.7	2.9 to 5.4	2.1 to 2.4

Table 7A.7.49

Female Indigenous standardised hospital separation ratios for mental and behavioural disorders, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05, 2005-06, 2006-07 (a), **Q** Table 7A.7.49

	Unit	NSW	Vic	PIO	WA	SA	IN	NSW, Vic, Qld, WA, SA and public hospitals in NT
	Number	200	19	43	24	24	16	326
Other mental disorders (f)	Rate ratio	1.2	0.7	9.0	0.4	1.6	1.7	0.7
	95% CI	1.2 to 1.2	0.4 to 1.1	0.4 to 0.8	0.3 to 0.7	1.0 to 2.4	0.9 to 3.3	0.7 to 0.8
All mental and behavioural	Number	1 620	305	899	906	530	319	4 579
disorders (ICD-10-AM codes	Rate ratio	1.9	1.7	1.0	1.9	3.8	2.5	1.4
F00–F99) 2006-07	95% CI	1.9 to 1.9	0.9 to 1.2	1.0 to 1.1	1.8 to 2.1	3.4 to 4.1	2.1 to 3.0	1.4 to 1.4
Organic mental disorders	Number	7	du	12	17	du	10	55
(ICD-10-AM codes F00-F09)	Rate ratio	0.8	du	1.	1.9	du	4.3	1.2
(c)	95% CI	0.8 to 0.8	du	0.6 to 2.3	1.1 to 3.4	du	1.6 to 11.3	0.9 to 1.6
Substance use disorder	Number	545	11 4	247	321	159	84	1 470
(ICD-10-AM codes F10-F19)	Rate ratio	3.5	5.2	2.0	6.4	10.6	7.4	3.4
(p)	95% CI	3.5 to 3.5	4.3 to 6.3	1.7 to 2.3	5.7 to 7.3	8.9 to 12.6	4.9 to 11.1	3.3 to 3.6
Mood and neurotic disorders	Number	682	222	355	331	228	103	1 921
(ICD-10-AM codes F30-F48)	Rate ratio	1.5	1.3	0.7	1.0	2.5	2.2	1.0
(e)	95% CI	1.5 to 1.5	1.2 to 1.5	0.6 to 0.8	0.9 to 1.1	2.2 to 2.9	1.7 to 2.9	0.9 to 1.0

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009

NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05, 2005-06, 2006-07 (a), Female Indigenous standardised hospital separation ratios for mental and behavioural disorders, 9 Table 7A.7.49

	Unit	NSW	Vic	Qld	WA	SA	NT	NSW, Vic, Qld, WA, SA and public hospitals in NT
Schizophrenia, schizo typal and Number	Number	347	81	231	199	119	95	1 072
delusional disorders	Rate ratio	3.0	1.8	2.1	4.2	5.0	3.1	2.3
(ICD-10-AM codes F20-F29)	95% CI	3.0 to 3.0	1.4 to 2.2	1.8 to 2.4	3.7 to 4.9	4.1 to 6.1	2.3 to 4.3	2.2 to 2.5
	Number	123	19	28	18	6	O	246
Other mental disorders (f)	Rate ratio	0.8	9.0	0.8	0.3	1.5	1.6	9.0
	95% CI	0.8 to 0.8	0.4 to 1.1	0.6 to 1.0	0.2 to 0.5	0.9 to 2.3	0.7 to 3.7	0.5 to 0.7
All mental and behavioural	Number	1 708	438	903	886	528	301	4 764
disorders (ICD-10-AM codes	Rate ratio	1.9	1.7	1.	1.8	3.6	3.2	1.4
F00–F99)	95% CI	1.9 to 1.9	1.5 to 1.9	1.0 to 1.2	1.7 to 1.9	3.2 to 3.9	2.6 to 3.8	1.4 to 1.5

Cl confidence interval. ICD-10-AM International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification.

(a) Indigenous data are reported for NSW, Victoria, Queensland, WA, SA and NT.

(b) Rate ratio was calculated from directly age standardised data using the 2001 Australian population.

(c) Includes brain disorders due to brain damage and dysfunction, such as dementia.

(d) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.

(e) Includes depressive and anxiety disorders.

Table 7A.7.49

Female Indigenous standardised hospital separation ratios for mental and behavioural disorders, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05, 2005-06, 2006-07 (a), **Q** Table 7A.7.49

NSW, vic, Qid, WA SA NT and public hospitals in
NSW Vic QId WA SA
NSW Vic Qld WA
NSW Vic Qld
NSW Vic
NSW
Unit

(f) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.

Nil or rounded to zero. np Not published.

Source: AIHW National Hospital Morbidity Database (unpublished).

Table 7A.7.50

Indigenous standardised hospital separation ratios for mental and behavioural disorders, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05, 2005-06, 2006-07 (a), (b) Table 7A.7.50

	Unit	NSN	Vic	ρIO	WA	SA	TN	NSW, Vic, Qld, WA, SA and public hospitals in NT
2004-05 Organic mental disorders	Number	33	du L	35	32	18	22	144
(ICD-10-AM codes F00-F09)	Rate ratio	1.5	du	1.6	2.2	3.7	2.3	1.5
(c)	95% CI	1.0 to 2.2	du	1.0 to 2.5	1.4 to 3.4	2.0 to 6.9	1.1 to 4.9	1.3 to 1.9
Substance use disorder	Number	1 483	196	630	289	306	242	3 544
(ICD-10-AM codes F10-F19)	Rate ratio	4.8	3.8	2.5	6.5	8.8	4.7	4.0
(p)	95% CI	4.5 to 5.1	3.3 to 4.4	2.3 to 2.8	5.9 to 7.1	7.7 to 10.0	3.8 to 5.8	3.9 to 4.2
Mood and neurotic disorders	Number	1 047	191	594	528	372	166	2 898
(ICD-10-AM codes F30-F48)	Rate ratio	1.7	6.0	0.7	1.0	2.8	1.0	1.0
(e)	95% CI	1.6 to 1.8	0.8 to 1.1	0.6 to 0.8	0.9 to 1.1	2.5 to 3.1	0.9 to 1.3	1.0 to 1.1
Schizophrenia, schizo typal and	Number	752	151	202	484	270	178	2 540
delusional disorders	Rate ratio	2.6	1.9	2.2	3.7	3.8	2.0	2.4
(ICD-10-AM codes F20-F29)	95% CI	2.4 to 2.8	1.6 to 2.3	2.1 to 2.4	3.4 to 4.1	3.3 to 4.4	1.6 to 2.5	2.3 to 2.5
	Number	235	16	131	28	44	16	200
Other mental disorders (f)	Rate ratio	0.8	4.0	1.0	1.1	2.5	1.1	8.0
	95% CI	0.7 to 0.9	0.2 to 0.6	0.9 to 1.3	0.9 to 1.5	1.8 to 3.5	0.6 to 2.0	0.7 to 0.8

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009

Table 7A.7.50

Indigenous standardised hospital separation ratios for mental and behavioural disorders, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05, 2005-06, 2006-07 (a), (b) Table 7A.7.50

	Unit	NSN	Vic	Old	WA	SA	IN	NSW, Vic, Qld, WA, SA and public hospitals in NT
All mental and behavioural	Number	3 550	558	2 095	1 789	1 010	624	9 626
disorders (ICD–10–AM codes	Rate ratio	2.3	1.4	1.3	2.2	3.9	1.9	1.8
F00–F99)	95% CI	2.2 to 2.4	1.3 to 1.6	1.3 to 1.4	2.1 to 2.3	3.6 to 4.2	1.7 to 2.2	1.7 to 1.8
2005-06 Organic mental disorders (ICD-10-AM codes F00-F09) (c)	Number Rate ratio 95% CI	42 1.8 1.2 to 2.6	d d d	30 2.2 1.4 to 3.4	45 3.1 2.2 to 4.4	14 1.6 0.8 to 3.2	18 1.6 0.8 to 3.1	152 1.8 1.5 to 2.2
Substance use disorder	Number	1 517	175	668	761	363	283	3 767
(ICD-10-AM codes F10-F19)	Rate ratio	4.5	2.6	2.7	6.7	9.9	5.4	4.0
(d)	95% CI	4.2 to 4.7	2.2 to 3.1	2.5 to 2.9	6.1 to 7.2	8.8 to 11.2	4.4 to 6.6	3.8 to 4.1
Mood and neurotic disorders	Number	1 086	196	569	524	359	193	2 927
(ICD–10–AM codes F30–F48)	Rate ratio	1.5	0.8	0.7	1.1	2.7	1.3	1.0
(e)	95% CI	1.4 to 1.6	0.7 to 0.9	0.6 to 0.8	1.0 to 1.2	2.4 to 3.0	1.1 to 1.6	1.0 to 1.0
Schizophrenia, schizo typal and	Number	808	169	631	468	233	243	2 552
delusional disorders	Rate ratio	3.1	1.8	2.1	3.9	3.3	2.6	2.4
(ICD–10–AM codes F20–F29)	95% CI	2.9 to 3.4	1.6 to 2.1	1.9 to 2.3	3.5 to 4.3	2.9 to 3.8	2.1 to 3.1	2.3 to 2.5

