

# Campaspe Primary Care Partnership

## Community Health and Wellbeing Profile

25th April 2017



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# Abbreviations

ABS	Australian Bureau of Statistics
ACSC	Ambulatory care sensitive condition
AEDC	Australian Early Development Census
ASR	Age standardised rate
CAMHS	Child and Adolescent Area Mental Health Services
Campaspe	Campaspe Shire (same as Campaspe PCP region)
COPD	Chronic obstructive pulmonary disease
DEECD	Department of Education & Early Childhood Development - Victorian State Government (former)
DHS	Department of Human Services - Victorian State Government (former)
DHHS	Department of Health and Human Services - Victorian State Government (current)
DoH	Department of Health - Victorian State Government (former)
DPCD	Department of Planning & Community Development - Victorian State Government (former)
DSE	Department of Sustainability & Environment - Victorian State Government (former)
ERP	Estimated resident population
FWE	Full-time workload equivalence
GP	General practitioner
HACC	Home and community care
IRSD	Index of Relative Socio-economic Disadvantage
IVO	Intervention Order
LGA	Local Government Area
MDC	Major diagnostic category
SEIFA	Socio-Economic Index For Areas
SLA	Statistical Local Area
UCL	Urban Centre/Locality. This is a term used by the Australian Bureau of Statistics and typically refers to the area within the urban boundary of a town.
VAED	Victorian Admitted Episodes Dataset
VCAMS	The Victorian Child and Adolescent Monitoring System
VEMD	Victorian Emergency Minimum Dataset
VHIS	VicHealth Indicators Survey
VHISS	Victorian Health Information Surveillance System
VISU	Victorian Injury Surveillance Unit, Monash University
VPHS	Victorian Population Health Survey

# Glossary

Affected family member	The Crime Statistics Agency defines affected family member as “the individual who is deemed to be affected by events occurring during the family incident. Where an affected family member has been in a family incident with more than one other party, they will be counted for each involvement.”
Age standardised rate	A rate that has been adjusted to allow for comparison between populations that have different age profiles.
Ambulatory Care Sensitive Condition	Ambulatory care sensitive conditions are those for which hospitalisation is thought to be avoidable with the application of public health interventions and early disease management, usually delivered in ambulatory settings such as primary care. ( <i>Department of Health</i> <a href="http://www.health.vic.gov.au/healthstatus/admin/acsc/index.htm">http://www.health.vic.gov.au/healthstatus/admin/acsc/index.htm</a> )
Avoidable mortality	Refers to “...untimely and unnecessary deaths from diseases for which effective public health and medical interventions are available.” ( <i>Department of Health and Human Services, VHISS webpage</i> )
Chronic disease	Refers to “...a group of diseases that tend to be long lasting and have persistent effects.” ( <i>Australian Institute of Health and Welfare</i> )
COPD	“Chronic obstructive pulmonary disease (COPD) is a serious, progressive and disabling condition that limits airflow in the lungs. It includes emphysema and chronic bronchitis. People with COPD are often short of breath and may have frequent coughing.” ( <i>Australian Institute of Health and Welfare</i> )
ERP	Estimated resident population. The population that is estimated to reside in a given location - prepared annually by the ABS.
Family incident	The Crime Statistics Agency defines a family incident as “An incident attended by Victoria Police where a Risk Assessment and Risk Management Report (also known as an L17 form) was completed. The report is completed when family violence incidents, interfamilial-related sexual offences, and child abuse are reported to police. For the purposes of CSA statistics a family incident may involve one or more affected family members and/or one or more other parties.”
Hospital admission	The formal process whereby the hospital accepts responsibility for the patient's care and/or treatment. Hospital admission is based upon specific clinical criteria based on whether a patient needs same-day or overnight care / treatment.
Hospital separation	A hospital separation is the process by which an episode of care for an admitted patient ceases. A separation may include: a discharge to home, discharge to another hospital or nursing home, death of a patient, or change in type of care within a period of hospitalisation. Note: Some data source agencies provide data based on hospital separations and not admissions.
Hospitalisation	Instances where a persons has been admitted into hospital. Persons that have presented to an emergency department but have not been admitted to hospital, <i>are not</i> counted in hospitalisations. Note: in this profile, hospitalisations refer to both hospital admission or hospital separations (owing to different methods used at different data source agencies).
Median	The median is the middle value of an ordered set of values.

# Acknowledgements

The Campaspe Primary Care Partnership Community Health and Wellbeing Profile could not have been developed without the generous support (provision of information, resources, time and advice) of a wide range of agencies and organisations, including: the Australian Bureau of Statistics; Workcover; The Department of Education and Early Childhood Development; Monash University Accident Research Centre; Department of Immigration and Citizenship; Diabetes Australia; the Public Health Information Development Unit – University of Adelaide; Victorian Cervical Cytology Registry; Cancer Council Victoria; Department of Health - Mental Health, Drugs and Regions Division; Department of Health – Hospital and Health Service Performance Division; and the Department of Human Services - Housing and Community Building Division.

# Data Notes

The Campaspe PCP Population Health and Wellbeing Profile is a set of health and wellbeing indicators for the population of the region. The most recent data available, at the time of writing, has been sourced for each indicator and a basic description of this data together with any relevant data notes has been added to each table. The profile does not include analysis of the data nor explanation or consideration of why figures are higher or lower than Victorian averages.

The Population Health and Wellbeing Profile supplies figures and rates, as provided by the data source (e.g. the Victorian Population Health Survey). At times, where counts only were provided by the data source agency (e.g. hospital separation rates for major diagnostic categories), a per population rate has been calculated by dividing the number of instances by the number of years (if there is more than one) and then into the relevant estimated resident population figure for the year and population group (i.e. gender or age group) and then multiplied by 1,000 or 100,000. In these instances, the rates are not standardised - so rates are very likely to be affected by the age and gender structure of the local population. All such crude rates should be interpreted with caution.

*All data contained in this report should be used as a guide only and be used in conjunction with further investigation, including consultation with local and regional health agencies.*

Data for locations and population groups with small populations should be interpreted with particular caution. In many instances, actual numbers are very low and/or data has been aggregated over a number of years. Many agencies, including the ABS, use random errors for small numbers to ensure privacy of individuals is protected. For this reason, small numbers (e.g. under 20) should be treated as a preliminary indicator only and should be subject to further investigation at the local level.

Some data provides an indicator of how often a condition or disease is reported (e.g. sexually transmitted infections) rather than actual prevalence of the condition or disease. Additionally, figures for hospital separations, screening of various diseases and GP service delivery may be affected by accessibility (geographic, financial, cultural and other potential barriers) and not only prevalence of a disease, condition or behaviour. Additionally, self reported data also measures how likely a person is to report they have a condition, rather than simply the prevalence of that health condition and some persons may be more likely than others (for various reasons, including awareness of having the condition in the first place) to self report a health issue.

In most cases, time-trend data has not been used in this profile, as methodology, data collection and analysis processes have often changed over the period and data is simply not comparable.

Red dots ● have been used in most of the new tables added to this profile as part of the April 2017 update. Red dots indicate where the health or wellbeing outcome is poorer than the state average. The red dot does not indicate a statistically significant difference between the local figure and the state average figure. Red dots are not used when the meaning of the indicator is ambiguous.

Data was correct and current at the time of writing, however much of the information contained in this profile is subject to regular review by the relevant agencies. When interpreting data, it is strongly recommended to refer to the original source of the data where possible. Please refer to individual data notes, where applicable, for each data set.



# Introduction

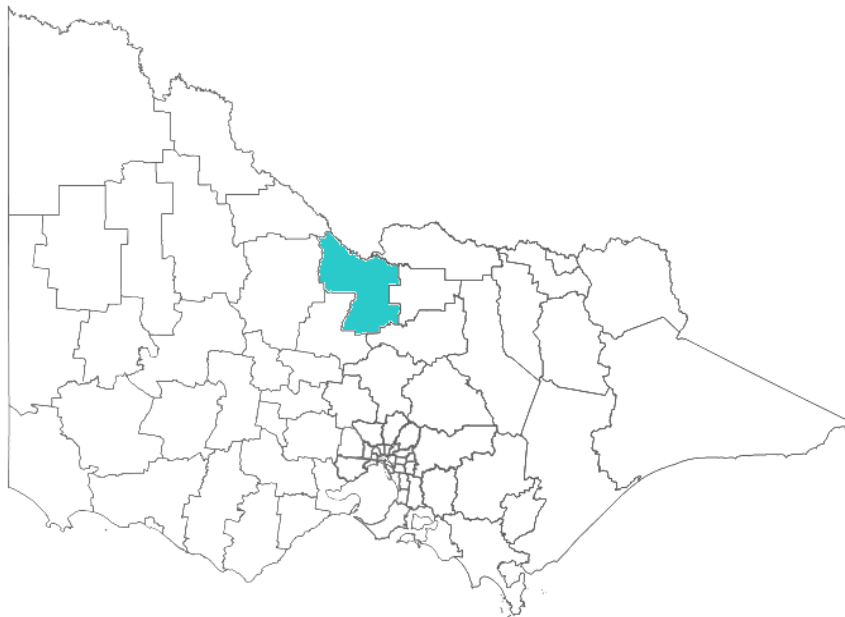
The Campaspe Primary Care Partnership (PCP) Community Health and Wellbeing Profile presents a broad range of data from an extensive variety of agencies across Australia, providing insight to the social and health status of the Campaspe PCP population. The profile will be used to inform and support local strategic planning by health and community service organisations in the Campaspe Shire area.

## About the Campaspe PCP

### The Region

The Campaspe Primary Care Partnership (PCP) catchment takes in the Local Government Area (LGA) of Campaspe Shire. The Shire of Campaspe is located in north central Victoria, on the New South Wales border, and is approximately 180 kilometres from Melbourne. The Shire's largest town is Echuca, with a 2011 population of 12,360. Other towns in the Shire include Kyabram, Gunbower, Lockington, Rushworth, Rochester, Stanhope and Tongala. The Shire covers approximately 4,500 square kilometres and land use is primarily agricultural, particularly dairy farming, cereal and grain growing and sheep grazing. Tourism is also an important industry in the Shire, particularly in Echuca and along the River Murray.

**Figure 1. Campaspe Shire Local Government Area**



## **Sub-Regions Used in Profile**

Various sub-region geographies are referred to in this profile, based on the different practices at different agencies. Please refer to Appendix 2. for maps of the different sub-regions used in this document.

# Executive Summary

## 1. Key Issues

### 1.1 Population Groups

While poor health and wellbeing status occurs in a range of age groups and in both sexes, the population groups that consistently recorded notably poorer health status compared to either regional Victoria or Victorian averages and other population groups were:

- Infants and children
- Young people
- Males, and
- Indigenous population.

### 1.2 Health and Wellbeing Areas

The health and wellbeing areas set out below are those where the data indicates the Campaspe population had a substantially poorer health and wellbeing status compared to regional Victorian and Victorian averages. For most areas, poorer health status is reflected across more than one indicator from more than one data source.

- Violence in the community, including violence against women
- Smoking
- Obesity
- Alcohol consumption and alcohol related harm
- Premature deaths and potentially avoidable deaths and hospitalisations
- Cancer, and
- High blood pressure and cardiovascular disease.

## 2. Population Groups - Detail

### 2.1 Infants and Children

Much of the data collected in this profile consistently indicates that the health and wellbeing of families, infants and children in the Campaspe PCP catchment is poorer than the regional Victoria and Victoria average. Areas that indicated particularly poor outcomes, include:

- Higher rates of children whose parents report high levels of family stress
- Higher rates of low birth weight births
- Higher rates of infant deaths
- Substantially higher rates of women who smoke during pregnancy
- Lower participation rates in maternal and child health key stage visits
- Lower proportions of infants fully breast-fed at 3 and 6 months
- Higher hospitalisation rates for dental conditions, cellulitis and diabetes in children
- Higher proportion of children classified as developmentally vulnerable in each of the Australian Early Development Census domains
- Higher rates of: child abuse substantiations, children that are the subject of care and protection orders, and children that are living in out of home care
- Much higher rates of children that are affected family members in reported family incidents
- Much higher proportions of children who report they have been bullied, particularly in Years 7 to 9
- A higher proportion of children that were hospitalised for accidental injuries, and
- A higher average number of school absence days.

### 2.2 Young People

Compared to regional Victoria and/or Victoria averages, Campaspe young people:

- Are more likely to be receiving an unemployment benefit
- Have a higher average number of absent days from school
- Are more likely to be bullied
- Make up a greater proportion of all persons hospitalised for assault/neglect injuries
- Make up a greater proportion of all affected persons in reported family incidents
- Make up a much greater proportion of all 'other parties' in reported family incidents
- Are more likely to experience alcohol and illicit or pharmaceutical drug related harm
- Are more likely to be victims of alcohol-related assaults and alcohol-related family violence incidents
- Are more likely to give birth (females) or to have a sexually transmitted infection, and
- Are much more likely to be hospitalised for the following ACSCs: urinary tract infections, cellulitis, convulsions and epilepsy, and iron deficiency anaemia.

Additionally, compared to the state average, young people make up a much greater proportion of serious injuries and fatalities in car accidents that occurred in Campaspe.

## 2.3 Male Population

Compared to the female population, Campaspe males:

- Are much less likely to have completed Year 12
- Have a younger median age at death
- Are substantially more likely to die from an avoidable cause
- Are substantially more likely to die 'prematurely'
- Are much more likely to be a current smoker
- Are much more likely to be admitted to hospital for circulatory system diseases or injury, poisoning and other external causes
- Are more likely to be diagnosed with cancer or to die from cancer
- Are much more likely to be hospitalised for assault / neglect injuries
- Are more likely to be hospitalised for accidental injuries (not including falls)
- Are substantially more likely to die in the workplace
- Are substantially more likely to sustain a serious injury or to die in a road accident
- Are much more likely to experience alcohol related harm leading to: hospitalisation, emergency department presentation, ambulance attendances, or assaults
- Are more likely to be hospitalised for the following ACSCs: angina, cellulitis, COPD, congestive cardiac failure, diabetes complications, gangrene, and
- Are much less likely to visit a GP or medical specialist.

## 2.4 Indigenous Population

The gap between the health and wellbeing status of the Indigenous population and the non-Indigenous population is already well documented in the Campaspe Indigenous Population Health Profile as well as in regional, state and national reports. Limited Indigenous health data is presented in this profile, however, notably poorer health and wellbeing outcomes for the Indigenous population - compared to the non-Indigenous population - are reflected in:

- Much lower levels Year 12 completion levels
- Much lower labour force and employment participation rates
- Much lower income levels
- Much higher rates of hospitalisations\* for:
  - Alcohol/drug use and alcohol/drug induced organic mental disorders
  - Mental diseases and disorders
  - Diseases and disorders of the respiratory system, and
  - Diseases and disorders of the hepatobiliary system and pancreas.

*\*Excludes pregnancy, childbirth and the puerperium as well as newborns and neonates.*

## 2.5 Female Population

Overall, Campaspe females have better health and wellbeing status than Campaspe males, however, *compared to regional Victoria and/or Victoria averages*, Campaspe females are notably more likely to:

- Be a teenage mother (proportion of teenage females)
- Smoke during pregnancy
- Be a victim of a homicide or assault
- Be an affected family member in a reported family incident, including alcohol related family violence incidents
- Be hospitalised for injuries from an assault / neglect/ maltreatment, or for injuries from an assault / neglect/ maltreatment caused by a family member/domestic partner
- Be receiving the female sole parent payment (of females aged 15 - 54 years)
- Be a smoker
- Die from an avoidable cause or die prematurely
- Be hospitalised for cancers, circulatory system diseases, respiratory system diseases, and musculoskeletal system and connective tissue diseases, and
- Die from cancer *(note that rate is not age standardised)*.

Campaspe females are also notably *more likely than Campaspe males* to:

- Be a victim of homicide, assault, sexual offences, or stalking, harassment and threatening behaviour
- Be the affected family member in an alcohol related family violence incident
- Be hospitalised for injuries from an assault caused by a family member/domestic partner
- Have mental and behavioural problems
- Be hospitalised for an injury caused by intentional self-harm
- Require medical attention for pharmaceutical drug related harm
- Be hospitalised for injuries caused by falls, and
- Be seeking transitional housing.

## 2.6 Older Population

Very limited health and wellbeing data is available in this profile broken down by age. Compared to regional Victoria and/or Victoria averages, the Campaspe older population is notably more likely to:

- Be receiving the age pension
- Die from cancer (per population aged 70 - 79 years), and
- Be a HACC client.

### 3. Health and Wellbeing Areas - Detail

- **Violence in the Community:** Compared to Victoria, Campaspe has much higher rates of:
  - Crimes against persons, particularly assault, sexual offences and stalking, harassment and threatening behaviour
  - Reported family incidents
  - Alcohol related assault victims, particularly young people and males
  - Alcohol related family incidents, particularly young people and females, and
  - Young people who report they have been bullied.

Violence against women: Much of the Campaspe data for crimes against persons, reported family incident and assault injury hospitalisations is characterised by very high proportions of female victims compared to state female averages and, in many instances, compared to Campaspe males.