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009

ATTACHMENT TABLES

Table 7A.7.50

Indigenous standardised hospital separation ratios for mental and behavioural disorders, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05, 2005-06, 2006-07 (a), (b) Table 7A.7.50

	Unit	NSW	Vic	Qld	WA	SA	IN	NSW, Vic, Qld, WA, SA and public hospitals in NT
	Number	454	35	87	20	36	23	685
Other mental disorders (f)	Rate ratio	1.5	1.0	1.0	0.8	1.9	1.3	1.0
	95% CI	1.3 to 1.6	0.7 to 1.4	0.8 to 1.3	0.6 to 1.0	1.3 to 2.7	0.8 to 2.2	1.0 to 1.1
All mental and behavioural	Number	3 907	578	1 985	1 848	1 005	760	10 083
disorders (ICD-10-AM codes	Rate ratio	2.4	1.2	1.3	2.4	3.8	2.3	1.8
F00–F99)	95% CI	2.3 to 2.4	1.1 to 1.4	1.3 to 1.4	2.3 to 2.5	3.6 to 4.1	2.1 to 2.6	1.7 to 1.8
2006-07								
Organic mental disorders	Number	28	du	36	43	7	19	136
(ICD-10-AM codes F00-F09)	Rate ratio	1.0	du	1.7	2.6	1.2	2.4	1.4
(c)	95% CI	0.6 to 1.6	du	1.1 to 2.6	1.8 to 3.7	0.5 to 3.1	1.2 to 4.6	1.2 to 1.8
Substance use disorder	Number	1 621	226	712	771	385	275	3 990
(ICD-10-AM codes F10-F19)	Rate ratio	4.2	4.4	2.7	6.3	9.2	5.0	4.0
(p)	95% CI	4.0 to 4.5	3.5 to 4.7	2.5 to 3.0	5.8 to 6.8	8.2 to 10.3	4.1 to 6.2	3.9 to 4.1
Mood and neurotic disorders	Number	1 142	309	265	490	347	168	3 053
(ICD-10-AM codes F30-F48)	Rate ratio	4.1	1.3	9.0	1.0	2.3	1.5	1.0
(e)	95% CI	1.3 to 1.5	1.1 to 1.4	0.6 to 0.7	0.9 to 1.1	2.1 to 2.6	1.2 to 1.8	0.9 to 1.0
OVERCOMING INDIGENOUS DISADVANTAGE: KEY								ATTACHMENT TABLES

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009

Table 7A.7.50

Indigenous standardised hospital separation ratios for mental and behavioural disorders, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05, 2005-06, 2006-07 (a), (b) Table 7A.7.50

	Unit	NSW	Vic	Qld	WA	SA	NT	NSW, Vic, Qld, WA, SA and public hospitals in NT
Schizophrenia, schizo typal and Number	Number	006	183	661	565	252	236	2 797
delusional disorders	Rate ratio	3.3	2.1	2.4	4.6	3.7	2.6	2.7
(ICD-10-AM codes F20-F29)	95% CI	3.1 to 3.6	1.8 to 2.5	2.2 to 2.6	4.2 to 5.1	3.2 to 4.2	2.1 to 3.1	2.6 to 2.8
	Number	381	32	112	39	30	17	611
Other mental disorders (f)	Rate ratio	1.3	0.8	1.2	9.0	1.8	4.1	6.0
	95% CI	1.2 to 1.5	0.5 to 1.2	1.0 to 1.4	0.4 to 0.8	1.2 to 2.7	0.8 to 2.7	0.9 to 1.0
All mental and behavioural	Number	4 072	753	2 118	1 908	1 021	715	10 587
disorders (ICD-10-AM codes	Rate ratio	2.3	1.7	1.3	2.3	3.6	2.6	1.8
F00–F99)	95% CI	2.2 to 2.4	1.6 to 1.9	1.3 to 1.4	2.2 to 2.4	3.4 to 3.8	2.3 to 2.9	1.8 to 1.8
CI confidence interval. ICD-10-AM International Statistical Cla	-AM Internation	al Statistical Clas	sification of Dis	eases and Rela	ated Health Pro	blems, 10th Re	vision, Austra	ssification of Diseases and Related Health Problems, 10th Revision, Australian Modification.

(a) Indigenous data are reported for NSW, Victoria, Queensland, WA, SA and NT.

(b) Rate ratio was calculated from directly age standardised data using the 2001 Australian population.

(c) Includes brain disorders due to brain damage and dysfunction, such as dementia.

(d) Includes a variety of disorders due to the use of psychoactive substances, which may or may not have been medically prescribed, such as alcohol, opioids, sedatives, and volatile substances.

(e) Includes depressive and anxiety disorders.

Indigenous standardised hospital separation ratios for mental and behavioural disorders, NSW, Victoria, Queensland, WA, SA, and public hospitals in the NT, 2004-05, 2005-06, 2006-07 (a), (b) Table 7A.7.50

NSW, Vic, Qld, WA, SA	NT and public hospitals in	L
	SA	
	WA	
	Qld	
	Vic	
	NSN	
	Unit	

(f) Includes eating disorders, sleeping disorders, disorders of personality and behaviour, mental retardation, disorders of psychological development, and unspecified mental disorders.

- Nil or rounded to zero. np Not published.

Source: AIHW National Hospital Morbidity Database (unpublished).

Table 7A.7.51

Mental health related problems managed by general practitioners, by Indigenous status of the patient, Australia (a) **Table 7A.7.51**

	Number	Per cent of total mental health related encounters	Age standardised Crude rate (per rate per 100 encounters (b) encounters)	Crude rate (per 100 encounters)	95 per cent lower (confidence limit	95 per cent upper confidence limit	95 per cent lower 95 per cent upper Estimated encounters confidence limit per 1000 population (b)
2006–07							
Indigenous	na	1.6	na	17.6	13.5		479
Non-Indigneous (c)	na	98.4	na	10.6	10.1	11.1	468
Total	na	100.0	na	10.4	6.6	10.8	514
2002-03 to 2006-07 (d)	ਰੇ						
Indigenous	1 088	na	13.5	14.4	na	na	na
Non-Indigneous (c)	56 480	na	11.6	11.7	na	na	na
Total	na	na	na	na	na	na	na

ICPC-2 International Classification of Primary Care, 2nd edition, Oxford.

(a) Classified according to ICPC-2 codes: P01-P13, P15-P20, P22-P25, P27-P29, P70-P82, P85-P86, P98-P99.

(b) Rates were directly age-standardised.

(c) Includes non-Indigenous patients and patients for whom Indigenous status was 'not stated'.

Combined financial year data for five years.

na Not available.

2008, Mental Health Services in Australia 2005–06, Cat. no. HSE 56, Canberra; AIHW 2009, Measuring the social and emotional wellbeing of Bettering the Evaluation and Care of Health survey of general practice activity published in AIHW (Australian Institute of Health and Welfare) Source:

Aboriginal and Torres Strait Islander peoples, Cat. no. IHW 24, Canberra.

Table 7A.7.52 Mental health related emergency departments occasions of service in public hospitals, by Indigenous status of the patient, Australia, 2005-06 (a)

	Number (b)	Per cent of total mental health related occasions of service	Per cent of all emergency department occasions of service reported in the NAPEDCD (c)
Indigenous	7 220	5.0	4.3
Non-Indigneous (d)	136 786	96.5	95.7
Total	144 006	100	100

ICD-10-AM International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification; National Non-admitted Patient Emergency Department Care Database (NAPEDCD).

- (a) Includes emergency department occasions of service that had a principal diagnosis based on ICD-10-AM codes F00–F99 or the equivalent ICD-9-CM codes.
- (b) The number of occasions of service may not sum to the total due to missing and/or not reported data.
- (c) Includes non-Indigenous patients and patients for whom Indigenous status was 'not stated'.