- **Smoking:** Campaspe has a notably higher proportion of population that is a current smoker and/or that smokes daily, compared to regional Victoria and Victoria. Males are more likely to be current smokers than females.
- **Obesity:** The proportion of obese population is substantially higher in Campaspe than the regional Victoria and Victoria average. Campaspe has a substantially higher proportion of population that consumes sugar-sweetened soft drink daily.
- **Alcohol consumption and alcohol related harm:** Rates of alcohol consumption and various alcohol related harm are generally higher than state averages, particularly for young people and for males. Rates for alcohol related assaults are substantially higher than the state average and rates for alcohol related family incidents are also higher than the state average, particularly for young people.
- **Cancer:** Rates of new cancer cases and of cancer deaths are much higher in Campaspe than Victoria averages. New cancer cases are much more common in Campaspe males than females, while cancer death rates are similar for males and females. New cancer case data suggests that, compared to Victorian averages, rates of new cancer cases in population aged 29 years and under are much higher in Campaspe population. Data also indicates that, compared to Victorian averages, rates of melanoma, lymphoma and cancer of the uterus are higher in Campaspe population. Note that some cancer data is not age standardised and prevalence of cancer generally increases with age.
- **Potentially avoidable deaths and hospitalisations:** Campaspe males and females have much higher rates of premature and avoidable deaths compared to Victorian averages. Campaspe males and females also have much higher rates of hospital admissions for chronic and acute ambulatory care sensitive conditions. The rate of ED presentations, including for primary care type presentations, are also much higher than state averages.
- **High blood pressure and cardiovascular disease:** Rates of high blood pressure in the Campaspe population are much higher than the state average and avoidable death rates due to cardiovascular system diseases and Ischaemic heart disease are much higher than state and regional Victoria averages. Rates of hospitalisations for circulatory system diseases are much higher than state averages also.

## 4. Additional Findings

*This summary outlines additional findings from the data. It largely covers those indicators where data revealed a notably higher prevalence of a health or risk issue. Please refer to the profile for the full range of data.*

### Population

The 2015 estimated population of Campaspe Shire was 36,747. The population of Campaspe has not changed notably since 2005.

Compared to state averages, the 2015 estimated resident population of Campaspe Shire is characterised by:

- A slightly higher proportion of population aged 10 - 19 years, a notably lower proportion of population aged 20 - 44 years, and a higher proportion of population aged 50 years and older
- A much higher proportion of Indigenous population, and
- A much higher proportion of population that was born in Australia.

### Socio-economic Status

The SEIFA IRSD scores indicate a high level of relative socio-economic disadvantage in many Campaspe towns. Tongala and Rushworth had IRSD scores in the lowest decile of Victorian towns; while an additional eight towns had IRSD scores in the 2nd lowest decile.

However, labour force participation and unemployment rates are similar to or better than regional Victoria and Victoria averages. Campaspe also tends to perform better than or similar to regional Victoria across other indicators such as proportion of population receiving Centrelink benefits (excluding the female sole parenting payment which was higher than both regional Victoria and Victoria) and proportion of population experiencing food security.

Socio-economic disadvantage appears to be largely centred on the areas of low income and low education levels. In 2011, compared to regional Victoria and Victoria averages:

- Personal and household incomes were notably lower
- A much lower proportion of population had completed Year 12 and this was particularly evident in the male population, and
- A much lower proportion of population had a university qualification and this was also particularly evident in the male population.

### Chronic Disease Risk Factors

Compared to regional Victoria and Victoria averages, Campaspe has a substantially higher proportion of population that are current smokers. Campaspe males are notably more likely than females to be current smokers.

Compared to regional Victoria and Victoria, Campaspe also has:

- A much higher proportion of population that drink sugar-sweetened soft drinks
- A much higher proportion of population that has a high or very high level of psychological distress
- A substantially higher proportion of population that is obese, and
- A higher proportion of population that undertakes zero physical activity during the week (although some other data in this report contradicts this).



Compared to Victorian averages, Campaspe also has:

- A similar proportion of population that consumes the recommended daily serves of vegetables or that undertakes sufficient time and sessions of physical activity
- A lower proportion of population that consumes the recommended daily serves of fruit, or that reported they 'never' eat takeaway meals or snacks
- A much higher proportion of population that is active at work (walking, heavy labour) and a much lower proportion that mostly sits at work
- A much lower proportion of population that spends 8 or more hours per day sitting
- A higher proportion of population that participates in physical activity organised by sports clubs; but a lower proportion that participates in other organised physical activity or in any unorganised physical activity (like walking, jogging, cycling etc), and
- Similar or higher participation rates in health checks including bowel, breast and cervical cancer screening.

## Access To and Utilisation of Health Services

Compared to Victoria, Campaspe has the same rate of GPs per population; while it has a slightly higher rate of allied health sites, GP clinics, and pharmacies per population. The rate of dental services per population is slightly lower than the Victoria average.

Campaspe also has a higher rate of GP visits per population, compared to Victoria, and residents are much more likely to report they visited a GP in the past 12 months. The rate of GP visits per female population is substantially higher than the male rate.

## Overall Health Status

The various data suggest that the overall health status of the Campaspe population is generally poorer than the regional Victoria and Victoria average. Compared to regional Victoria and Victoria averages, Campaspe has a:

- Higher proportion of population that rates their health status as fair/poor
- Higher rate of hospitalisations for chronic and acute ACSCs
- Higher rate of ED presentations and of hospital separations
- Higher rate of avoidable deaths and premature deaths, and
- A younger median age at death for Kyabram/ Rochester/ Rushworth region males.

## Health Conditions

**Respiratory system diseases:** The various self-reported indicators for respiratory system diseases, including asthma and COPD, suggest that prevalence is similar to or less than the regional Victoria average. Avoidable mortality rates are also similar to regional Victoria. However, hospitalisation rates for respiratory system diseases are much higher than Victoria.

**Diabetes:** Campaspe has a slightly greater proportion of population with diabetes compared to Victoria - and has a greater proportion of all persons with diabetes that have Type 2 diabetes. Self reported data also indicates that Campaspe has a greater proportion of population that has been diagnosed with Type 2 diabetes by a doctor in their lifetime.

**Musculoskeletal system diseases:** Available data indicates that prevalence of musculoskeletal diseases / disorders is similar to regional Victoria averages. However, hospitalisation rates for musculoskeletal diseases are substantially higher than state averages.

**Notifiable infectious conditions:** Campaspe has notably higher rates of: hepatitis C - newly acquired, cryptosporidiosis, salmonellosis, shiga-toxin and vero-toxin producing escherichia coli, pertussis, varicella zoster infection (unspecified), and Ross River infection.

**Dental health:** Campaspe has a slightly higher proportion of population that rate their dental health as fair or poor, compared to Victoria, but a notably higher proportion of population that last visited a dental professional 10 or more years ago plus a higher proportion who report they delayed visiting a dental professional due to cost. Hospital admissions for dental condition ACSCs are slightly higher than the Victoria average, particularly for the 0-14 years and 25-59 years age groups.

**Mental health and wellbeing:** The mental health data for Campaspe presents a complex picture. Rates of self-reported mental health problems are generally similar to regional Victoria averages, and rates of hospitalisations and deaths caused by intentional self harm are lower than the state average. The proportion of population that reported had sought professional help for a mental health problem, or that were totally unable to - or had to cut back on - work or other day to day activities due to psychological distress is also lower than the regional Victoria average. However, the proportion of population with high/very high levels of psychological distress is much higher than regional Victoria and Victoria averages. Additionally, the rate of ED presentations for psychiatric illness is much higher than the Victorian average and hospital admission rates for mental diseases and disorders are also higher than the state average.

**Drug Related Harm:**

Illicit drugs: Campaspe hospital admission and ambulance attendance rates for illicit drug related harm are lower than state averages; while the rate of episodes of care delivered per population for illicit drug related treatment are higher for Campaspe population aged 15-24 years and 25-39 years.

Pharmaceutical drugs: The rates of ED presentations and ambulance attendances for pharmaceutical drug related harm for Campaspe population aged 15-24 year are higher than the state average; while the rate of episodes of care delivered for pharmaceutical drug related treatment are approximately double for Campaspe population aged 25-39 years. Rates of pharmaceutical related harm for Campaspe females are higher than the state female average and than Campaspe males.

**Accidental injuries:** Hospitalisation rates for injuries caused by accidents are generally similar to the state average, however rates of avoidable and premature deaths caused by external causes are higher than the state average, particularly in the Kyabram/ Rochester/ Rushworth region.

Road accidents: Road accident data is for accidents that occurred in Campaspe LGA and not necessarily involving residents of Campaspe. A much greater proportion of hospitalisations for accidents that occurred in Campaspe LGA are for persons aged 0 - 17 years or 18 to 25 years, compared to the Victorian average. A greater proportion of deaths from road accidents that occurred in Campaspe LGA are for males compared to the state average and a substantially larger proportion are persons aged 18 to 20 years.

Workplace deaths: Between 1994 and 2015, there were 12 workplace fatalities that occurred at businesses registered in Campaspe. More than half the deaths occurred in the Agriculture sector, while a further 17% occurred in the manufacturing sector. All deaths were males.

## 5. Campaspe Health Snapshot

The table below sets out a snapshot of some key indicators for the Campaspe PCP region. Data is presented and discussed in more detail in other areas of this report.

**Figure 2. Campaspe Health Snapshot**

Indicator	Campaspe		Victoria
Index of Relative Socio-Economic Disadvantage (IRSD) Score (2011)	964	●	1010
% of population with high/very levels of psychological distress (2014)	18.3	●	12.6
% of low birth weight babies (2009-2011)	7.8	●	6.6
% of children aged 12-15 mnths fully immunised (2014-15)	90.7	●	91.2
% of children aged 24-27 mnths fully immunised (2014-15)	92.5		89.6
% of children aged 60-63 mnths fully immunised (2014-15)	95.3		92.6
Unemployment rate (September 2016 quarter)	5.0		5.8
Median household income (2011)	\$886	●	\$1,216
% of adult pop. completed year 12 or equivalent (2011)	28.5	●	51.7
% population can definitely get help from family when needed (2011-12)	87.0		82.6
% population can get definitely help from friends when needed (2011-12)	89.1		81.9
% population can definitely get help from neighbours when needed (2011-12)	63.0		54.4
Rate of teenage births per 1,000 females aged 15-19 years (2012)	20.7	●	10.4
% population that are current smokers (2014)	21.9	●	13.1
% population that has sufficient time & sessions of physical activity	41.6		41.4
% population participates in physical activity organised by a club (2015)	13.9		9.8
% population participates in non-organised physical activity (2015)	63.6	●	70.5
% population that consumed 5 or more serves of vegetables per day (2014)	7.3		7.4
% population that consumed 2 or more serves of fruit per day	36.5	●	47.8
% population consumes sugar-sweetened soft drink daily (2014)	17.5	●	11.2
% population that is obese (2014)	32.3	●	18.8
% experienced transport limitations in last 12 months (2011)	30.4	●	23.7
Reported family incidents per 100,000 people (September 2016)	1,889	●	1,302
Rate of crimes against the person (total) (September 2016)	2,109	●	1,308
Rate of assault and related offences - crimes (September 2016)	954	●	720
Rate of sexual offence (2015)	632	●	208
% population with increased lifetime risk of alcohol-related harm (2014)	65.6	●	59.2
% population with increased risk of alcohol-related harm - single occasion (2014)	49.3	●	42.5
% population that believes getting drunk now and then is okay (2015)	35.0	●	27.9
Rate of assaults that occur in High Alcohol Hours (2012-13)	22.3	●	13.1
Rate of alcohol related family violence incidents (2012-13)	26.8	●	21.9
ACSC total rate	31.6	●	26.3
ACSC chronic	16.8	●	13.0
ACSC acute	14.7	●	11.8
Premature mortality rate - males	328.5	●	271.5
Premature mortality rate - females	219.4	●	168.8
Avoidable mortality rate - males	173.6	●	137.9
Avoidable mortality rate - females	103.0	●	79.5
Lifetime prevalence of cancer	10.2	●	7.4
Hospitalisation rate for neoplastic disorders	3,335	●	1,832
% population with high blood pressure	36.8	●	25.9
Avoidable death rate for cardiovascular system diseases	49.3	●	33.7

Data is from various sources, as set out in relevant sections of this profile.

# Demographic Characteristics

## Total Population

### Resident Population

The usual resident population of the Campaspe PCP region in 2011 was 36,365. Campaspe – Echuca SLA had the largest proportion of population, followed by Campaspe – Kyabram SLA. Campaspe – South SLA had the smallest proportion of population.

**Figure 3. Population by SLA (2011)**

SLA	Population	SLA	Population
Campaspe - Echuca	12,983	Campaspe - South	3,488
Campaspe - Rochester	7,697	Campaspe Shire LGA	36,365
Campaspe - Kyabram	12,189		

2011 Census of Population and Housing, Basic Community Profiles, ABS 2012 \*Figures are based on usual resident population

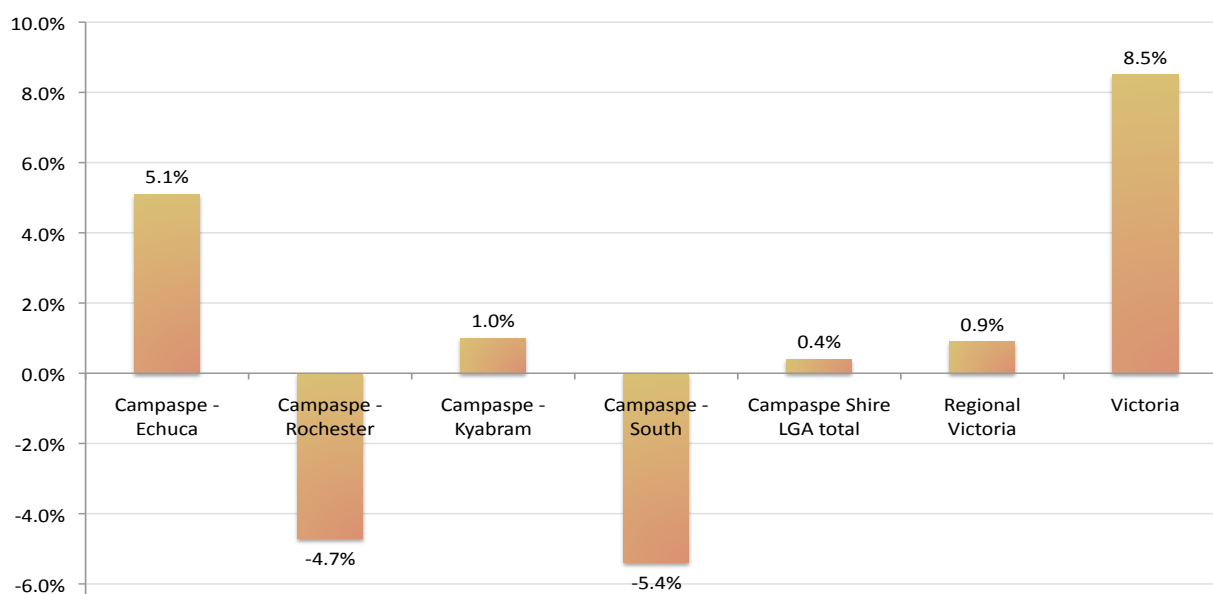
Between 2006 and 2011 the usual resident population of the Campaspe PCP region increased by 155 people. Within the region, the population of Campaspe – Echuca SLA increased by 5.1% (compared to the Victorian average increase of 8.5%) and this was the greatest population increase in the PCP region. Campaspe – South SLA (-5.4%) population decreased by the greatest percentage.

**Figure 4. Usual Resident Population Change (2006 to 2011)**

Location	2006	2011	2006-2011 change	
			No.	%
Campaspe - Echuca	12,358	12,983	625	5.1%
Campaspe - Rochester	8080	7,697	-383	-4.7%
Campaspe - Kyabram	12,074	12,189	115	1.0%
Campaspe - South	3,689	3,488	-201	-5.4%
Campaspe Shire LGA total	36,210	36,365	155	0.4%
Regional Victoria	1,333,437	1,345,715	12,278	0.9%
<b>Victoria</b>	<b>4,932,423</b>	<b>5,354,042</b>	<b>421,619</b>	<b>8.5%</b>

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS 2012

**Figure 5. Usual Resident Population Change – Chart (2006 to 2011)**



2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS 2012

## Estimated Resident Population

As at March 2016, the estimated resident population of Campaspe Shire was calculated to be 36,747 in 2015 and 36,855 in 2011 and this was a decrease of 108 people (or 0.3%).