Source: Data provided by state and territory health authorities published in AIHW (Australian Institute of Health and Welfare) 2008, *Mental Health Services in Australia 2005–06*, Cat. no. HSE 56, Canberra.

Table 7A.7.53

Community mental health service contacts by Indigenous status, 2005-06 (a) Table 7A.7.53

	MSN	Vic	ρIO	WA	SA	Tas	ACT	N	Aust
					Number				
Indigenous	108 645	26 302	57 243	25 130	12 175	626	5 726	11 063	247 263
Non-Indigenous	1 040 517	1 800 406	832 841	440 820	271 101	47 412	135 872	24 807	4 593 776
Not stated	683 015	6 497	2 309	26 518	19 124	17 185	69 235	486	824 369
	1 832 177	1 833 205	892 393	492 468	302 400	65 576	210 833	36 356	5 665 408
				Rate (per 1	Rate (per 1000 population) (b)	(q) (uı			
ndigenous	822.1	936.6	435.5	375.9	446.3	153.5	1138.6	187.2	531.7
Von-Indigenous (c)	254.2	356.4	216.6	239.5	191.4	133.0	612.6	168.4	270.3
Rate ratio (d)	3.2	2.6	2.0	1.6	2.3	1.2	1.9	1.7	2.0

Table 7A.7.53

Community mental health service contacts by Indigenous status, 2005-06 (a) **Table 7A.7.53**

	NSW	Vic	Old	WA	SA	Tas	ACT	NT	Aust
Fotal	265.1	357.3	221.5	242.2	195.6	130.5	616.3	170.8	274.9

These data should be interpreted with caution due to likely under identification of Indigenous Australians. (a)

(b) Rates were directly age-standardised.

Ð

(c) Includes non-Indigenous patients and patients for whom Indigenous status was not stated.

The rate ratio is equal to the service contact rate for Indigenous Australians divided by the service contact rate for non-Indigenous.

National Community Mental Health Care Database published in AIHW (Australian Institute of Health and Welfare) 2008, Mental Health Services in Australia 2005-06, Cat. no. HSE 56, Canberra. Source:

Table 7A.7.54

Episodes of residential mental health care by Indigenous status, 2005-06 (a) Table 7A.7.54

	NSW	Vic	Qld (b)	WA	SA	Tas	ACT	NT (b)	Aust
				N	Vumber				
Indigenous	23	1	:	2	∞	16	_	:	8
Non-Indigenous	403	778	:	172	130	292	48	:	2 096
Not stated	10	2	:	I	2	160	1	:	185
Total	436	791	:	177	140	741	09	:	2 345
				Rate (per 10 000 population) (c)	100 population	n) (c)			
Indigenous	2	3.7	:	0.7	3.6	18.5	2.1	:	1.9
Non-Indigenous (d)	9.0	1.6	:	6.0	6.0	15.4	1.8	:	1.1
Rate ratio (e)	3.3	2.3	:	0.8	4.0	1.2	1.2	:	1.7
Total	9.0	1.6	:	6.0	1.0	14.1	4. 8.	:	7:

These data should be interpreted with caution due to likely under identification of Indigenous Australians. (a)

Queensland and the NT do not have any government-operated residential mental health services. **Q**

Rates were directly age-standardised.

<u>ပ</u>

(e)

Includes non-Indigenous patients and patients for whom Indigenous status was 'not stated'. б The rate ratio is equal to the service contact rate for Indigenous Australians divided by the service contact rate for non-Indigenous.

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

National Residential Mental Health Care Database published in AIHW (Australian Institute of Health and Welfare) 2008, Source:

Mental Health Services in Australia 2005-06, Cat. no. HSE 56, Canberra.

Table 7A.7.55

Mental and behavioural disorders (ICD-10-AM codes F00-F99) death rates (per 100 000 population), age standardised, 2001–2005 (a), (b) **Table 7A.7.55**

		lndig	Indigenous				Non-li	Non-Indigenous		
	NSW	Old	WA	SA	NT	NSW	Qld	WA	SA	NT
Males	na	31.4	26.7	45.9	95.0	na	10.3	10.4	10.1	10.0
Females	na	35.2	62.0	35.1	119.4	na	15.5	17.9	22.0	23.5
Persons	na	34.4	61.6	43.5	109.7	na	13.0	14.2	16.2	15.6

ICD-10-AM International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification.

(a) Care should be exercised when using these data as the rates are based on a small number of deaths.

(b) Calculations of rates for the Indigenous population are based on ABS Experimental Projections, Aboriginal and Torres Strait Islander Australians (low series, 2001 base). There are no comparable population data for the non-Indigenous population. Calculations of rates for the non-Indigenous population are based on data derived by subtracting Indigenous population projections from total population estimates and should be used with care.

na Not available.

Table 7A.7.56

Mental and behavioural disorders (ICD-10-AM codes F00-F99) deaths, by age and jurisdiction, 2001-2005 (a), <u>Q</u> **Table 7A.7.56**

				Indige	Indigenous				Non-Indigenous	lenous	
	Unit	Unit Under 25	25-34	35-44	45 and over	All ages (b)	Under 25	25–34	35-44	45 and over	All ages (c) (d)
Death from mental and behavioural disorders 2001-2005	ntal and behav	rioural disor	ders 200	1-2005							
NSN	no.	du	9	6	37	55	38	06	119	5 024	5 271
Qld	no.	du	6	9	28	45	∞	19	36	2 254	2 317
۸۸	no.	du	d	8	32	44	10	15	24	1 197	1 247
SA	no.	du	4	du	9	12	4	1	_	1 487	1 509
L	no.	9	9	_	49	72	I	du	du	40	44
Population 2003	ဗ										
NSN	no.	na	na	na	na	па	na	na	na	na	na
Qld	no.	73 442	19 431	14 755	16 845	124 473	1 251 543	527 167	553 199	1 344 657	3 676 566
WA	no.	36 490	10 108	8 163	8 897	63 658	640 342	270 697	291 623	683 628	1 886 290
SA	no.	14 568	3 992	3 115	3 554	25 229	475 612	199 084	224 381	601 995	1 501 072
L	no.	32 170	10 372	7 149	8 405	960 89	48 668	25 385	25 580	40 815	140 448
Average annual deaths as a result of mental and behavioural disorders per 100 000 population 2001–2005	l deaths as a r	esult of mer	ıtal and b	ehaviour	al disorders pe	ır 100 000 popu	ulation 2001–	2005			
NSN	Per 100 000	du	na	na	na	na	na	na	na	na	na
Qld	Per 100 000	du	9.3	8.1	33.2	7.2	0.1	0.7	1.3	33.5	12.6
WA	Per 100 000	du	du	19.6	71.9	13.8	0.3	1.7	1.6	35.0	13.2
SA	Per 100 000	du	20.0	du	33.8	9.8	0.2	7.	9.0	49.4	20.1
LN	Per 100 000	3.7	11.6	30.8	116.6	24.8	1	du	du	19.6	6.3

ICD-10-AM International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification.

Care should be exercised when using these data as the rates are based on a small number of deaths. (a)

Table 7A.7.56 Mental and behavioural disorders (ICD-10-AM codes F00-F99) deaths, by age and jurisdiction, 2001-2005 (a), <u>Q</u>

	Indigenous	Non-Indigenous
(q)	(b) Calculations of rates for the Indigenous population are based on ABS Experimental Projections, Aboriginal and Torres Strait Islander Australians (low series,	Aboriginal and Torres Strait Islander Australians (low series,
	2001 base). There are no comparable population data for the non-Indigenous population. Calculations of rates for the non-Indigenous population are based	ations of rates for the non-Indigenous population are based
	on data derived by subtracting Indigenous population projections from total population estimates and should be used with care.	and should be used with care.

- Rates for all ages are crude rates. (c) Includes age not stated.(d) Rates for all ages are critical.
- Nil or rounded to zero. np Not published. na Not available.

Mental and behavioural disorders (ICD-10-AM codes F00-F99) deaths, by sex and jurisdiction, 2001–2005 (a), (b) **Table 7A.7.57**

			q	Indiapipul				Non	Mon-Indipapals	9/10	
	Unit	NSN	ρIO	WA	SA	NT	NSW	DIO	WA	SA	N
Death from ment	Death from mental and behavioural	_	disorders 2001-2005	5							
Males	no.	34	26	26	80	4	2 061	928	470	456	20
Females	no.	21	19	18	4	31	3 210	1 359	777	1 053	24
Persons	no.	22	45	44	12	72	5 271	2 317	1 247	1 509	44
Population 2003											
Males	no.	na	61 146	31 511	12 201	29 275	па	na	na	na	na
Females	no.	na	63 327	32 147	13 028	28 821	na	na	na	na	na
Persons	no.	na	124 473	63 658	25 229	960 89	na	na	na	na	na
Average annual	Average annual deaths as a result of		nd behavi	oural dis	orders pe	er 100 000	mental and behavioural disorders per 100 000 population 2001–2005 (c)	2001–200	(c)		
Males	Per 100 000	na	6	17	13	28	na	2	10	_	2
Females	Per 100 000	na	9		9	22	па	∞	22	~	7
Persons	Per 100 000	na	7	14	10	25	na	7	16	1	9

ICD-10-AM International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification.

- Data on deaths of Aboriginal and Torres Strait Islander Australians are affected by differing levels of coverage of deaths identified as Indigenous across states and territories. Care should be exercised in analysing these data, particularly in making comparisons across states and territories and between the Indigenous and non-Indigenous data. (a)
- Calculations of rates for the Indigenous population are based on ABS Experimental Projections, Aboriginal and Torres Strait Islander Australians (low series, 2001 base). There are no comparable population data for the non-Indigenous population. Calculations of rates for the non-Indigenous population are based on data derived by subtracting Indigenous population projections from total population estimates and should be used with care. **Q**

Table 7A.7.57

Mental and behavioural disorders (ICD-10-AM codes F00-F99) deaths, by sex and jurisdiction, 2001-2005 (a), (b) Table 7A.7.57

(c) Rates are crude rates.

na Not available.

Table 7A.7.58

Mental and behavioural disorders (ICD-10-AM codes F00-F99) deaths, 2001-2005 Table 7A.7.58

	Unit	NSN	ρIÖ	WA	SA	TN
ndigenous						
Mental and behavioural disorders (ICD-10-AM codes F00-F99)	no.	55	45	44	12	72
All causes	no.	2 479	2 822	1 851	642	2 229
Mental and behavioural disorders as % of all causes	%	2.2	1.6	2.4	1.9	3.2
Von Indigenous						
Mental and behavioural disorders (ICD-10-AM codes F00-F99)	no.	5 271	2 317	1 247	1 509	44
All causes	no.	221 054	113 971	53 335	57 817	2 270
Mental and behavioural disorders as % of all causes	%	2.4	2.0	2.3	2.6	1.9
Vot stated						
Mental and behavioural disorders (ICD-10-AM codes F00-F99)	no.	114	37	62	4	I
All causes	no.	4 850	1 626	1 217	711	37
Mental and behavioural disorders as % of all causes	%	2.4	2.3	5.1	2.0	I
Total						
Mental and behavioural disorders (ICD-10-AM codes F00-F99)	no.	5 440	2 399	1 583	1 305	116
All causes	no.	228 383	118 419	929 62	25 897	4 536
Mental and behavioural disorders as % of all causes	%	2.4	2.0	2.7	2.3	2.6

ICD-10-AM International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification. Nil or rounded to zero.

Table 7A.7.59

Table 7A.7.59 Indigenous deaths, selected causes, 2001-2005 (a)

		Males		H.	Females			Persons	
	Observed deaths	Expected deaths	SMR (b)	Observed deaths	Expected deaths	SMR (b)	Observed deaths	Expected deaths	SMR (b)
Queensland Mental and behavioural disorders (ICD-10-AM codes F00-F99)	5.2	1.8	2.8	3.8	1.8	2.1	9.0	3.6	2.5
Intentional self-harm (ICD-10-AM codes X60X84)	24.0	9.5	2.5	7.0	2.6	2.7	31.0	12.1	2.6
Assault (ICD-10-AM codes X85-Y09)	4.0	7.	3.7	2.6	0.7	3.7	9.9	1.8	3.7
All causes	322.0	121.5	2.7	242.4	95.7	2.5	564.4	217.2	2.6
Western Australia									
Mental and behavioural disorders (ICD-10-AM codes F00-F99)	5.2	1.0	5.1	3.6	1.0	3.7	& &	2.0	4 4:
Intentional self-harm (ICD-10-AM codes X60X84)	8.2	5.7	7.6	1.6	4.	1.2	8.6	6.5	1.5
Assault (ICD-10-AM codes X85-Y09)	3.6	9.0	6.3	2.6	0.4	7.3	6.2	1.0	6.7
All causes	208.6	66.2	3.2	161.6	50.3	3.2	370.2	116.5	3.2
South Australia Mental and behavioural disorders (ICD-10-AM codes F00-F99)	6.	4.0	4 L.	0.8	0.4	2.1	2.4	0.8	3.1
Intentional self-harm (ICD-10-AM codes X60X84)	9.9	1.9	3.5	2.2	9.0	4.0	89.	2.5	3.6
Assault (ICD-10-AM codes X85-Y09)	1.6	0.2	7.5	4.0	0.1	2.7	2.0	0.3	5.5
All causes	74.6	25.8	2.9	53.8	20.0	2.7	128.4	45.8	2.8

Table 7A.7.59

Table 7A.7.59 Indigenous deaths, selected causes, 2001–2005 (a)

		Males		F	Females		d .	Persons	
	Observed deaths	Expected deaths	SMR (b)	Observed deaths	Expected deaths	SMR (b)	Observed deaths	Expected deaths	SMR (b)
Northern Territory									
Mental and behavioural disorders (ICD-10-AM codes F00-F99)	8.2	1.0	8.5	6.2	0.9	7.2	14.4	1.9	7.9
Intentional self-harm (ICD–10–AM codes X60–-X84)	20.8	4.9	4.2	2.8	د .	2.2	23.6	6.2	3.8
Assault (ICD-10-AM codes X85-Y09)	5.6	0.5	10.4	6.4	0.3	19.6	12.0	0.8	13.9
All causes	260.6	61.4	4.3	185.2	46.3	4.0	445.8	107.7	4.1

SMR = observed deaths/expected deaths

(a) SMR Standardised mortality rate is the observed Indigenous deaths divided by expected Indigenous deaths, based on the age, sex and cause-specific rates for non-Indigenous Australians.

Mental and behavioural disorders, age standardised death rates, state of usual residence, 2003-2007 (a), (b), (c), (d) **Table 7A.7.60**

		hul	Indigenous				Non-In	Non-Indigenous(e)		
	NSN	Old	WA	SA	NT	MSM	ŊŊ	WA	SA	NT
Males	41.1	35.7	27.7	du	101.6	17.3	14.7	14.8	17.6	18.8
Females	28.2	23.2	56.2	du	70.0	21.5	17.8	18.3	23.8	21.0
Persons	33.8	28.7	56.9	33.2	83.9	19.7	16.5	16.8	21.2	19.9

(a) Mental and behavioural disorders (F00-F99).

(b) Indirect standardised death rate per 100,000 population.

Data on deaths of Aboriginal and Torres Strait Islander Australians are affected by differing levels of coverage of deaths identified as Indigenous across states and territories. Care should be exercised in analysing these data, particularly in making comparisons across states and territories and between the Indigenous and non-Indigenous data. _ ပ

Denominators used in the calculation of rates for the Indigenous population are Experimental Estimates and Projections, Aboriginal and Torres Strait Islander Australians (ABS cat. no. 3238.0, low series, 2001 base). There are no comparable population data for the non-Indigenous population. Denominators used in the calculation of rates for comparison with the Indigenous population have been derived by subtracting Indigenous population estimates/projections from total estimated resident population and should be used with care, as these data include population units for which Indigenous status were not stated. ਉ

Non-Indigenous includes deaths with a not stated Indigenous status.

np Not published.