**Figure 6. Estimated Resident Population Change (2011 to 2015)**

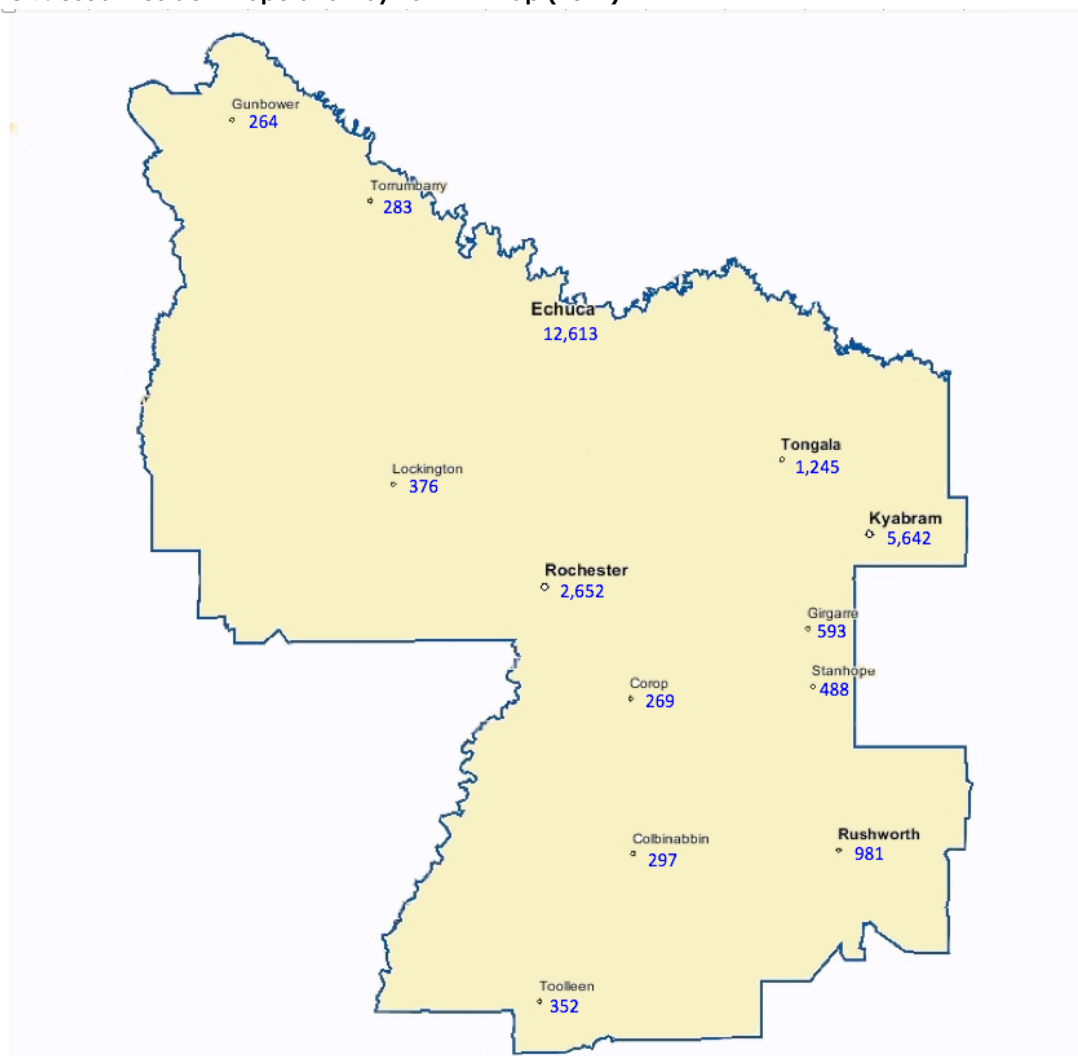
Location	2011	2015	2011-2015 change	
			No.	%
Campaspe LGA	36,855	36,747	-108	-0.29%
<b>Victoria</b>	<b>5,537,817</b>	<b>5,937,481</b>	<b>399,664</b>	<b>7.22%</b>

3218.0 Regional Population Growth, Australia. 2014-2015, Australian Bureau of Statistics, March 2016

## Population by Town

In 2011, Echuca was the largest town in the Campaspe PCP region, with a usual resident population of 12,613. Kyabram (5,642) had the next largest population, followed by Rochester (2,652), then Tongala (1,245).

**Figure 7. Usual Resident Population by Town - Map (2011)**



2011 Census of Population and Housing, Basic Community Profiles, ABS 2012

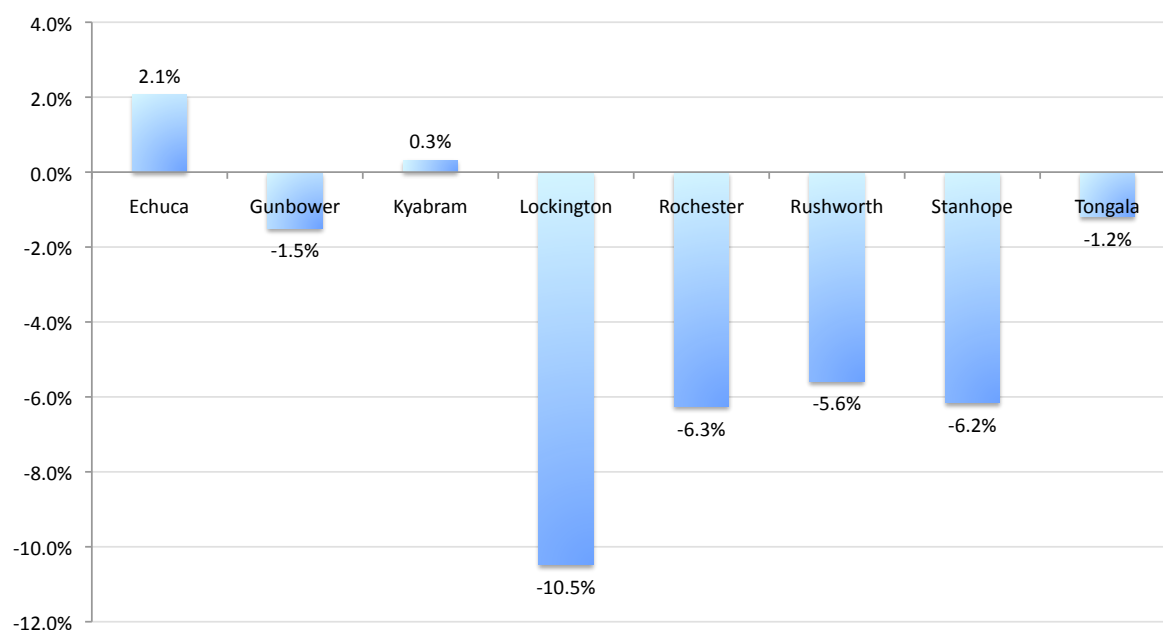
Between 2006 and 2011, the population of Echuca increased by 255 people (2.1%) and the population of Kyabram increased by 18 people (0.3%). All other towns had a decline in population figures. Compared to regional Victoria, all towns except Echuca had a smaller population increase.

**Figure 8. Usual Resident Population by Town - Table (2006 and 2011)**

Location	Year		2006 - 2011 Change	
	2006	2011	Number	%
Corop*	-	269	-	-
Colbinabbin*	-	297	-	-
Echuca	12,358	12,613	255	2.1%
Girgarre*	-	593	-	-
Gunbower	268	264	-4	-1.5%
Kyabram	5624	5,642	18	0.3%
Lockington	420	376	-44	-10.5%
Rochester	2829	2,652	-177	-6.3%
Rushworth	1039	981	-58	-5.6%
Stanhope	520	488	-32	-6.2%
Tongala	1260	1,245	-15	-1.2%
Toolleen*	-	352	-	-
Torrumbarry*	-	283	-	-
Regional Victoria	1,333,437	1,345,715	12,278	0.9%

2011 Census of Population and Housing, Basic Community Profiles, ABS 2012 \*Data for these locations is based on a State Suburb boundary (ABS) and this takes in a wide region around the town. Many State Suburb boundaries have changed considerably between 2006 and 2011. Therefore comparisons between 2006 and 2011 figures should be made with caution.

**Change to Usual Resident Population by Town\* (2006 and 2011)**



2011 Census of Population and Housing, Basic Community Profiles, ABS 2012 \*Towns that had populations based on a State Suburb geographic classification have been excluded from this comparison as 2011 data is generally not comparable to 2006 data.

## Population Density and Distribution

In 2011, population density across the Campaspe PCP region varied. Density was greatest in Campaspe – Echuca SLA (330.4 persons per square kilometre) and this was higher than the Victoria average. Density in all other Campaspe SLAs was much lower than the Victoria average. Within the PCP region, Campaspe – South had the lowest population density.

**Figure 9. Population Density (2011)**

Location	Persons /km2
Campaspe - Echuca SLA	330.4
Campaspe - Kyabram SLA	7.8
Campaspe - Rochester SLA	6.2
Campaspe - South SLA	2.3
Campaspe LGA total	8.0
<b>Victoria</b>	<b>22.6</b>

2011 Census of Population and Housing, Basic Community Profiles, ABS 2012 \*Figures are based on usual resident population

## Population Forecast

Between 2016 and 2031, the population of the Campaspe PC region is projected to increase by 1,972 with almost all of this growth taking place in Echuca Town VIFSA. Compared to the regional Victoria (18%) and Victoria (28%) figure, the VIFSA Echuca Town projected increase (17%) is lower and the total Campaspe PCP region projected increase (5%) is notably lower.

**Figure 10. Projected Population by LGA and VIFSA# (2016-31)**

Location	2016	2021	2026	2031	2016 - 2031 change	
					No.	%
VIFSA Echuca Town	14,790	15,430	16,092	16,762	2,400	17%
VIFSA Kyabram District	10,643	10,748	10,868	11,002	323	3%
VIFSA Rochester District	7,525	7,489	7,479	7,482	-205	-3%
VIFSA Rushworth District	3,855	3,705	3,615	3,540	-588	-14%
Campaspe PCP	36,814	37,371	38,055	38,786	1,972	5%
Regional Victoria	1,420,593	1,498,997	1,585,122	1,674,497	253,905	18%
<b>Victoria</b>	<b>6,048,767</b>	<b>6,605,653</b>	<b>7,170,957</b>	<b>7,733,259</b>	<b>1,684,492</b>	<b>28%</b>

*Victoria in Future (VIF) 2016, DPCD 2016 #VIFSA=Victoria in Future Small Area: these were constructed by DPCD to replace Statistical Local Areas for small area analysis. Please see refer to map in Introduction section.*

## Death Rate

In 2014, there were 372 deaths in the Campaspe PCP catchment. Compared to the 2011 figure (365), the number of deaths was slightly higher. The standardised death rate per 1,000 population decreased over the period (6.9 versus 5.8). In 2014, Campaspe PCP had a higher death rate than Victoria and a slightly lower rate than regional Victoria.

**Figure 11. Numbers of Deaths and Standardised Death Rate (2011 and 2014)**

Location	2011		2014	
	No. of deaths	Rate*	No. of deaths	Rate*
Campaspe	365	6.9	372	5.8
Regional Victoria	11,981	N/a	12,397	5.9
<b>Victoria</b>	<b>36,552</b>	<b>5.7</b>	<b>38,042</b>	<b>5.3</b>

*ABS National Regional Profiles 2009-13, ABS 2016 \*Standardised rate per 1,000*



## Population Age Structure

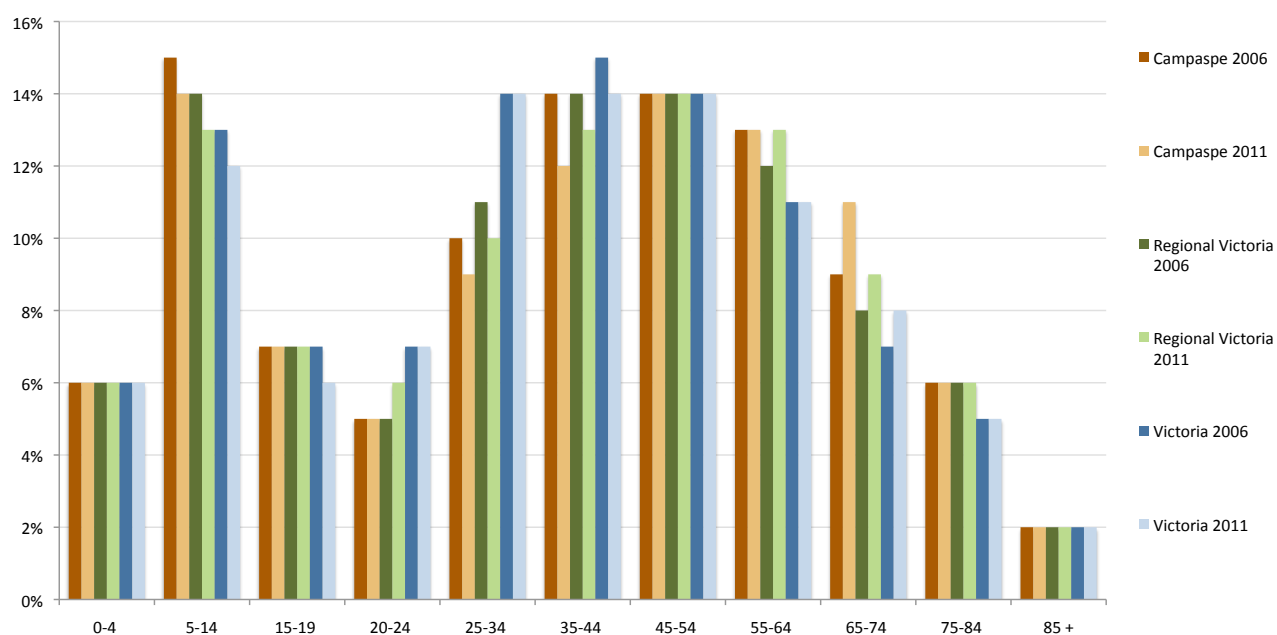
In 2011, compared to regional Victoria, Campaspe PCP had a higher proportion of population aged 5 to 14 years and 65 to 74 years; while it had a lower proportion of population aged 20 to 24 years, 25 to 34 years, and 35 to 44 years. Between 2006 and 2011, the proportion of population in 5 – 14 years, 25 – 34 years, and 35 – 44 years age groups decreased, while it increased in the 65 – 74 years age group.

**Figure 12. Age Structure of the Campaspe PCP Region (2011)**

Age in years	Campaspe				Regional Victoria		Victoria	
	2006		2011		2006	2011	2006	2011
	No.	%	No.	%	%	%	%	%
0-4	2,276	6%	2,218	6%	6%	6%	6%	6%
5-14	5,501	15%	5,020	14%	14%	13%	13%	12%
15-19	2,389	7%	2,499	7%	7%	7%	7%	6%
20-24	1,658	5%	1,698	5%	5%	6%	7%	7%
25-34	3,524	10%	3,251	9%	11%	10%	14%	14%
35-44	5,065	14%	4,537	12%	14%	13%	15%	14%
45-54	5,108	14%	5,232	14%	14%	14%	14%	14%
55-64	4,538	13%	4,834	13%	12%	13%	11%	11%
65-74	3,217	9%	3,827	11%	8%	9%	7%	8%
75-84	2,154	6%	2,345	6%	6%	6%	5%	5%
85 +	779	2%	903	2%	2%	2%	2%	2%
Total	36,210	100%	36,364	100%	100%	100%	100%	100%

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS

**Figure 13. Age Structure Change in the Campaspe PCP Region Population - Chart (2006 and 2011)**



2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS

In 2015, compared to regional Victoria, Campaspe PCP had a higher proportion of population aged 10 to 19 years, 50 to 54 years and 75 to 84 years; while it had a lower proportion of population aged 20 to 24 years and 30 to 39 years.

**Figure 14. Age Structure of Campaspe PCP 2015 Estimated Resident Population (2015)**

Age in Years	Campaspe		Regional Victoria		Victoria
	no.	%		%	%
0-4	2,151	6%		6%	6%
5-9	2,357	6%		6%	6%
10-14	2,442	7%		6%	6%
15-19	2,464	7%		6%	6%
20-24	1,629	4%		6%	7%
25-29	1,717	5%		5%	8%
30-34	1,727	5%		6%	8%
35-39	1,798	5%		6%	7%
40-44	2,262	6%		6%	7%
45-49	2,467	7%		7%	7%
50-54	2,786	8%		7%	6%
55-59	2,599	7%		7%	6%
60-64	2,392	7%		7%	5%
65-69	2,364	6%		6%	5%
70-74	1,989	5%		5%	4%
75-79	1,404	4%		3%	3%
80-84	1,079	3%		2%	2%
85 and over	1,120	3%		3%	2%
Total	36,747	100%		100%	100%

3235.0 Population by Age and Sex, Regions of Australia, Australian Bureau of Statistics, August 2016

## Median Age

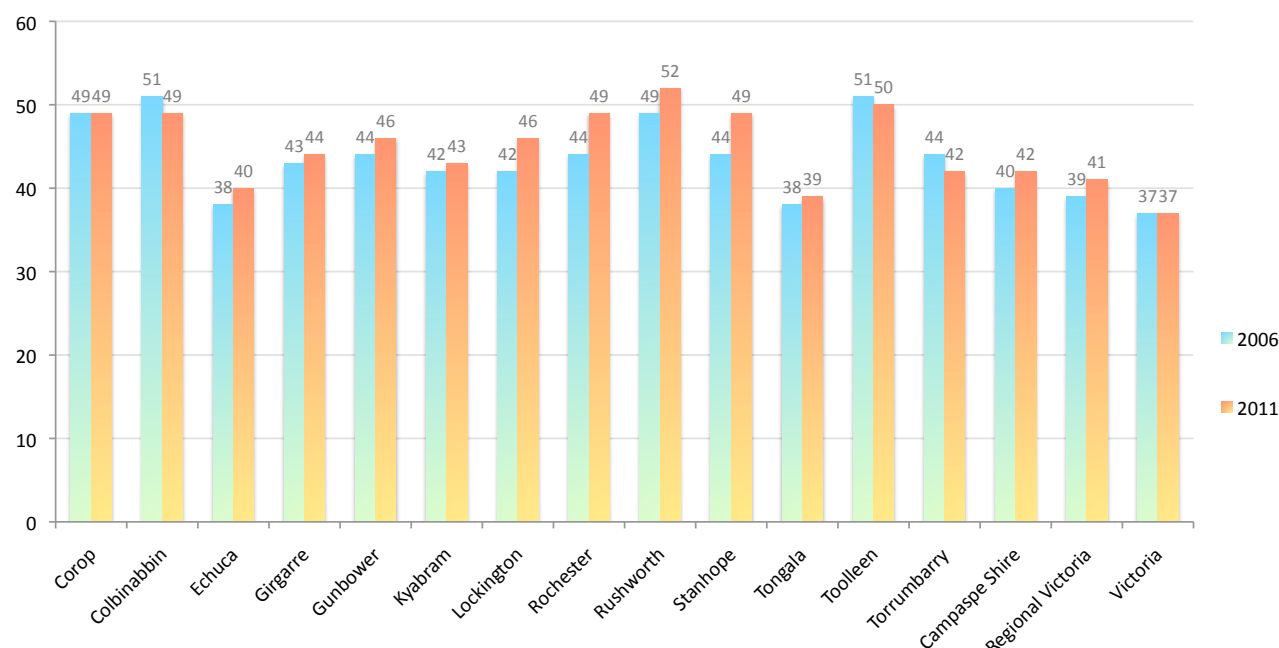
The median age figure represents the midpoint in the age range of the population. That is, it is the age at which exactly half the population are aged older and half the population are aged younger. In 2011, the median age of the Campaspe Shire population was 42 and this was higher than the regional Victoria (41) and Victoria (37) median. Rushworth (52) and then Toolleen (50) had the highest median age and Tongala (39) had the lowest. Compared to the regional Victoria median, Echuca (40) and Tongala (39) had a lower median age and all other major towns had a higher median age. Between 2006 and 2011, median ages increased by the greatest number of years in Rochester and Stanhope (both had 5 year increases), followed by Lockington (4 year increase) then Rushworth (3 year increase). The median age decreased in Colbinabbin, Toolleen and Torrumbarry.

**Figure 15. Median Age - Table (2006 and 2011)**

Location	2006	2011	Difference (no. of years)
Corop*	49	49	0
Colbinabbin*	51	49	-2
Echuca	38	40	2
Girgarre*	43	44	1
Gunbower	44	46	2
Kyabram	42	43	1
Lockington	42	46	4
Rochester	44	49	5
Rushworth	49	52	3
Stanhope	44	49	5
Tongala	38	39	1
Toolleen*	51	50	-1
Torrumbarry*	44	42	-2
Campaspe Shire	40	42	2
Regional Victoria	39	41	2
<b>Victoria</b>	<b>37</b>	<b>37</b>	<b>0</b>

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS \*Data for these locations is based on a State Suburb boundary (ABS) and this takes in a wide region around the town. Many State Suburb boundaries have changed considerably between 2006 and 2011. Therefore comparisons between 2006 and 2011 figures should be made with caution.

**Figure 16. Median Age - Chart (2006 and 2011)**



2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS 2012

## Population Aged 65+ Years

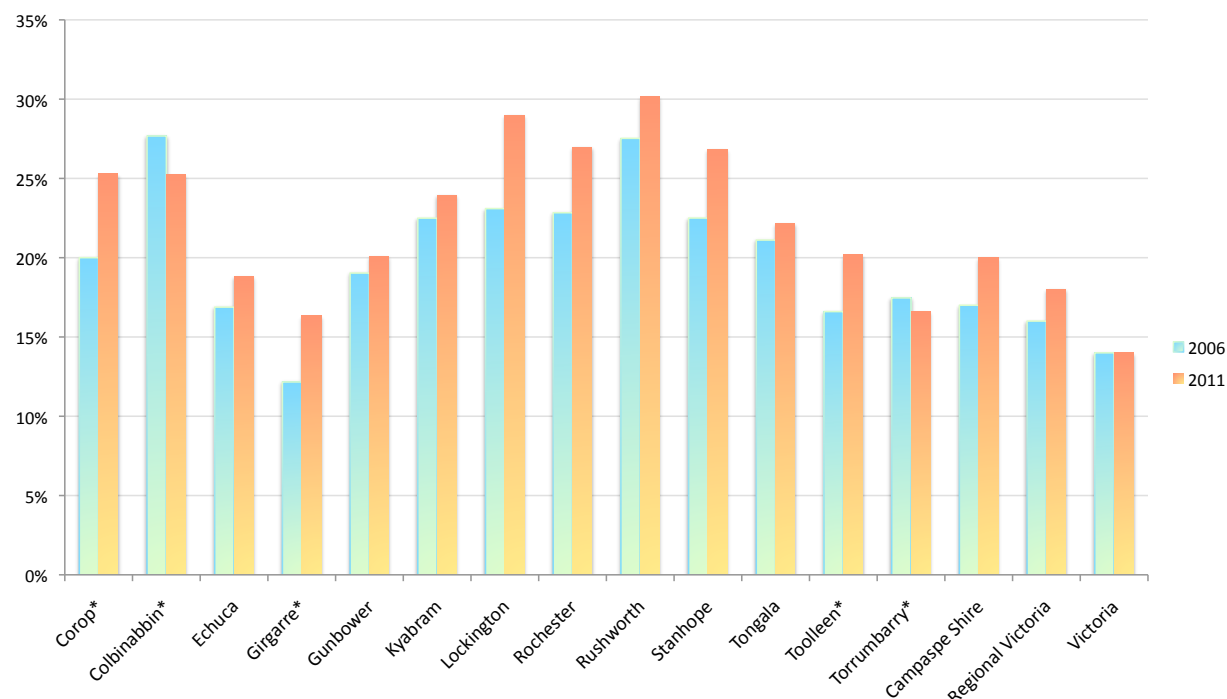
In 2011, compared to regional Victoria (18%) and Victoria (14%), Campaspe (20%) had a higher proportion of population aged 65 years and over. Within the region, compared to regional Victoria, many towns had a higher proportion of population in this age group. Rushworth (30%) had the highest proportion, followed by Lockington (29%), then Rochester and Stanhope (both 27%); while Girgaree\* (16%) had the lowest proportion.

**Figure 17. Population Aged 65 Years and Over (2006 and 2011)**

Location	2006		2011		2006 – 2011 Change in number
	No.	%	No.	%	
Corop*	48	20%	68	25%	20
Colbinabbin*	31	28%	75	25%	44
Echuca	2,086	17%	2,372	19%	286
Girgaree*	77	12%	97	16%	20
Gunbower	51	19%	53	20%	2
Kyabram	1,265	22%	1,351	24%	86
Lockington	97	23%	109	29%	12
Rochester	646	23%	715	27%	69
Rushworth	286	28%	296	30%	10
Stanhope	117	23%	131	27%	14
Tongala	266	21%	276	22%	10
Toolleen*	41	17%	71	20%	30
Torrumbarry*	51	17%	47	17%	-4
Campaspe Shire	6,150	17%	7,081	20%	931
Regional Victoria	212,971	16%	236,532	18%	2,3561
<b>Victoria</b>	<b>674,904</b>	<b>14%</b>	<b>761,580</b>	<b>14%</b>	<b>86,676</b>

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS 2012 \*Data for these locations is based on a State Suburb boundary (ABS) and this takes in a wide region around the town. Many State Suburb boundaries have changed considerably between 2006 and 2011. Therefore comparisons between 2006 and 2011 figures should be made with caution.

**Figure 18. Proportion Population Aged 65 Years and Over – Chart (2006 and 2011)**



2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS 2012 \*Refer to note in table above

## Population Aged 0-4 Years

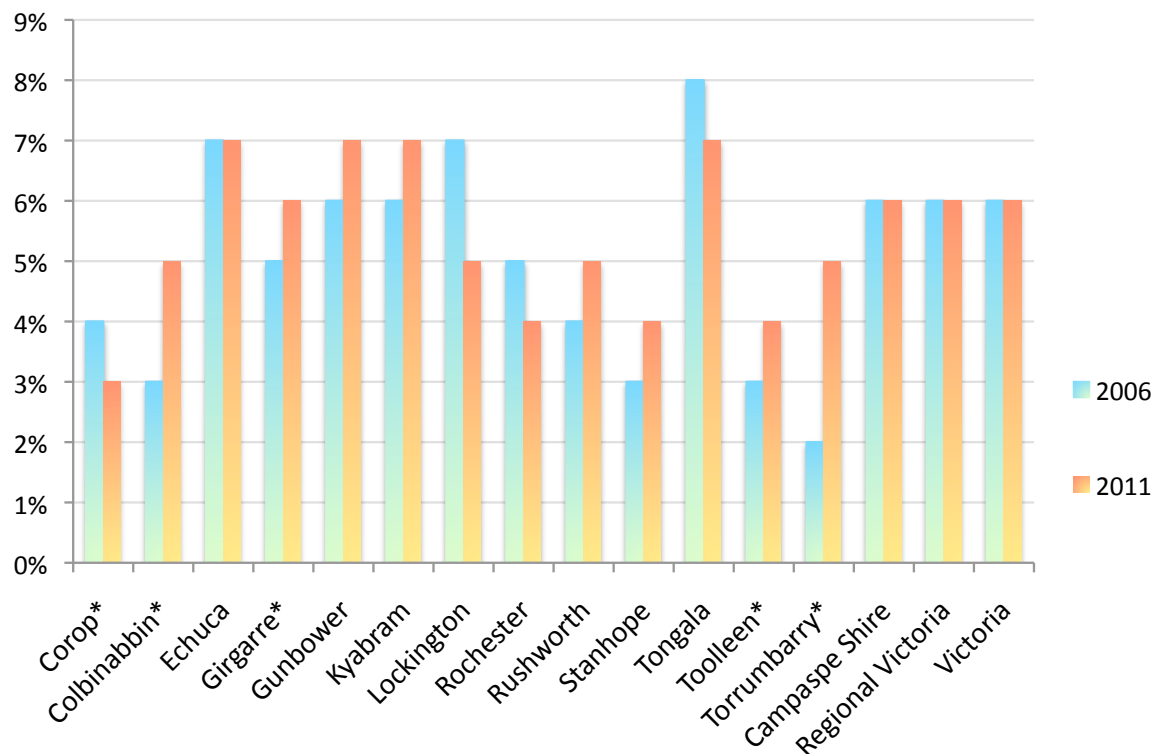
In 2011, compared to regional Victoria (6%) and Victoria (6%), Campaspe (6%) had the same proportion of population aged 0 to 4 years. Within the Campaspe PCP region, many towns had a lower proportion of population in this age group. Corop (3%) had the lowest proportion, followed by Rochester, Stanhope and Toolleen\* (all 4%).

**Figure 19. Proportion of Population Aged 0 - 4 years (2006 and 2011)**

Location	2006		2011	
	No.	%	No.	%
Corop*	9	4%	7	3%
Colbinabbin*	3	3%	14	5%
Echuca	867	7%	860	7%
Girgarre*	31	5%	34	6%
Gunbower	16	6%	18	7%
Kyabram	323	6%	373	7%
Lockington	28	7%	20	5%
Rochester	149	5%	115	4%
Rushworth	41	4%	46	5%
Stanhope	16	3%	19	4%
Tongala	97	8%	90	7%
Toolleen*	8	3%	15	4%
Torrumbarry*	7	2%	13	5%
Campaspe Shire	2,276	6%	2,217	6%
Regional Victoria	-	6%		6%
<b>Victoria</b>	-	<b>6%</b>		<b>6%</b>

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS 2012 \*Data for these locations is based on a State Suburb boundary (ABS) and this takes in a wide region around the town. Many State Suburb boundaries have changed considerably between 2006 and 2011. Therefore comparisons between 2006 and 2011 figures should be made with caution.

**Figure 20. Proportion of Population Aged 0 – 4 years Chart (2006 and 2011)**



2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS 2012 \* Refer to note in table above.

## Population Aged 15-19 Years

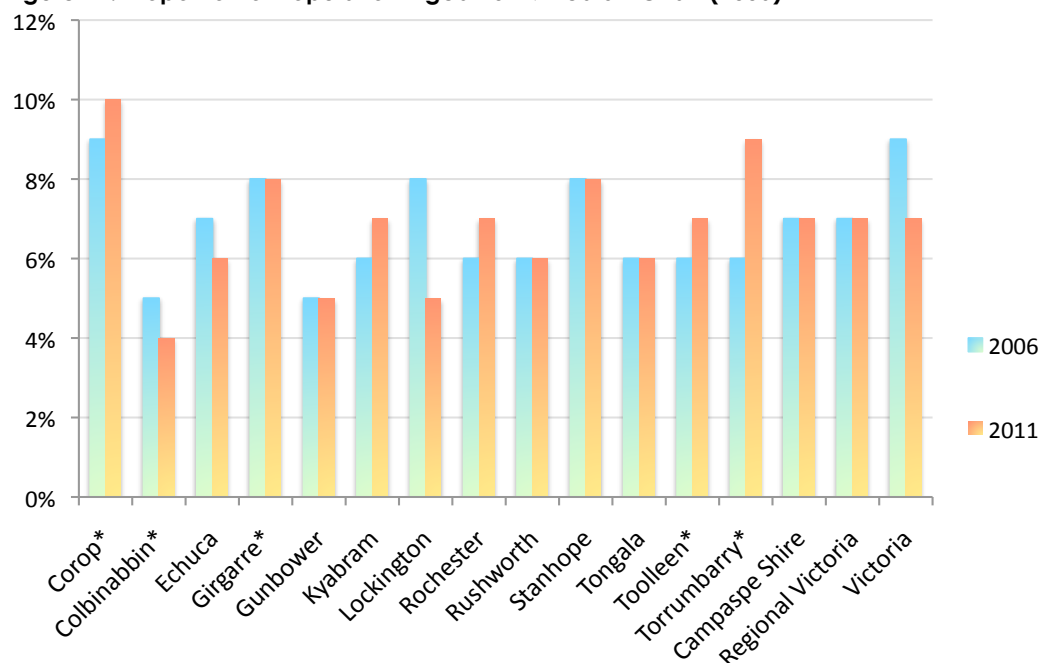
In 2011, compared to regional Victoria (7%) and Victoria (7%), Campaspe (7%) had the same proportion of population aged 15 to 19 years. Corop (10%) had the highest proportion of population in this aged group, followed by Torrumbarry (9%); while Colbinabbin (4%) had the lowest proportion, followed by Gunbower and Lockington (both 5%).

**Figure 21. Proportion of Population Aged 15-19 Years (2006 and 2011)**

Location	2006		2011		2006 – 2011 Change in number
	No.	%	No.	%	
Corop*	21	9%	26	10%	5
Colbinabbin*	6	5%	13	4%	7
Echuca	832	7%	777	6%	-55
Girgarre*	48	8%	50	8%	2
Gunbower	14	5%	12	5%	-2
Kyabram	340	6%	386	7%	46
Lockington	34	8%	20	5%	-14
Rochester	167	6%	188	7%	21
Rushworth	62	6%	58	6%	-4
Stanhope	39	8%	37	8%	-2
Tongala	79	6%	79	6%	0
Toolleen*	14	6%	25	7%	11
Torrumbarry*	18	6%	26	9%	8
Campaspe Shire	2,389	7%	2,498	7%	109
Regional Victoria	-	7%	-	7%	-
Victoria	-	7%	-	7%	-

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS 2012 \*Data for these locations is based on a State Suburb boundary (ABS) and this takes in a wide region around the town. Many State Suburb boundaries have changed considerably between 2006 and 2011. Therefore comparisons between 2006 and 2011 figures should be made with caution.

**Figure 22. Proportion of Population Aged 15-19 Years – Chart (2006)**



2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS 2012 \*Refer to note in table above

## Population Aged 20-24 Years

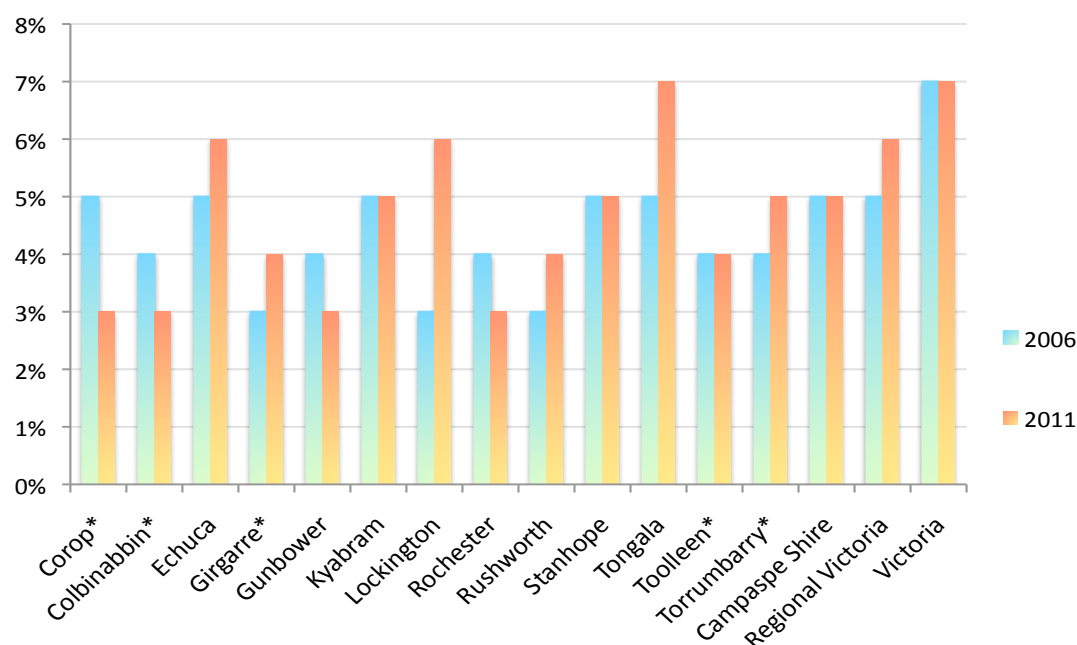
In 2011, compared to regional Victoria (6%) and Victoria (7%), Campaspe (5%) had a lower proportion of population aged 20 to 24 years. Within the Campaspe PCP region, many towns also had a comparatively low proportion of population in this age group. Corop\*, Colbinabbin\*, Gunbower, and Rochester (all 3%) had the lowest proportion of population in this age group; while Tongala (7%), then Lockington and Echuca (both 6%) had the highest.