(e)

Table 7A.7.61

Mental and behavioural disorders deaths, by age and jurisdiction, 2003-2007 (a), (b), (c) Table 7A.7.61

				Indigenous	sno				Non-Indigenous(d)	(p)snou	
	Unit	Under 25	25–34	35-44	45 and over	All ages (b)	Under 25	25–34	35-44	45 and over	All ages (c) (d)
Deaths from	Deaths from mental and behavioural disorders 2003-2007(e)	oural disord	ers 2003-	.2007(e)							
NSN	no.	I	2.0	9.0	43.0	53.0	24.0	50.0	103.0	7120.0	7297.0
Qld	no.	I	8.0	10.0	26.0	44.0	4.0	21.0	30.0	3083.0	3140.0
WA	no.	2.0	1.0	8.0	40.0	51.0	2.0	11.0	18.0	1528.0	1561.0
SA	no.	I	I	5.0	9.0	11.0	3.0	7.0	13.0	2036.0	2059.0
Z	no.	I	5.0	8.0	49.0	62.0	I	I	2.0	54.0	56.0
Population 2005	005										
NSN	no.	82 645	19 966	17 810	23 403	143 824	2 165 469	947 405	976 292	2 523 467	6 612 633
Qld	no.	79 117	20 546	16 885	20 206	136 754	1 305 804	539 642	572 491	1 440 167	3 858 104
WA	no.	40 250	10 610	9 038	11 047	70 945	654 031	271 091	296 347	724 674	1 946 143
SA	no.	15 550	4 182	3 484	4 362	27 578	481 573	195 971	222 440	624 952	1 524 936
N	no.	33 109	10 340	7 874	9 050	60 373	50 130	25 459	25 640	44 771	146 000
Average ann	Average annual deaths as a result of mental and behavioural disorders per 100 000 population 2003–2007(f)	ult of mental	and beh	avioural (disorders per	. 100 000 popu	lation 2003–;	2007(f)			
NSN	Per 100 000	I	2.0	10.1	36.7	7.4	0.2		2.1	56.4	22.1
Øld	Per 100 000	I	7.8	11.8	25.7	6.4	0.1	0.8	1.0	42.8	16.3
WA	Per 100 000	1.0	1.9	17.7	72.4	14.4	0.1	0.8	1.2	42.2	16.0
SA	Per 100 000	I	I	28.7	41.3	8.0	0.1	0.7	1.2	65.2	27.0
H	Per 100 000	I	9.7	20.3	108.3	20.5	I	I	1.6	24.1	7.7
(a) Mental a	Mental and behavioural disorders (F00-F99)	ders (F00-F9	.6)								
(b) Data on	Data on deaths of Aboriginal and Torres Strait Islander Australians are affected by differing levels of coverage of deaths identified as Indigenous across states	and Torres 5	Strait Islan	der Austra	alians are affe	cted by differin	or levels of co.	verage of d	eaths identi	ified as Indigend	satets states

and territories. Care should be exercised in analysing these data, particularly in making comparisons across states and territories and between the Indigenous Data on deaths of Aboriginal and Torres Strait Islander Australians are affected by differing levels of coverage of deaths identified as Indigenous across states and non-Indigenous data.

Table 7A.7.61

Table 7A.7.61 Mental and behavioural disorders deaths, by age and jurisdiction, 2003-2007 (a), (b), (c)

- Australians (ABS cat. no. 3238.0, low series, 2001 base). There are no comparable population data for the non-Indigenous population. Denominators used in the calculation of rates for comparison with the Indigenous population have been derived by subtracting Indigenous population estimates/projections from total Denominators used in the calculation of rates for the Indigenous population are Experimental Estimates and Projections, Aboriginal and Torres Strait Islander estimated resident population and should be used with care, as these data include population units for which Indigenous status were not stated <u>ပ</u>
- (d) Non-Indigenous includes deaths with a not stated Indigenous status.
- Data cells with small values have been randomly assigned to protect the confidentiality of individuals. As a result, some totals will not equal the sum of their components. It is important to note that cells with a zero value have not been affected by confidentialisation. (e)
- (f) Rates are crude rates
- Nil or rounded to zero.

Table 7A.7.62

Mental and behavioural disorders deaths, by sex and jurisdiction, 2003-2007(a), (b), (c) Table 7A.7.62

	tin!		Jul	Indigenous				I-noN	Non-Indigenous(d)		
		NSW	Οld	WA	SA	NT	NSW	Qld	WA	SA	NT
Death from me	Death from mental and behavioural disorders 2003–2007(e	ural disorder	s 2003–2007((e)							
Males	no.	28	24	23	9	33	2 680	1 216	593	707	27
Females	no.	25	20	28	2	29	4 617	1 924	896	1 352	29
Persons	no.	53	44	51	7	62	7 297	3 140	1 561	2 059	26
Population 2005	05										
Males	no.	71 867	67 125	35 217	13 574	30 186	3 275 970	1 925 188	980 578	753 110	76 954
Females	no.	71 957	69 65	35 728	14 004	30 187	3 336 663	1 932 916	965 565	771 826	69 046
Persons	no.	143 824	136 754	70 945	27 578	60 373	6 612 633	3 858 104	1 946 143	1 524 936	146 000
Average annu	Average annual deaths as a result of mental and behaviou	sult of mental	and behavio	ural disorde	ers per 100	000 popula	ral disorders per 100 000 population 2003–2007(f)	£			
Males	Per 100 000	7.8	7.2	13.1	8.8	21.9	16.4	12.6	12.1	18.8	7.0
Females	Per 100 000	6.9	2.7	15.7	2.9	19.2	27.7	19.9	20.1	35.0	8.4
Persons	Per 100 000	7.4	6.4	14.4	8.0	20.5	22.1	16.3	16.0	27.0	7.7

Mental and behavioural disorders (F00-F99).

Data on deaths of Aboriginal and Torres Strait Islander Australians are affected by differing levels of coverage of deaths identified as Indigenous across states and territories. Care should be exercised in analysing these data, particularly in making comparisons across states and territories and between the Indigenous and non-Indigenous data. <u>a</u>

Australians (ABS cat. no. 3238.0, low series, 2001 base). There are no comparable population data for the non-Indigenous population. Denominators used in the calculation of rates for comparison with the Indigenous population have been derived by subtracting Indigenous population estimates/projections from total Denominators used in the calculation of rates for the Indigenous population are Experimental Estimates and Projections, Aboriginal and Torres Strait Islander estimated resident population and should be used with care, as these data include population units for which Indigenous status were not stated <u>ပ</u>

Non-Indigenous includes deaths with a not stated Indigenous status. ਉ Data cells with small values have been randomly assigned to protect the confidentiality of individuals. As a result, some totals will not equal the sum of their components. It is important to note that cells with a zero value have not been affected by confidentialisation. (e)

Table 7A.7.62 Mental and behavioural disorders deaths, by sex and jurisdiction, 2003-2007(a), (b), (c)

(f) Rates are crude rates

Table 7A.7.63

Table 7A.7.63 **Mental and behavioural disorders deaths**, 2003-2007(a), (b)

	Unit	NSW	Qld	WA	SA	NT
Indigenous						
Mental and behavioural disorders	no.	53	44	51	11	62
All causes	no.	2 613	2 845	2 089	672	2 251
Mental and behavioural disorders as % of all causes	%	2.0	1.5	2.4	1.6	2.8
Non Indigenous						
Mental and behavioural disorders	no.	7 229	3 089	1 551	2 020	55
All causes	no.	225 053	117 223	55 086	58 592	2 398
Mental and behavioural disorders as % of all causes	%	3.2	2.6	2.8	3.4	2.3
Not stated						
Mental and behavioural disorders	no.	68	51	10	39	1
All causes	no.	2 572	1 804	543	800	37
Mental and behavioural disorders as % of all causes	%	2.6	2.8	1.8	4.9	2.7
Total						
Mental and behavioural disorders	no.	7 350	3 184	1 612	2 070	118
All causes	no.	230 238	121 872	57 718	60 064	4 686
Mental and behavioural disorders as % of all causes	%	3.2	2.6	2.8	3.4	2.5

⁽a) Mental and behavioural disorders (F00-F99).

⁽b) Data on deaths of Aboriginal and Torres Strait Islander Australians are affected by differing levels of coverage of deaths identified as Indigenous across states and territories. Care should be exercised in analysing these data, particularly in making comparisons across states and territories and between the Indigenous and non-Indigenous data.