**Figure 23. Proportion of Population Aged 20-24 Years (2006 and 2011)**

Location	2006		2011		2006 – 2011 Change in number
	No.	%	No.	%	
Corop*	11	5%	7	3%	-4
Colbinabbin*	4	4%	8	3%	4
Echuca	636	5%	706	6%	70
Girgarre*	22	3%	26	4%	4
Gunbower	12	4%	8	3%	-4
Kyabram	294	5%	293	5%	-1
Lockington	11	3%	22	6%	11
Rochester	106	4%	85	3%	-21
Rushworth	34	3%	39	4%	5
Stanhope	28	5%	24	5%	-4
Tongala	68	5%	81	7%	13
Toolleen*	9	4%	13	4%	4
Torrumbarry*	12	4%	15	5%	3
Campaspe Shire	1,658	5%	1,698	5%	40
Regional Victoria	-	5%	-	6%	-
Victoria	-	7%	-	7%	-

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS 2012 \*Data for these locations is based on a State Suburb boundary (ABS) and this takes in a wide region around the town. Many State Suburb boundaries have changed considerably between 2006 and 2011. Therefore comparisons between 2006 and 2011 figures should be made with caution.

**Figure 24. Proportion of Population Aged 20-24yrs - Chart (2006 and 2011)**



2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS 2012 \*Refer to note in table above.

## Projected Change to Age Structure

Between 2016 and 2031, the Campaspe PCP population aged 0 to 14 years is projected to decrease by 6%, compared to a 13% increase across Regional Victoria. The greatest decrease was projected to take place in the VIFSA Rochester District and the VIFSA Rushworth District (-20% and -17% respectively).

**Figure 25. Projected Population Aged 0 to 14 Years by LGA and VIFSA# (2016 to 2031)**

Location	2016	2021	2026	2031	2016-2031	
					No.	%
VIFSA Echuca Town	2,869	2,833	2,853	2,869	0	0%
VIFSA Kyabram District	2,078	2,051	2,017	2,005	-73	-4%
VIFSA Rochester District	1,335	1,177	1,087	1,070	-264	-20%
VIFSA Rushworth District	543	502	464	452	-90	-17%
Campaspe LGA Total	6,824	6,563	6,421	6,396	-428	-6%
Regional Victoria	266,235	274,859	285,278	299,696	33,461	13%
<b>Victoria</b>	<b>1,106,043</b>	<b>1,216,512</b>	<b>1,314,792</b>	<b>1,395,239</b>	<b>289,195</b>	<b>26%</b>

Victoria in Future (VIF) 2016, DPCD 2016 #VIFSA=Victoria in Future Small Area: these were constructed by DPCD to replace Statistical Local Areas for small area analysis.

Between 2016 and 2031, the Campaspe PCP population aged 15 to 24 years is projected to decrease by 10%. The greatest decreases were projected to take place in VIFSA Rushworth District and VIFSA Rochester District (-38% and -32% respectively), while the VIFSA Echuca Town region is projected to have a small increase (3%) in this age group.

**Figure 26. Projected Population Aged 15 to 24 Years by LGA and VIFSA# (2016 to 2031)**

Location	2016	2021	2026	2031	2016-2031	
					No.	%
VIFSA Echuca Town	1,735	1,833	1,785	1,780	45	3%
VIFSA Kyabram District	1,294	1,256	1,221	1,214	-80	-6%
VIFSA Rochester District	766	752	649	521	-245	-32%
VIFSA Rushworth District	426	329	285	264	-162	-38%
Campaspe LGA Total	4,222	4,171	3,939	3,780	-442	-10%
Regional Victoria	171,966	176,432	181,797	188,492	16,526	10%
<b>Victoria</b>	<b>786,904</b>	<b>811,814</b>	<b>877,546</b>	<b>952,542</b>	<b>165,638</b>	<b>21%</b>

Victoria in Future (VIF) 2016, DPCD 2016 #VIFSA=Victoria in Future Small Area: these were constructed by DPCD to replace Statistical Local Areas for small area analysis.

Between 2016 and 2031, the Campaspe PCP population aged 25 to 64 years is projected to decrease by 4%, compared to a 10% increase across Regional Victoria. The greatest decreases were projected to take place in the VIFSA Rushworth District (22% decrease) and the VIFSA Rochester District (10% decrease); while the VIFSA Echuca Town region had a small increase (3%) projected.

**Figure 27. Projected Population Aged 25 to 64 Years by LGA and VIFSA# (2016 to 2031)**

Location	2016	2021	2026	2031	2016-2031	
					No.	%
VIFSA Echuca Town	7,135	7,187	7,230	7,334	198	3%
VIFSA Kyabram District	4,965	4,941	4,949	4,911	-54	-1%
VIFSA Rochester District	3,719	3,611	3,518	3,345	-374	-10%
VIFSA Rushworth District	1,857	1,701	1,592	1,453	-404	-22%
Campaspe LGA Total	17,676	17,441	17,289	17,042	-634	-4%
Regional Victoria	707,981	730,300	753,612	779,013	71,032	10%
<b>Victoria</b>	<b>3,234,181</b>	<b>3,495,440</b>	<b>3,713,009</b>	<b>3,936,107</b>	<b>701,926</b>	<b>22%</b>

Victoria in Future (VIF) 2016, DPCD 2016 #VIFSA=Victoria in Future Small Area: these were constructed by DPCD to replace Statistical Local Areas for small area analysis.



Between 2016 and 2031, the Campaspe PCP population aged 65 years and over is projected to increase by 43%, compared to a 48% increase across Regional Victoria. The greatest increases were projected to take place in the VIFSA Echuca Town region (57%) and the VIFSA Rochester District (49%).

**Figure 28. Projected Population Aged 65 Years and Over by LGA and VIFSA# (2016 to 2031)**

Location	2016	2021	2026	2031	2016-2031	
					No.	%
VIFSA Echuca Town	3,051	3,577	4,225	4,779	1,728	57%
VIFSA Kyabram District	2,306	2,500	2,682	2,872	566	25%
VIFSA Rochester District	1,706	1,948	2,226	2,546	840	49%
VIFSA Rushworth District	1,029	1,172	1,274	1,370	342	33%
Campaspe LGA Total	8,092	9,196	10,406	11,568	3,476	43%
Regional Victoria	276,427	319,427	366,461	409,328	132,901	48%
<b>Victoria</b>	<b>921,639</b>	<b>1,081,887</b>	<b>1,265,609</b>	<b>1,449,371</b>	<b>527,732</b>	<b>57%</b>

Victoria in Future (VIF) 2016, DPCD 2016 #VIFSA=Victoria in Future Small Area: these were constructed by DPCD to replace Statistical Local Areas for small area analysis.

# Indigenous Population and Distribution

## Indigenous Population by SLA and LGA

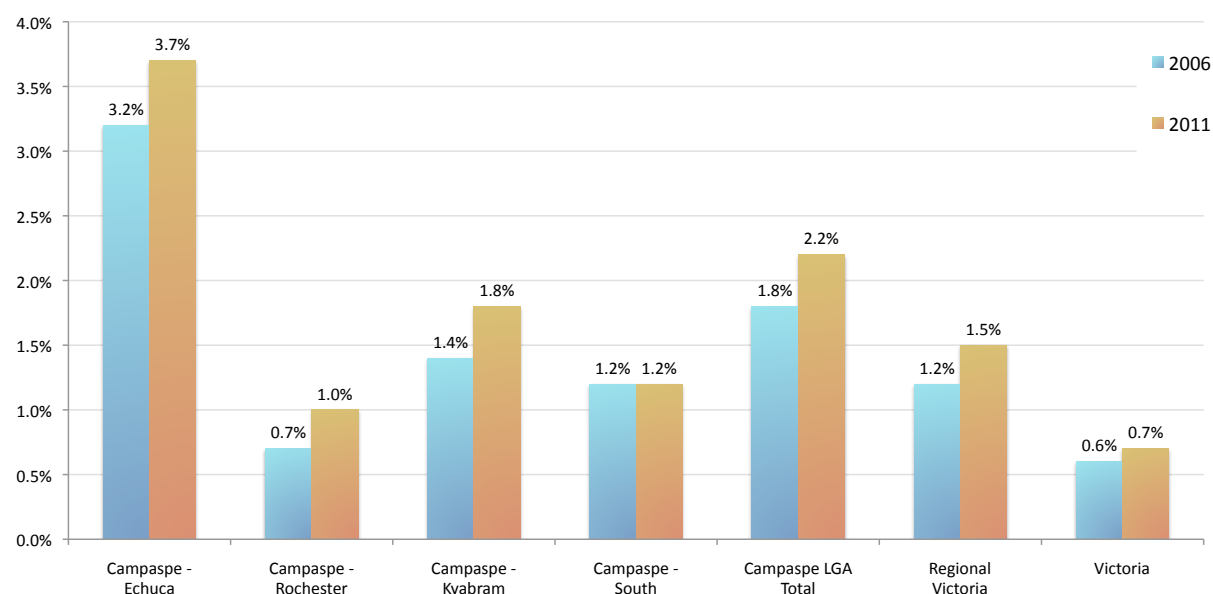
In 2011, Campaspe PCP had an Indigenous population of 816 and this represented 2.2% of the total population living in the PCP region. The number and percentage of Indigenous population has increased across the region since 2006. Campaspe PCP, as well as Campaspe – Echuca and Kyabram SLAs, had a higher proportion of Indigenous population than the regional Victoria and Victoria average. Within the PCP region, Campaspe – Echuca SLA had the highest number and proportion of Indigenous population.

**Figure 29. Indigenous Population by SLA and LGA (2006 to 2011)**

Location	2006		2011		
	Number	%	Number	Total Pop	%
Campaspe - Echuca	390	3.2%	478	12,983	3.7%
Campaspe - Rochester	54	0.7%	78	7,697	1.0%
Campaspe - Kyabram	171	1.4%	221	12,189	1.8%
Campaspe - South	43	1.2%	42	3,488	1.2%
Campaspe LGA Total	658	1.8%	816	36,365	2.2%
Regional Victoria	15,925	1.2%	19,682	1,345,715	1.5%
<b>Victoria</b>	<b>30,140</b>	<b>0.6%</b>	<b>37,988</b>	<b>5,354,042</b>	<b>0.7%</b>

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS

**Figure 30. Indigenous Population by SLA and LGA - chart (2006 to 2011)**



2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS

## Indigenous Population by Town

In 2011, there were 475 Indigenous persons living in Echuca and 107 Indigenous persons living in Kyabram, representing 3.8% and 1.9% respectively of each town's total population. Within the region, Echuca had the largest number and proportion of Indigenous population. Compared to the regional Victoria figure (1.2%), Echuca, Kyabram, Tongala and Girgarre all had a larger proportion of population that was Indigenous. Note that town totals will not add up to the LGA total, as there are Indigenous persons living outside of the townships listed.

**Figure 31. Indigenous Population by Town (2011)**

Location	Indigenous Population	Total Population	%
Corop*	0	269	0.0%
Colbinabbin*	0	297	0.0%
Echuca	475	12,613	3.8%
Girgarre*	16	593	2.7%
Gunbower	0	264	0.0%
Kyabram	107	5642	1.9%
Lockington	**	376	**
Rochester	25	2652	0.9%
Rushworth	**	981	**
Stanhope	**	488	**
Tongala	19	1245	1.5%
Toolleen*	0	352	0.0%
Torrumbarry*	**	283	**
Regional Victoria			1.2%

2011 Census of Population and Housing, Basic Community Profiles, ABS 2012 \*Data for these locations is based on a State Suburb boundary (ABS) and this takes in a wide region around the town. \*\* no data

## Estimated Resident Indigenous Population in 2015

In 2015, the estimated resident Indigenous population of the Campaspe PCP catchment was 1,109. Compared to regional Victoria (1.8%) and Victoria (0.9%), Campaspe (3.0%) has a greater proportion of population that is Indigenous.

**Figure 32. Proportion of Total Estimated Resident Population that is Indigenous (2015)**

Location	Indigenous population	Total population	%
Campaspe PCP	1,109	36,993	3.0%
Regional Victoria	27,180	1,475,107	1.8%
<b>Victoria</b>	<b>52,299</b>	<b>5,937,481</b>	<b>0.9%</b>

*Social Health Atlas of Australia, Victorian Local Government Areas, May 2016 release, PHIDU 2016*

### Age Structure of the 2015 Indigenous Estimated Resident Population

In 2015, the age structure of the 2015 Indigenous estimated resident population was similar to regional Victoria and Victoria figures. Compared to regional Victoria, Campaspe PCP had a slightly higher proportion of population aged 0 to 4 years, 15 to 19 years and 50 to 59 years; while it had a lower proportion of population aged 30 to 39 years.

Compared to the total Campaspe Indigenous estimated resident population, the 2015 Campaspe Indigenous estimated resident population has a substantially greater proportion of persons aged 0 to 24 years, while it has a substantially smaller proportion of persons aged 55 years and over.

**Figure 33. Age Structure of Campaspe PCP Indigenous Estimated Resident Population (2015)**

Age in years	Campaspe		Rest of Victoria		Victoria
	No.	%		%	%
0-4	169	15%		14%	12%
5-9	127	11%		13%	11%
10-14	108	10%		11%	10%
15-19	129	12%		11%	11%
20-24	111	10%		10%	10%
25-29	80	7%		7%	8%
30-34	59	5%		6%	6%
35-39	46	4%		5%	5%
40-44	58	5%		5%	5%
45-49	61	5%		5%	5%
50-54	51	5%		4%	4%
55-59	39	4%		3%	3%
60-64	27	2%		2%	3%
65 & over	44	4%		4%	4%
Total %	na	100%		100%	100%
Total no.	1,109	1,109		27,180	52,299

*Social Health Atlas of Australia, Victorian Local Government Areas, December 2016 release, PHIDU 2016*

**Figure 34. Age Structure Comparison - Campaspe PCP Indigenous and Total Population (2015)**

Age in years	Total Population	Indigenous Population
	%	%
0-4	6%	15%
5-9	6%	11%
10-14	7%	10%
15-19	7%	12%
20-24	4%	10%
25-29	5%	7%
30-34	5%	5%
35-39	5%	4%
40-44	6%	5%
45-49	7%	5%
50-54	8%	5%
55-59	7%	4%
60-64	7%	2%
65 and over	22%	4%
Total no.*	36,747	1,109

*Social Health Atlas of Australia, Victorian Local Government Areas, December 2016 release, PHIDU 2016* \*Total % may not add up to 100% due to decimal point rounding.

## Family Structure

In 2006, compared to Victoria, Campaspe had a higher proportion of families that were couple families with no children (42%), increasing to 45% by 2011. The proportion of couple families with children was lower than the Victoria average by an equivalent proportion.

**Figure 35. Family Structure (2006 and 2011)**

Family Type	Year	Campaspe		Regional Victoria	Victoria
		No.	%	%	%
Couple family with no children	2006	4,138	42%	41%	<b>36%</b>
	2011	4,346	45%	42%	<b>36%</b>
Total couple families with children	2006	4,151	43%	43%	<b>47%</b>
	2011	3,683	38%	40%	<b>46%</b>
Total one parent families	2006	1,356	14%	15%	<b>15%</b>
	2011	1,540	16%	16%	<b>15%</b>
Other family	2006	130	1%	1%	<b>1%</b>
	2011	105	1%	1%	<b>2%</b>

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS

## Cultural Diversity

In 2011, most Campaspe (88.37%) residents were born in Australia. The next most common countries of birth were United Kingdom, New Zealand, Italy and the Philippines.

**Figure 36. Country of Birth (2011)**

Country	Campaspe		Regional Victoria		Victoria
	No.	%	No.	%	%
Australia	32,138	88.37%	1,124,360	84.32%	68.56%
Bosnia and Herzegovina	0	0.00%	623	0.05%	0.17%
Cambodia	6	0.02%	1,042	0.08%	0.21%
Canada	10	0.03%	1,750	0.13%	0.15%
China (excl. SARs and Taiwan)(b)	24	0.07%	2,813	0.21%	1.75%
Croatia	10	0.03%	416	0.03%	0.32%
Egypt	13	0.04%	540	0.04%	0.23%
Fiji	12	0.03%	1,024	0.08%	0.18%
Former Yugoslav Rep. of Macedonia	9	0.02%	6,897	0.52%	0.34%
Germany	97	0.27%	2,010	0.15%	0.52%
Greece	17	0.05%	496	0.04%	0.93%
Hong Kong (SAR of China)(b)	14	0.04%	2,055	0.15%	0.34%
India	47	0.13%	552	0.04%	2.09%
Indonesia	11	0.03%	645	0.05%	0.29%
Iraq	6	0.02%	1,957	0.15%	0.24%
Ireland	43	0.12%	9,012	0.68%	0.27%
Italy	194	0.53%	479	0.04%	1.44%
Japan	7	0.02%	329	0.02%	0.13%
Korea, Republic of (South)	3	0.01%	278	0.02%	0.19%
Lebanon	3	0.01%	1,279	0.10%	0.30%
Malaysia	16	0.04%	1,889	0.14%	0.74%
Malta	19	0.05%	8,223	0.62%	0.37%
Netherlands	108	0.30%	11,365	0.85%	0.40%
New Zealand	351	0.97%	487	0.04%	1.50%
Philippines	140	0.38%	2,757	0.21%	0.71%
Poland	12	0.03%	1,614	0.12%	0.31%
Singapore	3	0.01%	619	0.05%	0.26%
South Africa	32	0.09%	1,996	0.15%	0.46%
South Eastern Europe, nfd(c)	20	0.05%	1,695	0.13%	0.17%
Sri Lanka	11	0.03%	844	0.06%	0.82%
Thailand	14	0.04%	620	0.05%	0.20%
Turkey	10	0.03%	1,144	0.09%	0.31%
United Kingdom, Channel Islands and Isle of Man	799	2.20%	48,025	3.60%	3.99%
United States of America	39	0.11%	2,132	0.16%	0.31%
Vietnam	6	0.02%	880	0.07%	1.28%
Born elsewhere(e)	193	0.53%	14,590	1.09%	4.34%
Country of birth not stated	1,929	5.30%	76,000	5.70%	5.19%
Total	36,366	100%	1,333,437	100%	100%

2011 Census of Population and Housing, Basic Community Profiles, ABS (b) Special Administrative Regions (SARs) comprise 'Hong Kong (SAR of China)' and 'Macau (SAR of China)'. (c) 'Not Further Defined'.