Table 7A.7.64

Indigenous deaths, selected causes, 2003-2007(a) Table 7A.7.64

		Males			Females			Persons	
	Observed deaths	Expected deaths	SMR (b)	Observed deaths	Expected deaths	SMR (b)	Observed deaths	Expected deaths	SMR (b)
NSN									
Mental and behavioural disorders (ICD-10-AM codes F00-F99)	28	1.9	3.0	25	2.5	2.0	53	4 4.	2.4
Intentional self-harm (ICD-10-AM codes X60X84)	54	7.0	1.5	80	7.4	0.2	62	14.4	6.0
Assault (ICD-10-AM codes X85-Y09)	24	1.0	4.6	9	1.	1.7	30	2.1	2.9
All causes	1 489	126.3	2.4	1 124	149.5	1.5	2 613	275.8	1.9
Queensland									
Mental and behavioural disorders (ICD-10-AM codes F00-F99)	24	1.9	2.6	20	2.4	1.7	44	4.3	2.1
Intentional self-harm (ICD-10-AM codes X60X84)	66	9.9	3.0	28	7.2	0.8	127	13.8	1.8
Assault (ICD-10-AM codes X85-Y09)	17	1.0	3.5	80	1.0	1.5	25	2.0	2.5
All causes	1 605	116.4	2.8	1 240	139.8	1.8	2 845	256.2	2.2
Western Australia									
Mental and behavioural disorders (ICD-10-AM codes F00-F99)	23		4.	28	<u>4</u> .	4.0	51	2.5	4.
Intentional self-harm (ICD-10-AM codes X60X84)	26	3.6	3.1	10	3.8	0.5	99	7.3	1.8
Assault (ICD-10-AM codes X85-Y09)	18	0.5	7.0	6	0.5	3.4	27	1.1	5.1
All causes	1 185	65.8	3.6	904	79.1	2.3	2 089	144.9	2.9
South Australia									
Mental and behavioural disorders (ICD-10-AM codes F00-F99)	9	0.4	2.9	5	0.5	1.9		0.0	2.4
Intentional self-harm (ICD-10-AM codes X60X84)	35	4.	2.0	10	1.5	4.1	45	2.9	3.1
OVERCOMING INDIGENOUS DISADVANTAGE: KEY									ATTACHMENT TABLES

DISADVANTAGE: KEY INDICATORS 2009

Table 7A.7.64

Table 7A.7.64 Indigenous deaths, selected causes, 2003-2007(a)

	V	Males		Fe	Females		Pe	Persons	
Assault (ICD-10-AM codes X85-Y09)	2	0.2	2.0	2	0.2	1.9	4	0.4	2.0
All causes	377	24.5	3.1	295	30.2	2.0	672	54.8	2.5
Northern Territory									
Mental and behavioural disorders (ICD-10-AM codes F00-F99)	33	6.0	7.3	59	1.2	2.0	62	2.1	0.9
Intentional self-harm (ICD-10-AM codes X60X84)	26	3.2	0.9	12	3.3	0.7	109	6.5	3.3
Assault (ICD-10-AM codes X85-Y09)	20	0.5	8.7	26	0.5	1.1	46	6.0	6.6
All causes	1 307	53.8	4.9	944	65.7	2.9	2 251	119.4	3.8

(a) Data on deaths of Aboriginal and Torres Strait Islander Australians are affected by differing levels of coverage of deaths identified as Indigenous across states and territories. Care should be exercised in analysing these data, particularly in making comparisons across states and territories and between the Indigenous and non-Indigenous data. (b) SMR Standardised mortality rate is the observed Indigenous deaths divided by expected Indigenous deaths, based on the age, sex and cause-specific rates for non-Indigenous Australians.

Intentional self-harm, age standardised death rates, by sex and State/Territory, 2003-2007 (a), (b), (c), (d) Table 7A.8.1

	MSM	Qld	WA	SA	NT	NT Aust (e)
Indigenous (f)						
Males	19.4	38.2	39.7	63.6	76.4	37.2
Females	du	9.6	6.7	17.1	9.1	7.1
Persons	10.9	23.3	22.7	39.6	42.2	21.7
Non-Indigenous (g)						
Males	13.3	15.8	16.1	19.4	24.4	15.3
Females	3.5	3.8	4.7	2.0	4.8	4.2
Persons	8.3	9.7	10.4	12.1	15.1	9.6

Based on state of usual residence. <u>a</u> ntentional self-harm (X60-X84, Y87.0). **Q** ndirect standardised death rate per 100,000 population.

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3238.0, low series, 2001 base). There are no comparable population data for the non-Indigenous population. Denominators used in the calculation of rates for comparison with the Indigenous Estimates and Projections, Aboriginal and Torres Strait Islander Australians (ABS cat. no. total estimated resident population and should be used with care, as these data include Denominators used in the calculation of rates for the Indigenous population are Experimental population have been derived by subtracting Indigenous population estimates/projections from sopulation units for which Indigenous status were not stated.

ncludes 'Other territories'. **e** Data on deaths of Aboriginal and Torres Strait Islander Australians are affected by differing levels of coverage of deaths identified as Indigenous across states and territories. Care should be exercised in analysing these data, particularly in making comparisons across states and territories and between the Indigenous and non-Indigenous data.

Non-Indigenous includes deaths with a 'Not stated' Indigenous status. (g) Non-Indigenoumnp Not published.

Source: ABS Causes of Death, Australia. Cat. No. 3303.0 (unpublished)

OVERCOMING INDIGENOUS DISADVANTAGE: KEY

INDICATORS 2009

Table 7A.8.2

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			1	Indigenous				Noi	Non-Indigenous (e)	(e)	
	Unit	Under 25	25–34	35-44 4	35–44 45 and over	All ages (f)	Under 25	25–34	35-44	35–44 45 and over All ages (f)	All ages (f)
Death from intentional self-harm 2003 – 2007 (g)	l self-harm 20	03 - 2007 (g)									
NSM	no.	15	26	4	7	62	334	544	296	1 292	2 769
Qld	no.	43	42	32	10	127	244	392	429	811	1 876
WA	no.	30	21		4	99	142	212	218	446	1 019
SA	no.	15	21	∞	~	45	114	174	212	429	929
IN	no.	55	32	17	2	109	17	21	29	47	114
Australia (h)	no.	165	149	88	31	433	1 230	1 947	2 131	4 349	9 661
Population 2005											
NSM	no.	82 645	19 966	17 810	23 403	143 824	2 165 469	947 405	976 292	2 523 467	6 612 633
Qld	no.	79 117	20 546	16 885	20 206	136 754	1 305 804	539 642	572 491	1 440 167	3 858 104
WA	no.	40 250	10 610	9 038	11 047	70 945	654 031	271 091	296 347	724 674	1 946 143
SA	no.	15 550	4 182	3 484	4 362	27 578	481 573	195 971	222 440	624 952	1 524 936
LN	no.	33 109	10 340	7 874	9 050	60 373	50 130	25 459	25 640	44 771	146 000
Australia (h)	no.	281 043	73 251	61 804	76 579	492 677	6 576 549	2 814 261	2 963 495	7 547 809	19 902 114

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			'I	Indigenous				Non-li	Non-Indigenous (e)		
	Unit	Under 25 25–34	25–34	35-44 45 8	35–44 45 and over All ages (f)	ages (f)	Under 25	25–34	35-44 45 8	35–44 45 and over All ages (f)	ages (f)
Average annual intentional self-harm deaths per 100 000 population 2003 - 2007 (i)	tentional self-harr	m deaths per	100 000 pop	ulation 2003	. – 2007 (i)						
NSM	Per 100 000	3.6	26.0	15.7	6.0	9.8	3.1	11.5	12.2	10.2	8.4
Qld	Per 100 000	10.9	40.9	37.9	6.6	18.6	3.7	14.5	15.0	11.3	9.7
WA	Per 100 000	14.9	39.6	24.3	7.2	18.6	4.3	15.6	14.7	12.3	10.5
SA	Per 100 000	19.3	100.4	45.9	4.6	32.6	4.7	17.8	19.1	13.7	12.2
LN	Per 100 000	33.2	61.9	43.2	11.0	36.1	8.9	16.5	22.6	21.0	15.6
Australia (h)	Australia (h) Per 100 000	11.7	40.7	28.5	8.1	17.6	3.7	13.8	14.4	11.5	9.7

Based on state of usual residence. <u>a</u>

Intentional self-harm (X60-X84, Y87.0). **a**

Data on deaths of Aboriginal and Torres Strait Islander Australians are affected by differing levels of coverage of deaths identified as Indigenous across states and territories. Care should be exercised in analysing these data, particularly in making comparisons across states and territories and between the Indigenous and non-Indigenous data. <u>ပ</u>

Australians (ABS cat. no. 3238.0, low series, 2001 base). There are no comparable population data for the non-Indigenous population. Denominators used in the Denominators used in the calculation of rates for the Indigenous population are Experimental Estimates and Projections, Aboriginal and Torres Strait Islander calculation of rates for comparison with the Indigenous population have been derived by subtracting Indigenous population estimates/projections from total estimated resident population and should be used with care, as these data include population units for which Indigenous status were not stated. **©**

Non-Indigenous includes deaths with a 'Not stated' Indigenous status.