# Social Determinants of Health

Ten social determinants of health were developed by the World Health Organisation in 2000, based on an increasing understanding of the significant sensitivity of health to the social environment. The ten social determinants are listed below.

**1. The social gradient** - "Life expectancy is shorter and most diseases are more common further down the social ladder in each society."

**2. Stress** - "Stressful circumstances, making people feel worried, anxious and unable to cope, are damaging to health and may lead to premature death."

**3. Early life** - "A good start in life means supporting mothers and young children: the health impact of early development and education lasts a lifetime."

**4. Social exclusion** - "Life is short where its quality is poor. By causing hardship and resentment, poverty, social exclusion and discrimination cost lives."

**5. Work** - "Stress in the workplace increases the risk of disease. People who have more control over their work have better health."

**6. Unemployment** - "Job security increases health, well-being and job satisfaction. Higher rates of unemployment cause more illness and premature death."

**7 Social support** - "Friendship, good social relations and strong supportive networks improve health at home, at work and in the community."

**8 Addiction** - "Drug use is both a response to social breakdown and an important factor in worsening the resulting inequalities in health."

**9. Food** - "A good diet and adequate food supply are central for promoting health and well-being. A shortage of food and lack of variety cause malnutrition and deficiency diseases."

**10. Transport** - "Healthy transport means less driving and more walking and cycling, backed up by better public transport. Cycling, walking and the use of public transport promote health in four ways. They provide exercise, reduce fatal accidents, increase social contact and reduce air pollution."

Social Determinants of Health: the Solid Facts - 2<sup>nd</sup> edition - World Health Organization 2003  
[www.who.int/social\\_determinants/en/](http://www.who.int/social_determinants/en/)



# Social Gradient

## SEIFA

The 2011 Social Economic Indexes for Areas (SEIFA) is based on social and economic data from the 2011 census, providing a socio-economic snap-shot of a geographical area. The index of relative socio-economic disadvantage (IRSD) is a continuum of advantage to disadvantage with a higher score on the index indicating a lower level of disadvantage and a lower score on the index indicating a higher level of disadvantage.

In 2011, Campaspe had an IRSD score of 964 and this was lower than the Victoria (1010) and regional Victoria (978) average scores, indicating a higher level of relative socio-economic disadvantage. Campaspe Shire was ranked 20th lowest out of 79 Victorian LGAs.

**Figure 37. SEIFA Index of Relative Socio-Economic Disadvantage (2011)**

Location	IRSD score	Rank out of 79 Vic. LGAs
Campaspe Shire	964	20
Regional Victoria	978	-
<b>Victoria</b>	<b>1010</b>	<b>-</b>

*Socio-economic Index for Areas (SEIFA) 2013, ABS*

### IRSD Scores for Towns and Suburbs

In 2011, within the Campaspe PCP region, most towns had an IRSD score that was lower than the regional Victoria (and Victoria) average. Within the region, Rushworth (901) had the lowest score, followed by Tongala (933); while Echuca West (1045) had the highest score.

**Figure 38. IRSD Scores for Campaspe Shire Towns (2011)**

Town (state suburb)	SEIFA Score	State Decile
Colbinabbin	1021	5
Corop	1000	4
Echuca	965	2
Echuca Village	1034	6
Echuca West	1045	7
Girgarre	940	2
Gunbower	959	2
Kyabram	947	2
Lockington	944	2
Rochester	953	2
Rushworth	901	1
Stanhope	946	2
Tongala	933	1
Toolleen	1021	5
Torrumbarry	964	2

*Socio-economic Index for Areas (SEIFA) 2013, ABS*

## Food Insecurity and Access

"Food security exists when all people, at all times, have physical, social and economic access to sufficient, safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life. The four pillars of food security are availability, access, utilization and stability." Source: Food and Agriculture Organization, Final Declaration at the World Summit on Food Security November 2009 [www.fao.org/](http://www.fao.org/)

Compared to Regional Victoria (6.1) in 2011-12, there was a slightly lower proportion of Campaspe population (5.1\*) aged 18 years and over that stated they ran out of food in the previous 12 months and could not afford to buy more. The most common response from Campaspe residents for not always having the quality or variety of foods they want was that they couldn't "always get the right quality", followed by "some foods are too expensive".

**Figure 39. Access to Food (2011-12)**

	Ran out of food in the previous 12 months & couldn't afford to buy anymore	Stated reasons why people don't always have the quality or variety of foods they want:				
		Some foods too expensive	Can't always get right quality	Can't always get right variety	Can't always get culturally appropriate	Inadequate and unreliable public transport
	%	%	%	%	%	%
Campaspe	5.1*	20.7	24.8	9.8	3.2*	7.9*
Reg. Victoria	6.1	22.8	23.4	8.8	3.7	6.5
<b>Victoria</b>	<b>4.6</b>	<b>21.3</b>	<b>19.8</b>	<b>9.3</b>	<b>4.2</b>	<b>5.8</b>

Victorian Population Health Survey 2011-12, Department of Health Victoria 2014 \* Estimate has a relative standard error of between 25 and 50 per cent and should be interpreted with caution

The 2011-12 survey findings from across Victoria indicate that:

- Females were more likely to have experienced food insecurity than males
- Persons aged 25–34 years reported the highest rate of food insecurity, and
- The most common reason stated for why people don't always have the quality or variety of foods they want was "some foods are too expensive".

## Financial Stress

In 2010, Campaspe had a rate of 33.2 persons per 100 (age standardised data) who had government support as a main source of income. This rate was similar to the regional Victoria rate and higher than the state average (28.2).

**Figure 40. Persons Who Had Government Support as Main Source of Income# (2010)**

Location	No.	Rate*
Campaspe	10,785	33.2 ●
Regional Victoria	392,767	32.8
<b>Victoria</b>	<b>1,216,729</b>	<b>28.2</b>

*Social Health Atlas of Australia, Victorian Local Government Areas, May 2016 release, PHIDU 2016* \* Age standardised rate per 100 # In the last 2 years

In 2010, Campaspe (83.1) had the same rate per 100 persons as regional Victoria (83.1) of households that could raise \$2,000 in one week; while it had a slightly lower rate than the state average (84.0).

Campaspe (22.9) had a slightly higher rate per 100 persons than regional Victoria (21.9) whose household had at least one cash flow problem in the last 12 months; and also had a higher rate than the state average (18.8).

**Figure 41. Population\* Whose Household Could Raise \$2,000 in One Week (2010)**

Location	No.	Rate*
Campaspe	24,638	83.1 ●
Regional Victoria	936,774	83.1
<b>Victoria</b>	<b>3,614,811</b>	<b>84.0</b>

*Social Health Atlas of Australia, Victorian Local Government Areas, May 2016 release, PHIDU 2016* \*Age Standardised Rate per 100 persons aged 18 years and over - modelled estimate

**Figure 42. Households That Had at Least One Cash Flow Problem in Last 12 Months (2010)**

Location	No.	Rate*
Campaspe	6,144	22.9 ●
Regional Victoria	231,635	21.9
<b>Victoria</b>	<b>811,486</b>	<b>18.8</b>

*Social Health Atlas of Australia, Victorian Local Government Areas, May 2016 release, PHIDU 2016* \*Age Standardised Rate per 100 persons aged 18 years and over - modelled estimate

## Welfare Recipients

### Age Pension

The Age Pension is an income support payment for people who have reached retirement age. Men must be aged 65 years or over and women must be 63 and one half years or over. In June 2014, Campaspe (77%) had a higher proportion of population aged 65 years and over that was receiving the Age Pension compared to the regional Victoria (75%) and the Victorian average (71%).

**Figure 43. Age Pension Recipients (June 2014)**

Location	No.	% of population aged 65 yrs & over
Campaspe	5,805	77% ●
Regional Victoria	192,171	75%
<b>Victoria</b>	<b>591,323</b>	<b>71%</b>

*Social Health Atlas of Australia, Victorian Local Government Areas, May 2016 release, PHIDU 2016*

### Carer Payment

The Carer Payment is an income support payment for people who are unable to support themselves through participation in the workforce because they are caring for someone with a disability, severe medical condition or who is frail aged. In June 2016, there were 505 Campaspe residents receiving the Carer Payment. Compared to the Victorian average (1.4%), Campaspe had a greater proportion (1.7%) of population aged 15 years and over receiving the Carer Payment.

**Figure 44. Carer Payment Recipients (June 2016)**

Location	No.	Pop.* 15yrs & over	%
Campaspe	505	29,797	1.7% ●
<b>Victoria</b>	<b>65,610</b>	<b>4,852,397</b>	<b>1.4%</b>

*Carer Payment number sourced from DSS Payments by Local Government Area, Department of Social Services, July 2016. Accessed at data.gov.au October 2016. \*Based on 2015 estimated resident population in ABS 3235.0 Population by Age and Sex, Regions of Australia – August 2016*

### Newstart Allowance Recipients

Newstart is an income support payment for people who are looking for work. In June 2014, compared to regional Victoria (6.9%), Campaspe (6.6%) had a similar proportion of population aged 16 to 64 years that was receiving a Newstart Allowance; while it had a higher proportion than the state average (5.2%). Campaspe (5.5%) also had a notably higher proportion of population, than the state average (4.2%), that was receiving the unemployment benefit for longer than 6 months.

**Figure 45. Newstart Allowance Recipients (June 2014)**

Location	People receiving an unemployment benefit		People receiving an unemployment benefit long-term#	
	No.	% of persons aged 16 - 64 years	No.	% of persons aged 16 - 64 years
Campaspe	1,428	6.6% ●	1,183	5.5% ●
Regional Victoria	58,601	6.9%	48,357	5.7%
<b>Victoria</b>	<b>197,513</b>	<b>5.2%</b>	<b>158,775</b>	<b>4.2%</b>

*Social Health Atlas of Australia, Victorian Local Government Areas, May 2016 release, PHIDU 2016 #Longer than 6 months*

### Disability Support Pension

The purpose of the Disability Support Pension is to provide income support for people who have a permanent physical, intellectual or psychiatric impairment. In June 2014, there were 1,816 Campaspe residents receiving the Disability Support Pension. Compared to the regional Victoria average (8.1%), Campaspe (8.4%) had a similar proportion of residents receiving this pension, while it had a much higher proportion than the state average (5.4%)

**Figure 46. Disability Support Pension Recipients (June 2014)**

Location	No.	% of persons aged 16 to 64 years
Campaspe	1,816	8.4% ●
Regional Victoria	69,418	8.1%
<b>Victoria</b>	<b>203,042</b>	<b>5.4%</b>

*Social Health Atlas of Australia, Victorian Local Government Areas, May 2016 release, PHIDU 2016*

### Health Care Card Holders

A Health Care Card entitles cardholders to cheaper medicines under the Pharmaceutical Benefits Scheme (PBS) and various concessions from the Australian Government. Cardholders are generally Centrelink benefit recipients or people who have a low income. In June 2014, compared to regional Victoria (10.1%), Campaspe (9.8%) had a similar proportion of population aged 0 to 64 years that were Health Care Card holders, while it had a higher proportion than the state average (8.6%).

**Figure 47. Health Care Card Holders (June 2014)**

Location	No.	% of persons aged 0 to 64 years*
Campaspe	2,885	9.8% ●
Regional Victoria	115,151	10.1%
<b>Victoria</b>	<b>420,883</b>	<b>8.6%</b>

*Social Health Atlas of Australia, Victorian Local Government Areas, May 2016 release, PHIDU 2016*

### Female Sole Parenting Payment

The Parenting Payment is to help with the costs of caring for children. It is paid to the person who is the main carer of a child. In June 2014, compared to regional Victoria (5.3%), Campaspe (6.3%) had a higher proportion of females aged 15 to 64 years receiving the single parenting payment and had a notably higher proportion compared to the state average (3.3%)

**Figure 48. Female Sole Parent Payment Recipients (June 2014)**

Location	No.	% of females aged 15 - 64 years
Campaspe	546	6.3% ●
Regional Victoria	18,177	5.3%
<b>Victoria</b>	<b>52,750</b>	<b>3.3%</b>

*Social Health Atlas of Australia, Victorian Local Government Areas, May 2016 release, PHIDU 2016*

# Income

## Gross Individual Weekly Income

In 2011, compared to regional Victoria, Campaspe had higher proportions of population earning between \$150 and \$999 per week. Compared to regional Victoria Campaspe also had lower proportions of individuals earning more than \$1,000 per week. More than half of Campaspe residents (53.1%) earned between \$150 and \$799 per week. The most common gross individual weekly income (15.4%) for Campaspe residents was between \$400 and \$599.

**Figure 49. Gross Individual Weekly Income (2011)**

	Campaspe				Regional Victoria		Victoria	
	2006		2011		2006	2011	2006	2011
	No	%	No	%	%	%	%	%
Negative/Nil	1,699	6.0%	1,881	6.5%	6.3%	6.6%	<b>7.6%</b>	<b>8.7%</b>
\$1-\$149	1,985	7.0%	2,292	7.9%	7.6%	8.0%	<b>7.5%</b>	<b>7.8%</b>
\$150-\$249	4,716	16.6%	3,684	12.6%	16.4%	12.5%	<b>14.0%</b>	<b>10.5%</b>
\$250-\$399	4,866	17.1%	3,931	13.5%	15.7%	12.5%	<b>12.7%</b>	<b>9.8%</b>
\$400-\$599	4,685	16.5%	4,487	15.4%	15.5%	14.1%	<b>13.6%</b>	<b>11.6%</b>
\$600-\$799	3,155	11.1%	3,367	11.6%	10.7%	11.5%	<b>10.6%</b>	<b>10.6%</b>
\$800-\$999	2,119	7.5%	2,400	8.2%	7.2%	8.1%	<b>8.1%</b>	<b>8.4%</b>
\$1,000-\$1,299	1,726	6.1%	1,940	6.7%	6.4%	7.1%	<b>7.6%</b>	<b>8.0%</b>
\$1,300-\$1,599	729	2.6%	1,104	3.8%	2.9%	4.3%	<b>3.9%</b>	<b>5.4%</b>
\$1,600-\$1,999	316	1.1%	1,015	3.5%	1.5%	4.4%	<b>2.3%</b>	<b>5.9%</b>
\$2,000 or more	364	1.3%	597	2.0%	1.7%	3.1%	<b>3.3%</b>	<b>5.7%</b>
not stated	2,078	7.3%	2,425	8.3%	8.0%	7.7%	<b>8.8%</b>	<b>7.7%</b>
<b>Total</b>	28,438	100%	29,123	100%	100%	100%	<b>100%</b>	<b>100%</b>

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS

## Median Personal Weekly Income

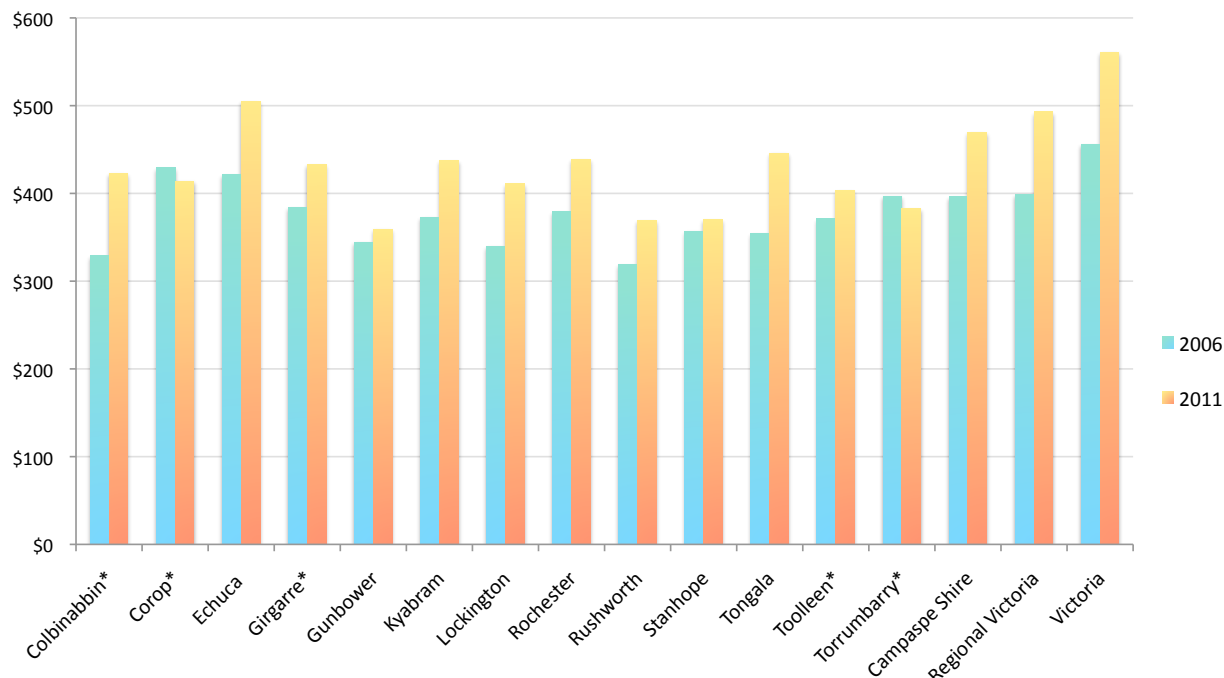
In 2011, the median total personal weekly income for Campaspe residents (\$469) was lower than the regional Victoria average (\$493). Within the PCP region, many towns also had a lower total personal weekly income than Victoria. Gunbower (\$359) had the lowest, followed by Rushworth (\$369) then Stanhope (\$370).

**Figure 50. Median Total Personal Weekly Income by Town - Table (2006 and 2011)**

Location	2006	2011
Colbinabbin*	\$329	\$423
Corop*	\$429	\$414
Echuca	\$421	\$505
Girgarre*	\$384	\$433
Gunbower	\$344	\$359
Kyabram	\$373	\$438
Lockington	\$340	\$411
Rochester	\$379	\$439
Rushworth	\$319	\$369
Stanhope	\$357	\$370
Tongala	\$354	\$446
Toolleen*	\$371	\$403
Torrumbarry*	\$397	\$383
Campaspe Shire	\$396	\$469
Regional Victoria	\$399	\$493
<b>Victoria</b>	<b>\$456</b>	<b>\$561</b>

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS 2012 \*Data for these locations is based on a State Suburb boundary (ABS) and this takes in a wide region around the town. Many State Suburb boundaries have changed considerably between 2006 and 2011. Therefore comparisons between 2006 and 2011 figures should be made with caution.

**Figure 51. Median Total Personal Weekly Income by Town – Chart (2006 and 2011)**



2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS 2012 \*Refer to data note in table above

## Gross Household Weekly Income

In 2011, compared to regional Victoria, Campaspe had a higher proportion of households that earned a weekly income of between \$1 and \$199, and between \$300 and \$999; while it had a lower proportion of households with a weekly income of \$1,500 or more. Comparison to 2006 figures (for usual resident population) was not possible as income brackets have been changed.

**Figure 52. Gross Household Weekly Income - Table (2011)**

	Campaspe		Regional Victoria	Victoria
	No	%	%	%
Negative/Nil income	187	1.4%	1.2%	1.6%
\$1-\$199	262	1.9%	1.8%	1.6%
\$200-\$299	469	3.4%	3.5%	2.7%
\$300-\$399	1,227	8.9%	8.5%	6.2%
\$400-\$599	1,832	13.3%	12.4%	9.3%
\$600-\$799	1,554	11.3%	10.6%	8.5%
\$800-\$999	1,395	10.1%	9.4%	8.0%
\$1,000-\$1,249	1,166	8.5%	8.5%	8.2%
\$1,250-\$1,499	1,036	7.5%	7.5%	7.4%
\$1,500-\$1,999	1,379	10.0%	10.3%	11.4%
\$2,000-\$2,499	850	6.2%	6.8%	8.2%
\$2,500-\$2,999	462	3.4%	4.5%	7.4%
\$3,000-\$3,499	266	1.9%	2.5%	4.3%
\$3,500-\$3,999	78	0.6%	0.9%	2.0%
\$4,000 or more	120	0.9%	1.2%	3.1%
Partial income stated	1,003	7.3%	7.3%	7.7%
All incomes not stated	513	3.7%	3.4%	2.8%
<b>Total</b>	<b>13,799</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>

2011 Census of Population and Housing, Basic Community Profiles, ABS 2012



## Median Household Weekly Income

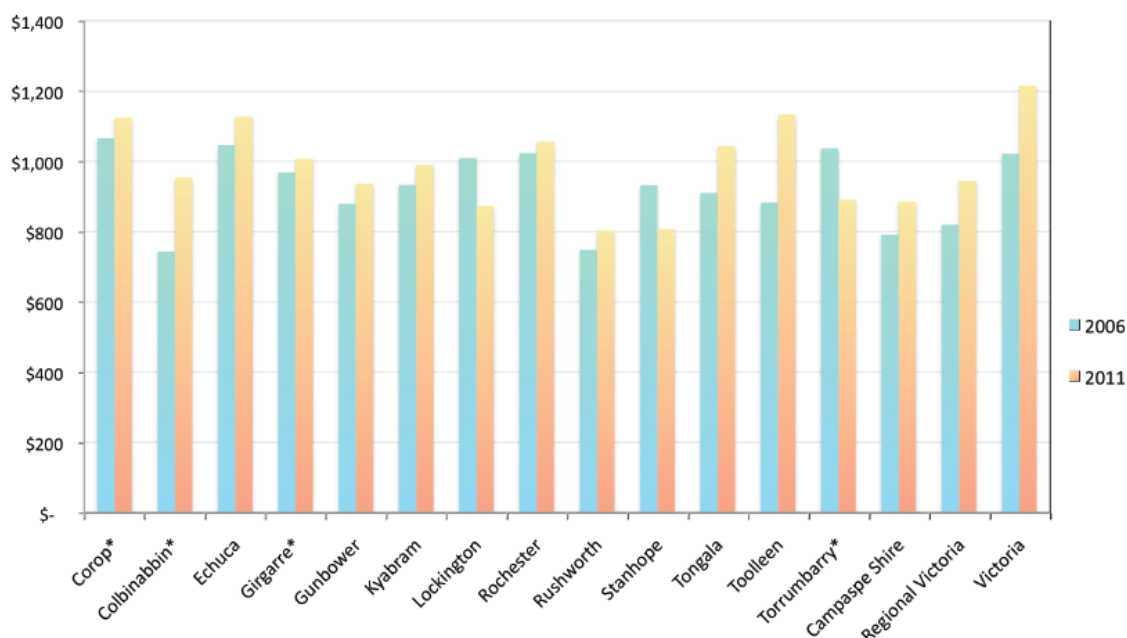
In 2011, compared to regional Victoria (\$945), Campaspe (\$886) had a lower median household income. Within the PCP region, the following towns also had a lower median household weekly income when compared to regional Victoria: Gunbower (\$937), Lockington (\$873), Rushworth (\$804), Stanhope (\$808), and Torrumbarry\* (\$891). Rushworth, followed by Stanhope, had the lowest median household income; while Toolleen (\$1,134), followed by Echuca (\$1,128) had the highest.

**Figure 53. Median Household Weekly Income - Table (2006 and 2011)**

Location	2006	2011
Corop*	\$1,066	\$1,125
Colbinabbin*	\$743	\$955
Echuca	\$1,046	\$1,128
Girgarre*	\$969	\$1,007
Gunbower	\$880	\$937
Kyabram	\$934	\$991
Lockington	\$1,010	\$873
Rochester	\$1,024	\$1,057
Rushworth	\$748	\$804
Stanhope	\$933	\$808
Tongala	\$911	\$1,044
Toolleen	\$883	\$1,134
Torrumbarry*	\$1,037	\$891
Campaspe Shire	\$791	\$886
Regional Victoria	\$820	\$945
<b>Victoria</b>	<b>\$1,022</b>	<b>\$1,216</b>

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS 2012 \*Data for these locations is based on a State Suburb boundary (ABS) and this takes in a wide region around the town. Many State Suburb boundaries have changed considerably between 2006 and 2011. Therefore comparisons between 2006 and 2011 figures should be made with caution.

**Figure 54. Median Household Weekly Income - Chart (2006 and 2011)**



2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS 2012 \*Data for these locations is based on a State Suburb boundary (ABS) and this takes in a wide region around the town. Many State Suburb boundaries have changed considerably between 2006 and 2011. Therefore comparisons between 2006 and 2011 figures should be made with caution.

## Total Personal Weekly Income by Indigenous Status

The 2011 median total personal income for Campaspe Indigenous residents was \$366, which was lower than the Campaspe total population median (\$398) and lower than the Victorian Indigenous figure (\$390). Between 2006 and 2011, the median total personal income increased by \$77 for the Campaspe Indigenous population and \$71 for the total Campaspe population.

**Figure 55. Median Total Personal Weekly Income (2006 and 2011)**

Campaspe				Victoria			
2006		2011		2006		2011	
Indigenous Population	Total Population	Indigenous Population	Total Population	Indigenous Population	Total Population	Indigenous Population	Total Population
\$289	\$398	\$366	\$469	\$332	\$456	\$390	\$561

2006 and 2011 Census of Population and Housing, Indigenous Profiles, ABS

## Median Household Weekly Income – by Indigenous Status

In 2011, the median household income for Campaspe Shire's Indigenous population was \$689, which was substantially lower than the median for the total population in Campaspe (\$886) and the Victorian Indigenous population (\$962). Between 2006 and 2011, the median household income increased by \$90 for the Campaspe Indigenous population and \$95 for the total Campaspe population.

**Figure 56. Median Household Income (2006 and 2011)**

Campaspe				Victoria			
2006		2011		2006		2011	
Indigenous Population	Total Population	Indigenous Population	Total Population	Indigenous Population	Total Population	Indigenous Population	Total Population
\$599	\$791	\$689	\$886	\$763	\$1,022	\$962	\$1,216

2006 and 2011 Census of Population and Housing, Indigenous Profiles, ABS

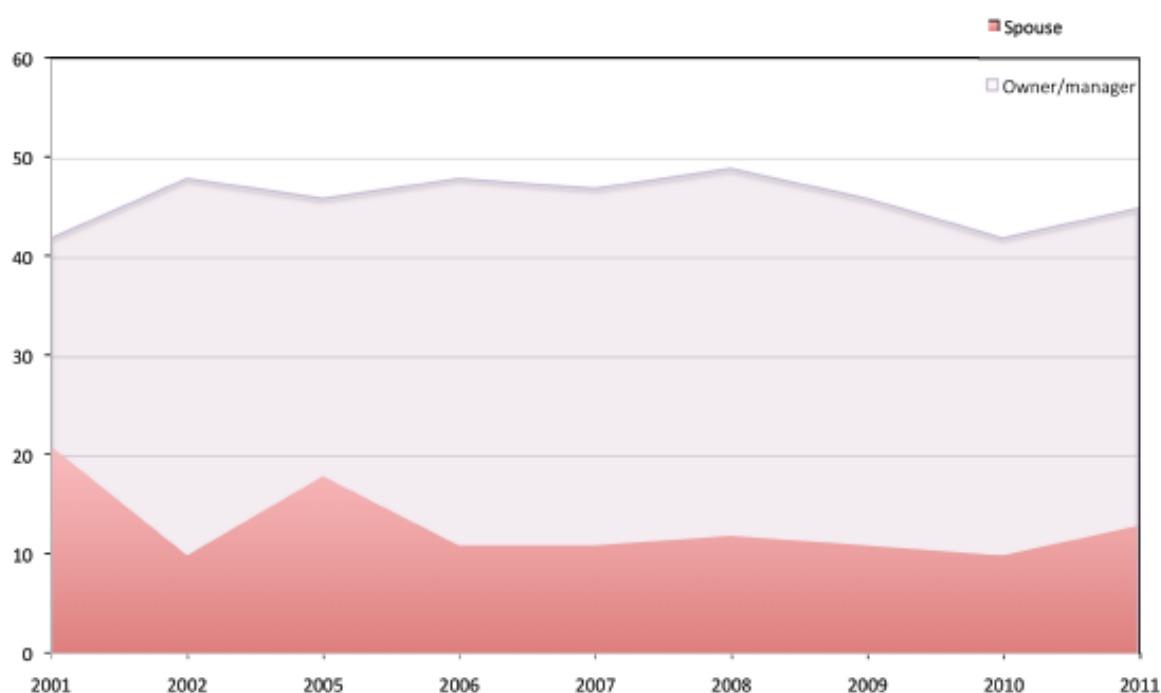
## Off Farm Income

Rural change has, for many farms, meant that a supplementary income must be sought.

The Australian Bureau of Agricultural and Resource Economics (ABARE), an Australian government economic research agency, undertakes two annual farm surveys: The Australian Agricultural and Grazing Industries Survey (AAGIS) and the Australian Dairy Industry Survey (ADIS). Information is gathered based on regions. Most of the Campaspe PCP region falls into the ABARE Mallee Region. As only a small number of farms out of the total number of farms in a particular industry are surveyed, the results provide estimates only.

Data from the Australian Agricultural and Grazing Industries Survey (AAGIS) indicates the total hours worked on farm by the owner/manager have reduced since 2002, after peaking in 2008. Hours worked on farm for spouses increased in 2011. Regional data is not currently available from the Australian Dairy Industry Survey (ADIS).

**Figure 57. Average Weekly Hours Worked Off Farm (2001 to 2011)\***

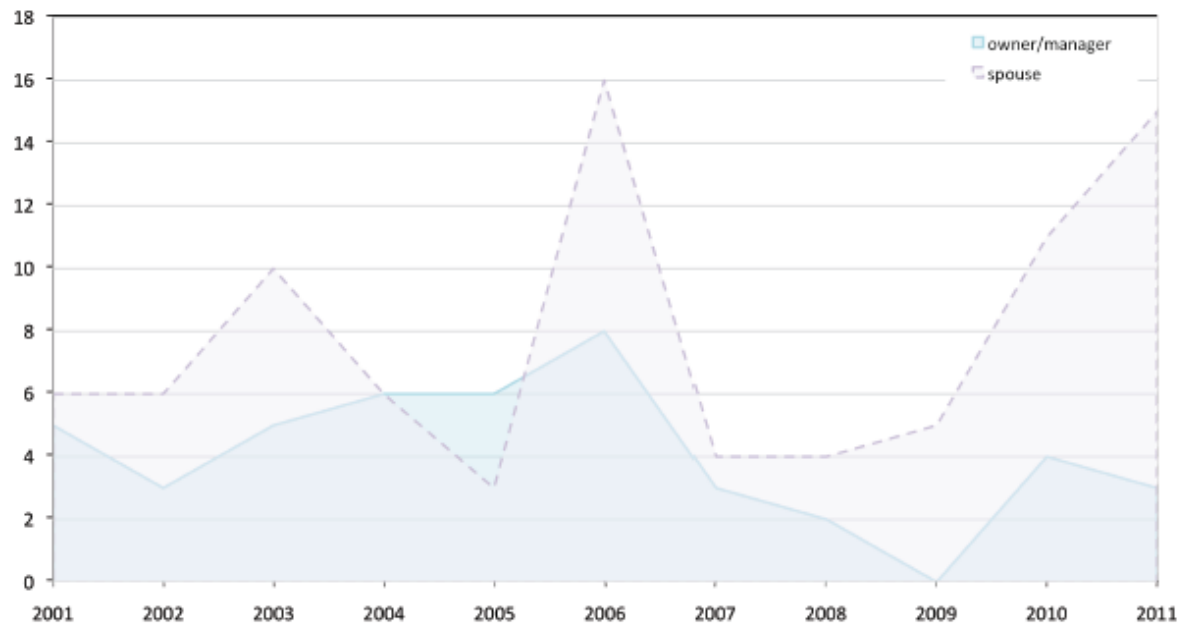


[www.abare.gov.au](http://www.abare.gov.au) \*Please note that figures for 2003 and 2004 were not available.

Between 2001 and 2011, the average weekly hours worked off farm by farm owners/managers have fluctuated but have generally decreased since 2006. In 2011, the average weekly number of hours worked off farm by owners/managers was three hours.

Between 2001 and 2011, the average weekly hours worked off farm for spouses has fluctuated but the number of hours have steadily increased between 2008 and 2011. In 2011, the average weekly number of hours worked off farm by spouses was 15 hours.

**Figure 58. Average Weekly Hours Worked Off Farm (2001 to 2011)**



[www.abare.gov.au](http://www.abare.gov.au) 2011

## Labour Force Participation

The labour force comprises those people who are employed, together with those people who are unemployed but seeking employment. In 2011, compared to Victoria (72%), Campaspe (72%) had the same proportion of population aged 15-64 years that was participating in the labour force. Compared to Victoria, Campaspe had a slightly lower proportion of population aged 15 to 64 years that was working full-time and a slightly higher proportion that was working part-time. Compared to Victoria, Campaspe had the same rate of unemployed persons seeking full-time work and a slightly lower rate of unemployed persons seeking part-time work. Please refer to the unemployment section in this profile for unemployment figures at the SLA level.

Between 2006 and 2011, the proportion of Campaspe population aged 15-64 years working full-time decreased, while the proportion working part-time increased. Labour force participation did not change between 2006 and 2011, nor did unemployment figures.

**Figure 59. Labour Force Participation\*, Persons Aged 15 to 64 Years (2006 and 2011)**

Labour force status	Campaspe				Victoria	
	2006	2006	2011	2011	2006	2011
	No.	%	No.	%	%	%
Worked full-time (a)	9,647	43%	9,220	42%	43%	43%
Worked part-time	4,564	20%	4,816	22%	20%	21%
Employed, away from	713	3%	710	3%	2%	3%
Hours worked not stated	411	2%	376	2%	2%	1%
<b>Total</b>	<b>15,335</b>	<b>69%</b>	<b>15,122</b>	<b>69%</b>	<b>67%</b>	<b>68%</b>
Unemployed, looking for:						
Full-time work	511	2%	483	2%	2%	2%
Part-time work	265	1%	256	1%	2%	2%
<b>Total</b>	<b>776</b>	<b>3%</b>	<b>739</b>	<b>3%</b>	<b>4%</b>	<b>4%</b>
<b>Total labour force*</b>	<b>16,111</b>	<b>72%</b>	<b>15,861</b>	<b>72%</b>	<b>71%</b>	<b>72%</b>
Not in the labour force	5,299	24%	5,273	24%	24%	23%
Labour force status not stated	866	4%	906	4%	5%	5%
<b>Total</b>	<b>22,276</b>	<b>100%</b>	<b>22,040</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS 2012 \*Employed or looking for employment. (a) 'Employed, worked full-time' is defined as having worked 35 hours or more in all jobs during the week prior to Census Night. (b) Comprises employed persons who did not work any hours in the week prior to Census Night.