Includes age not stated. Œ

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Data cells with small values have been randomly assigned to protect the confidentiality of individuals. As a result, some totals will not equal the sum of their components. It is important to note that cells with a zero value have not been affected by confidentialisation (g

(h) Includes 'Other territories'.

Rates are crude rates. ≘ ABS Causes of Death, Australia. Cat. No. 3303.0 (unpublished). Source:

Table 7A.8.3 Intentional self-harm deaths per 100 000, by sex and State/Territory, 2003-2007 (a), (b), (c), (d)

Indigenous	Units	MSM	ρIÖ	WA	SA	N	Aust (e)
Indigenous							
Death from intentional self-harm 2003-2007	elf-harm 2003–200	70					
Males	no.	72	66	56	35	26	360
Females	no.	80	28	10	10	12	73
Persons	no.	62	127	99	45	109	433
Population 2005							
Males	no.	71 867	67 125	35 217	13 574	30 186	244 508
Females	no.	71 957	69 629	35 728	14 004	30 187	248 169
Persons	no.	143 824	136 754	70 945	27 578	60 373	492 677
Males	Per 100 000	15.0	29.5	31.8	51.6	64.3	29.4
Males	Per 100 000	15.0	29.5	31.8	91.0	64.3	29.4
Females	Per 100 000	2.2	8.0	5.6	14.3	8.0	5.9
Persons	Per 100 000	8.6	18.6	18.6	32.6	36.1	17.6
Non-Indigenous (g)							
Deaths from intentional self-harm 2003-2007	self-harm 2003-20	200					
Males	no.	2 177	1 509	790	735	26	7 548
Females	no.	592	367	229	194	17	2 113
Persons	no.	2 769	1876	1 019	929	114	9 661
Population 2005							
Males	no.	3 275 970	1 925 188	980 578	753 110	76 954	9 883 556
Females	no.	3 336 663	1 932 916	965 565	771 826	69 046	10 018 558
Persons	100.	6 612 633	3 858 104	1 946 143	1 524 936	146 000	19 902 114

Table 7A.8.3 Intentional self-harm deaths per 100 000, by sex and State/Territory, 2003-2007 (a), (b), (c), (d)

Average annual inte	Units NSW Qld WA :entional self-harm deaths per 100 000 population 2003–2007 (f)	NSW per 100 000 po	<i>Qld</i> pulation 2003	WA 3-2007 (f)	SA	N	NT Aust (e)
Males	Per 100 000	13.3	15.7	16.1	19.5	25.2	15.3
Females	Per 100 000	3.5	3.8	4.7	2.0	4.9	4.2
Persons	Per 100 000	8.4	9.7	10.5	12.2	15.6	9.7

(a) Based on state of usual residence.

(b) Intentional self-harm (X60-X84, Y87.0)

(c) Data on deaths of Aboriginal and Torres Strait Islander Australians are affected by differing levels of coverage of deaths identified as Indigenous across states and territories. Care should be exercised in analysing these data, particularly in making comparisons across states and territories and between the Indigenous and non-Indigenous data.

Projections, Aboriginal and Torres Strait Islander Australians (ABS cat. no. 3238.0, low series, 2001 base). There are no comparable population data for the non-Indigenous population. Denominators used in the calculation of rates for estimates/projections from total estimated resident population and should be used with care, as these data include Denominators used in the calculation of rates for the Indigenous population are Experimental Estimates and comparison with the Indigenous population have been derived by subtracting Indigenous population population units for which Indigenous status were not stated. ਉ

(e) Includes 'Other territories'.

(f) Rates are crude rates.

(g) Non-Indigenous includes deaths with a 'Not stated' Indigenous status.

Intentional self-harm, by State/Territory, 2003-2007 (a), (b), (c), (d) Table 7A.8.4

	11011				
Indigenous					
Intentional self-harm	62	127	99	45	109
All causes	2 613	2 845	2 089	672	2 251
Intentional self-harm as a percentage of all causes	2.4	4.5	3.2	6.7	4.8
Non-Indigenous					
Intentional self-harm	2 7 1 2	1 852	980	873	113
All causes	225 053	117 223	55 086	58 592	2 398
Intentional self-harm as a percentage of all causes	1.2	1.6	1.8	1.5	4.7
Not stated					
Intentional self-harm	57	24	39	56	2
All causes	2 572	1 804	543	800	37
Intentional self-harm as a percentage of all causes	2.2	1.3	7.2	7.0	5.4
Total					
Intentional self-harm	2 831	2 003	1 085	974	223
All causes	230 238	121 872	57 718	60 064	4 686
Intentional self-harm as a percentage of all causes	1.2	1.6	1.9	1.6	4.8

(a) Based on State of usual residence.

(b) Intentional self-harm (X60-X84, Y87.0).

Data on deaths of Aboriginal and Torres Strait Islander Australians are affected by differing levels of coverage of deaths identified as Indigenous across states and territories. Care should be exercised in analysing these data, particularly in making comparisons across states and territories and between the Indigenous and non-Indigenous data. (၁)

totals will not equal the sum of their components. It is important to note that cells with a zero value have not been affected by Data cells with small values have been randomly assigned to protect the confidentiality of individuals. As a result, some confidentialisation. 0

Source: ABS Causes of Death, Australia. Cat. No. 3303.0 (unpublished)

OVERCOMING INDIGENOUS DISADVANTAGE: KEY

INDICATORS 2009

Table 7A.8.5

Standardised non-fatal hospitalisations for intentional self-harm by sex and Indigenous status, NSW, Victoria, Queensland, WA, SA and public hospitals in the NT (a), (b), (c), (d) Table 7A.8.5

		Number of hospitalisations	sations		Age standardised hospitalisation rate	alisation rate
	Indigenous	Non-Indigenous	Not stated	Total	Indigenous	Other (e)
2004-05						
Males	571	10 454	246	11 271	2.7	- -
Females	908	17 041	248	18 095	3.4	1.8
Persons	1 377	27 495	494	29 366	3.1	1.5
2005-06						
Males	711	10 262	295	11 268	3.2	
Females	878	16 587	304	17 769	3.7	1.8
Persons	1 589	26 851	299	29 039	3.4	4.1
2006-07						
Males	069	10 334	258	11 282	3.2	- -
Females	881	16 645	320	17 846	3.7	1.7
Persons	1 571	26 982	578	29 131	3.5	4.1

(a) Non-fatal refers to records where the end of hospitalisation was not equal to 'died'. Intentional self-harm refers to hospitalisations with at least one external cause reported in X60-X84, based on ICD-10-AM classification.

(b) The rates per 1000 population were directly age standardised using the 2001 Australian standard population.

(c) Data based on state of usual residence.

(d) Indigenous data are reported for the following jurisdictions: NSW, Victoria, Queensland, WA, SA and the NT.

(e) Includes hospitalisations where Indigenous status was recorded as Non-Indigenous or not stated.

Source: AIHW National Hospital Morbidity Database (unpublished).

Table 7A.8.6

Standardised non-fatal hospitalisations for intentional self-harm by sex and Indigenous status, Qld, SA, WA, and public hospitals in the NT (a) (b) (c) (d) Table 7A.8.6

and public	: hospitals in the	and public hospitals in the NT (a), (b), (c), (d)				
		Number of hospitalisations	sations		Age standardised hospitalisation rate	talisation rate
	Indigenous	Non-Indigenous	Not stated	Tota/	Indigenous	Other (e)
2001-02						
Males	376	4 320	118	4 814	2.9	1.3
Females	453	6 445	177	7 075	3.2	1.9
Persons	829	10 765	295	11 889	3.0	1.6
2002-03						
Males	446	4 190	26	4 733	3.2	1.2
Females	479	6 386	132	7 000	3.3	1.8
Persons	925	10 579	229	11 733	3.3	1.5
2003-04						
Males	388	4 223	104	4 715	2.8	1.2
Females	202	6 622	171	7 298	3.5	1.9
Persons	893	10 845	275	12 013	3.1	1.5
2004-05						
Males	382	4 287	125	4 794	2.7	1.2
Females	448	960 2	148	7 692	3.0	2.0
Persons	830	11 383	273	12 486	2.9	1.6
2005-06						
Males	450	4 076	162	4 688	3.1	<u></u>
Females	489	6 637	146	7 272	3.2	1.8
Persons	626	10 713	308	11 960	3.1	1.5
OVERCOMING INDIGENOUS DISADVANTAGE: KEY						ATTACHMENT TABLES

OVERCOMING INDIGENOUS DISADVANTAGE: KEY INDICATORS 2009

Table 7A.8.6

Standardised non-fatal hospitalisations for intentional self-harm by sex and Indigenous status, Qld, SA, WA, and public hospitals in the NT (a), (b), (c), (d) Table 7A.8.6

		Number of hospitalisations	alisations		Age standardised hospitalisation rate	oitalisation rate
	Indigenous	Indigenous Non-Indigenous	Not stated	Total	Indigenous	Other (e)
2006-07						
Males	447	4 278	119	4 844	3.2	1.2
Females	512	6 773	150	7 435	3.3	8.1
Persons	626	11 051	269	12 279	3.2	1.5

(a) Non-fatal refers to records where the end of hospitalisation was not equal to 'died'. Intentional self-harm refers to hospitalisations with at least one external cause reported in X60-X84, based on ICD-10-AM classification.

(b) The rates per 1000 population were directly age standardised using the 2001 Australian population.

(c) Data based on state of usual residence.

(d) Indigenous data are reported for the following jurisdictions: Queensland, WA, SA and the NT.

(e) Includes hospitalisations for non-Indigenous Australians and hospitaliastions where Indigenous status was unknown.

Source: AIHW National Hospital Morbidity Database (unpublished).

INDICATORS 2009

Table 7A.8.7

Table 7A.8.7 Intentional self-harm death rates (per 100 000 population), age standardised, 2001–2005 (a), (b)

		Indigenous	6			Non-Indigenous	sno	
	Qld	WA	SA	NT	Qld	WA	SA	NT
Males	50.5	32.3	69.1	84.9	19.7	17.0	18.7	25.8
Females	14.2	6.2	21.0	11.7	4.7	4.8	4.3	5.1
Persons	32.2	18.8	45.0	48.2	12.2	10.8	11.4	15.5
(a) Core chould be exercised when using these acts on the returned on a small number of deather	od+ paign acdy	04+ 20 0+0p 03	your outer		thor of doothe			

(a) Care should be exercised when using these data as the rates are based on a small number of deaths.

Australians (low series, 2001 base). There are no comparable population data for the non-Indigenous population. Calculations of rates for the non-Indigenous population are based on data derived by subtracting Indigenous population projections from total population estimates and (b) Calculations of rates for the Indigenous population are based on ABS Experimental Projections, Aboriginal and Torres Strait Islander should be used with care.

Source: ABS Causes of Death 2005, Cat. no. 3303.0 (unpublished).

Table 7A.8.8

Table 7A.8.8 Suicide deaths, by age and jurisdiction, 2001-2005 (a), (b)

			1	Indigenous				1	Non-Indigenous	snou	
	Unit	Under 25	25–34	35-44	45 and over	All ages	Under 25	25–34	35-44	45 and over	All ages (c)
Death from suiv	Death from suicide 2001–2005										
NSN	no.	23	38	19	∞	88	377	629	683	1 359	3 078
Qld	no.	57	53	32	13	155	310	499	521	910	2 240
WA	no.	21	18	7	က	49	152	250	234	398	1 035
SA	no.	17	17	du	du	4	116	166	204	384	870
Ł	no.	49	48	17	4	118	17	22	30	20	119
Population 2003	స్త										
NSN	no.	du	du	du	du	du	du	du	du	du	du
Qld	no.	73 442	19 431	14 755	16 845	124 473	du	du	du	du	du
WA	no.	36 490	10 108	8 163	8 897	63 658	du	du	du	du	du
SA	no.	14 568	3 992	3 115	3 554	25 229	du	du	du	du	du
L	no.	32 170	10 372	7 149	8 405	28 096	du	du	du	du	du
Average annua	Average annual suicide deaths per 100 000 population 2001	er 100 000 popu	Jation 2001	-2005 (d)							
NSN	Per 100 000	du	du	du	du	du	du	du	du	du	du
Qld	Per 100 000	15.5	54.6	43.4	15.4	24.9	5.0	18.9	18.8	13.5	12.2
WA	Per 100 000	11.5	35.6	17.2	6.7	15.4	4.7	18.5	16.0	11.6	11.0
SA	Per 100 000	23.3	85.2	du	du	34.9	4.9	16.7	18.2	12.8	11.6
L	Per 100 000	30.5	92.6	47.6	9.5	40.6	7.0	17.3	23.5	24.5	16.9

Table 7A.8.8

Table 7A.8.8 Suicide deaths, by age and jurisdiction, 2001-2005 (a), (b)

- (a) Care should be exercised when using these data as the rates are based on a small number of deaths.
- 2001 base). There are no comparable population data for the non-Indigenous population. Calculations of rates for the non-Indigenous population are based on (b) Calculations of rates for the Indigenous population are based on ABS Experimental Projections, Aboriginal and Torres Strait Islander Australians (low series, data derived by subtracting Indigenous population projections from total population estimates and should be used with care.
- (c) Includes age not stated.
- (d) Rates for all ages are crude rates.

np Not published.

Source: ABS Causes of Death 2005, Cat. no. 3303.0 (unpublished).

Intentional self-harm deaths, by sex and jurisdiction 2001-2005 (a), (b), (c) Table 7A.8.9

	tio! I		7	Indigenous				Non-Ir	Non-Indigenous		
	Our	NSW	Οld	WA	SA	NT	NSW	Qld	WA	SA	NT
Death from Suicide 2001-2005	900										
Males	no.	72	120	4	33	104	2 433	1 806	808	705	102
Females	no.	16	35	80	7	4	645	434	226	165	17
Persons	no.	88	155	49	44	118	3 078	2 240	1 035	870	119
Population 2003											
Males	no.	du	61 146	31 511	12 201	29 275	du	du	du	du	du
Females	no.	du	63 327	32 147	13 028	28 821	du	du	du	du	du
Persons	no.	du	124 473	63 658	25 229	58 096	du	du	du	du	du
Average annual suicide deaths per 100 000 population 2001	aths per 100 000	population 2	2001–2005 (c)	(c)							
Males	Per 100 000	du	39.3	26.0	54.1	71.1	du	19.7	17.1	19.0	27.1
Females	Per 100 000	du	1.1	2.0	16.9	9.7	du	4.7	4.8	4 4.	5.2
Persons	Per 100 000	du	24.9	15.4	34.9	40.6	du	12.2	11.0	11.6	16.9
· I	9			133	- 25:10 4 10 -	to clarical marin	h 3	:J:T T		00000	

(a) Data on deaths of Aboriginal and Torres Strait Islander Australians are affected by differing levels of coverage of deaths identified as Indigenous across states and territories. Care should be exercised in analysing these data, particularly in making comparisons across states and territories and between the Indigenous and non-Indigenous data.

(b) Rates are crude rates.

(c) Calculations of rates for the Indigenous population are based on ABS Experimental Projections, Aboriginal and Torres Strait Islander Australians (low series, 2001 base). There are no comparable population data for the non-Indigenous population. Calculations of rates for the non-Indigenous population are based on data derived by subtracting Indigenous population projections from total population estimates and should be used with care.

np Not published.

Source: ABS Causes of Death 2005, Cat. no. 3303.0 (unpublished).

Table 7A.8.10

Table 7A.8.10 Intentional self-harm (X60-X84) deaths, 2001-2005

	MSN	PIO	WA	SA	IN
Indigenous					
Intentional self-harm (X60-X84)	88	155	49	44	118
All causes	2 479	2 822	1 851	642	2 229
Suicide as % of all causes	3.5	5.5	2.6	6.9	5.3
Non-Indigenous					
Intentional self-harm (X60-X84)	3078	2240	1035	du	du
All causes	221 054	113 971	53 335	57 817	2 270
Suicide as % of all causes	1.4	2.0	6.1	du	du
Not stated					
Intentional self-harm (X60-X84)	87	19	20	du	du
All causes	4 850	1 626	711	1 217	37
Suicide as % of all causes	2.8	1.2	7.0	du	du
Total					
Intentional self-harm (X60-X84)	3 253	2 414	1 134	626	238
All causes	228 383	118 419	55 897	929 65	4 536
Suicide as % of all causes	1.4	2.0	2.0	1.6	5.2
-					

np Not published. Source: ABS Causes of Death 2005, Cat. no. 3303.0 (unpublished).