## Labour Force Participation by Indigenous Status

In 2011, Campaspe Indigenous persons aged 15 years and over were more likely to be not participating in the labour force (48%) than Campaspe non-Indigenous persons (38%) or the Victorian Indigenous population average (42% and 14.1%).

**Figure 60. Labour Force Participation\* by Indigenous Status (2011)**

Labour force status	Campaspe				Victoria	
	Indigenous population		Non-Indigenous population		Indigenous population	Non-Indigenous population
	No.	%	No.	%	%	%
Pop. aged ≥ 15 years	506	100%	27,365	100%	100%	100%
Employed	200	40%	15,602	57%	46%	61%
<b>Total labour force</b>	<b>236</b>	<b>47%</b>	<b>16,304</b>	<b>60%</b>	<b>53%</b>	<b>64%</b>
Not in the labour force	241	48%	10,507	38%	42%	34%
Not stated	30	6%	554	2%	5%	2%
Unemployment#	**	15.3%	**	4.3%	14.1%	5.4%

2011 Census of Population and Housing, Indigenous Profiles, ABS 2012 \*Employed or looking for employment \*\* Figure not provided # Unemployed persons as % of total labour force.

## Occupation

In 2011, compared to regional Victoria, Campaspe had a much higher proportion of employed persons occupied as managers and as labourers and it also had a higher proportion of machinery operators and drivers. Campaspe had a lower proportion of professionals, clerical and administrative workers and sales workers. Between 2006 and 2011, the proportion of Campaspe employed persons who were managers or who were labourers decreased, while the proportion of professionals, technicians and trades workers, community and personal service workers, clerical and administrative workers and machinery operators and drivers all increased.

**Figure 61. Occupation - Table (2006 and 2011)**

Occupation		Campaspe		Regional Victoria	
		2006	2011	2006	2011
<b>Managers</b>	No.	3,478	2,950	-	
	%	22%	19%	16%	15%
<b>Professionals</b>	No.	1,933	2,089	-	
	%	12%	13%	16%	17%
<b>Technicians &amp; trades workers</b>	No.	2,310	2,340	-	
	%	14%	15%	15%	15%
<b>Community &amp; personal service workers</b>	No.	1,303	1,527	-	
	%	8%	10%	9%	10%
<b>Clerical and admin. workers</b>	No.	1,633	1,675	-	
	%	10%	11%	12%	12%
<b>Sales workers</b>	No.	1,383	1,485	-	
	%	9%	9%	10%	10%
<b>Machinery operators &amp; drivers</b>	No.	1,168	1,217	-	
	%	7%	8%	7%	7%
<b>Labourers</b>	No.	2,487	2,352	-	
	%	16%	15%	13%	12%
<b>Total</b>	No	15,958	15,942	-	
	%	100%	100%	100%	100%

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS 2012

## Industry of Employment

In 2011, Campaspe workers were most likely to be employed in the following industry sectors: manufacturing (15%), agriculture, forestry and fishing (13%), health care and social assistance (12%), and retail trade (11%). Compared to regional Victoria, a much higher proportion of the labour force worked in the agriculture, forestry and fishing; and manufacturing sectors.

**Figure 62. Industry of Employment (2011)**

Sector	Campaspe		Regional Victoria
Agriculture, forestry and fishing	2,057	13%	8%
Mining	74	0%	1%
Manufacturing	2,314	15%	10%
Electricity, gas, water and waste services	205	1%	2%
Construction	1,267	8%	9%
Wholesale trade	432	3%	3%
Retail trade	1,822	11%	12%
Accommodation and food services	1,056	7%	7%
Transport, postal and warehousing	621	4%	4%
Information media and telecommunications	101	1%	1%
Financial and insurance services	263	2%	2%
Rental, hiring and real estate services	146	1%	1%
Professional, scientific and technical services	493	3%	4%
Administrative and support services	270	2%	3%
Public administration and safety	608	4%	6%
Education and training	1,082	7%	8%
Health care and social assistance	1,928	12%	13%
Arts and recreation services	194	1%	1%
Other services	613	4%	4%
Inadequately described/Not stated	395	2%	2%
<b>Total</b>	<b>15,941</b>	<b>100%</b>	<b>100%</b>

2011 Census of Population and Housing, Basic Community Profiles, ABS 2012

## Businesses

In 2014, there were 4,161 businesses registered in the Campaspe PCP region. Between, 2012 and 2014, the number of registered businesses decreased by 2.0%, which was a greater decrease than the regional Victoria average (1.6% decrease) and the state average (0.9% decrease).

Between 2012 and 2014, the number of business entries and exits in Campaspe PCP region decreased by a greater proportion than the state average.

In 2014, the agriculture, forestry and fishing industry sector, followed by the construction industry sector, accounted for the greatest number of businesses in the Campaspe PCP region.

**Figure 63. Number of Businesses (2012 and 2014)**

Location	2012	2014	No	Change %
Campaspe	4,246	4,161	-85	-2.0%
Regional Victoria	132,124	129,958	-2,166	-1.6%
<b>Victoria</b>	<b>551,185</b>	<b>545,962</b>	<b>-5,223</b>	<b>-0.9%</b>

ABS National Regional Profiles 2010-14, ABS 2016

**Figure 64. Business Entries and Exits (2012 and 2014)**

Location	Business entries			Business exits		
	2012	2014	Change	2012	2014	Change
Campaspe	418	389	-7%	339	327	-4%
Regional Victoria	14,281	13,419	-6%	13,944	13,065	-6%
<b>Victoria</b>	<b>75,939</b>	<b>73,558</b>	<b>-3%</b>	<b>68,609</b>	<b>66,404</b>	<b>-3%</b>

ABS National Regional Profiles 2010-14, ABS 2016

**Figure 65. No. of Businesses by Industry Sector (2014)**

	Regional Victoria	Victoria
Agriculture, Forestry and Fishing	1,442	42,333
Mining	5	870
Manufacturing	164	23,219
Electricity, Gas, Water & Waste Services	9	1,595
Construction	594	89,169
Wholesale Trade	91	22,206
Retail Trade	293	36,143
Accommodation & Food Service	161	22,991
Transport, Postal and Warehousing	208	32,732
Information Media & Telecommunications	11	5,114
Financial & Insurance Services	217	46,691
Rental, Hiring, & Real Estate Services	310	57,965
Professional Scientific & Technical Services	176	67,813
Administrative & Support Services	70	19,997
Public Administration & Safety	8	1,703
Education & Training	28	7,023
Health Care & Social Assistance	122	28,961
Arts & Recreation Services	37	7,285

ABS National Regional Profiles 2010-14, ABS 2016



## Unemployment

In September 2016, there were 976 unemployed people in the Campaspe PCP region, representing an overall unemployment rate of 5.0%. This rate was lower than the regional Victoria and Victoria rates. Within the region, the highest unemployment rate was recorded in Echuca SA2; however all SA2 regions in the Campaspe catchment had a lower unemployment rate than both regional Victoria and Victoria.

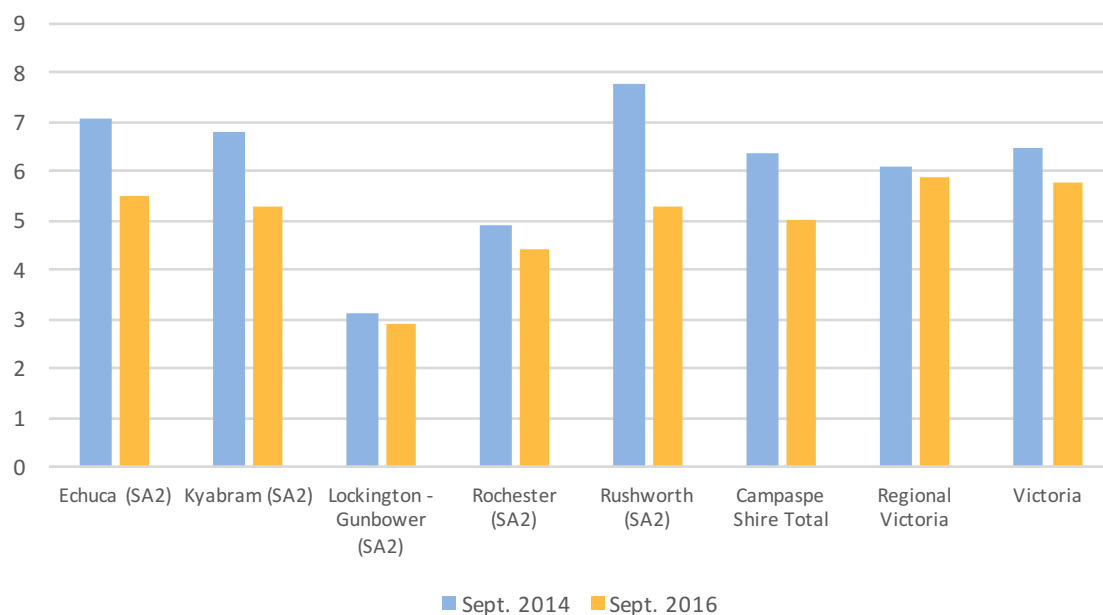
Between September 2014 and September 2016, the unemployment rate decreased in the Campaspe LGA as well as in each of the region's SA2 regions.

**Figure 66. Unemployment (September 2014 and 2016 Quarters)**

Location	Unemployment - no.		Unemployment - rate	
	Sept. 2014	Sept. 2016	Sept. 2014	Sept. 2016
Echuca (SA2)	427	493	7.1	5.5
Kyabram (SA2)	301	337	6.8	5.3
Lockington - Gunbower (SA2)	60	60	3.1	2.9
Rochester (SA2)	95	89	4.9	4.4
Rushworth (SA2)	123	145	7.8	5.3
<b>Campaspe Shire Total</b>	<b>1,117</b>	<b>976</b>	<b>6.4</b>	<b>5.0</b>
Regional Victoria	42,700	42,100	6.1	5.9
<b>Victoria</b>	<b>198,000</b>	<b>185,800</b>	<b>6.5</b>	<b>5.8</b>

Small Area Labour Markets - September quarter 2014 and 2016 [www.employment.gov.au](http://www.employment.gov.au)

**Figure 67. Unemployment - Chart (September 2014 and 2016 Quarters)**



Small Area Labour Markets - September quarter 2014 and 2016 [www.employment.gov.au](http://www.employment.gov.au)

# Education

## School Completion

In 2011, compared to regional Victoria (33.7% and 40.2%), males and females aged over 15 years from Campaspe (24.3% and 32.6%) were significantly less likely to have completed year 12 or equivalent. Campaspe males and females were also more likely to have finished school in years 8 through to 11. Campaspe females were significantly more likely than males to have completed Year 12.

Between 2006 and 2011, the proportion of population aged 15 years and over that had completed Year 12 or equivalent increased by 2.9% for males and more than 4.3% for females and both of these increases were less than the regional Victoria average increases.

**Figure 68. Highest year of School Completed by Sex, Persons Aged 15 Years And Over (2006 and 2011)**

Year Level		Campaspe		Regional Victoria	Victoria	Campaspe		Regional Victoria	Victoria
		Males				Females			
Year		No.	%	%	%	No.	%	%	%
Year 12 or equivalent	2006	2,997	21.4%	28.9%	<b>42.9%</b>	4,093	28.3%	34.0%	<b>45.0%</b>
	2011	3,277	24.3%	33.7%	<b>50.3%</b>	4,629	32.6%	40.2%	<b>53.1%</b>
Year 11 or equivalent	2006	2,442	17.4%	17.4%	<b>14.1%</b>	2,710	18.8%	17.2%	<b>13.5%</b>
	2011	2,386	17.7%	16.9%	<b>12.7%</b>	2,563	18.1%	16.1%	<b>11.8%</b>
Year 10 or equivalent	2006	3,563	25.5%	22.3%	<b>16.7%</b>	3,128	21.7%	19.6%	<b>15.0%</b>
	2011	3,476	25.7%	21.6%	<b>15.2%</b>	2,991	21.1%	18.4%	<b>13.2%</b>
Year 9 or equivalent	2006	1,925	13.8%	11.1%	<b>7.6%</b>	1,565	10.8%	9.6%	<b>6.9%</b>
	2011	1,682	12.4%	9.7%	<b>6.1%</b>	1,344	9.5%	8.2%	<b>5.5%</b>
Year 8 or below	2006	1,758	12.6%	10.3%	<b>7.9%</b>	1,642	11.4%	9.9%	<b>8.9%</b>
	2011	1,438	10.6%	8.6%	<b>6.4%</b>	1,314	9.3%	8.3%	<b>7.3%</b>
Did not go to school	2006	65	0.5%	0.0%	<b>0.9%</b>	52	0.4%	0.0%	<b>0.0%</b>
	2011	59	0.4%	0.5%	<b>0.9%</b>	48	0.3%	0.5%	<b>1.2%</b>
Not stated	2006	1,245	8.9%	0.5%	<b>9.8%</b>	1,252	8.7%	0.5%	<b>1.2%</b>
	2011	1,195	8.8%	9.0%	<b>8.4%</b>	1,304	9.2%	8.4%	<b>7.9%</b>
Total	2006	13,995	100%	100%	<b>100%</b>	14,442	100%	100%	<b>100%</b>
	2011	13,513	100%	100%	<b>100%</b>	14,193	100%	100%	<b>100%</b>

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS

## Highest Year of School Completed by Indigenous Status

In 2011, Campaspe Indigenous population aged 15 years and over (14.7%) was significantly less likely to have completed Year 12 or equivalent, compared to the Campaspe total population (28.5%) and compared to the Victorian Indigenous population (29.1%). Campaspe Indigenous population aged 15 years and over was more likely to have completed school in Year 11, 10, 9 or 8 and to not have attended school.

Between 2006 and 2011, the proportion of Campaspe Indigenous population aged 15 years and over that had completed Year 12 or equivalent increased by a small amount. This increase was much lower than the increase seen in the total Victorian Indigenous population.

**Figure 69. Highest Year Of School Completed\* by Indigenous Status (2006 and 2011)**

Year Level	Campaspe			Victoria	
	Year	Indigenous Population	Total Population	Indigenous Population	Total Population
Year 12 or equivalent	2006	12.5%	24.9%	<b>22.8%</b>	<b>44.0%</b>
	2011	<b>14.7%</b>	28.5%	<b>29.1%</b>	<b>51.7%</b>
Year 11 or equivalent	2006	14.5%	18.1%	<b>14.4%</b>	<b>13.8%</b>
	2011	15.2%	17.9%	<b>14.2%</b>	<b>12.2%</b>
Year 10 or equivalent	2006	24.1%	23.5%	<b>23.8%</b>	<b>15.8%</b>
	2011	26.3%	23.3%	<b>23.3%</b>	<b>14.1%</b>
Year 9 or equivalent	2006	18.7%	12.3%	<b>13.7%</b>	<b>7.2%</b>
	2011	17.9%	10.9%	<b>12.1%</b>	<b>5.8%</b>
Year 8 or below	2006	14.3%	12.0%	<b>11.4%</b>	<b>8.4%</b>
	2011	13.7%	9.9%	<b>9.7%</b>	<b>6.9%</b>
Did not go to school	2006	1.2%	0.4%	<b>1.7%</b>	<b>1.1%</b>
	2011	1.7%	0.4%	<b>1.2%</b>	<b>1.1%</b>
Not stated	2006	14.7%	8.8%	<b>12.2%</b>	<b>9.6%</b>
	2011	10.5%	9.0%	<b>10.4%</b>	<b>8.2%</b>
Total	2006	100.0%	100.0%	<b>100.0%</b>	<b>100.0%</b>
	2011	100.0%	100.0%	<b>100.0%</b>	<b>100.0%</b>
Total number	2006	407	28,437	<b>19,019</b>	<b>3,982,035</b>
	2011	475	27,706	<b>22,790</b>	<b>4,159,340</b>

2006 and 2011 Census of Population and Housing, Indigenous Profiles, ABS \* population aged 15yrs and over no longer attending school

## Tertiary Qualifications

In 2011, compared to regional Victoria and Victoria, Campaspe had a lower proportion of males and females (particularly males) aged 15 years or over with a non school qualification, who had a bachelor degree, a graduate diploma or certificate, or a post graduate degree. Campaspe females were significantly more likely than males to have a bachelor degree (more than twice as likely) or an advanced diploma/diploma.

Compared to regional Victoria and Victoria, Campaspe males and females (particularly males) aged 15 years or over with a non-school qualification, were more likely to have a certificate level qualification. Campaspe males were significantly more likely than females to have this level of qualification.

Between 2006 and 2011, the proportion of Campaspe males with a non school qualification who had a post graduate degree, graduate diploma or graduate certificate, a bachelor degree or a certificate level qualification did not change; while the proportion with an advanced diploma or diploma increased slightly. Between 2006 and 2011, the proportion of Campaspe females with a non school qualification who had a post graduate degree, bachelor degree, advanced diploma or diploma, or who had a certificate level qualification increased; while the proportion who had a graduate diploma or graduate certificate decreased slightly.

**Figure 70. Non School Qualifications, Persons Aged ≥15 Years With a Qualification (2006 and 2011)**

Qualification	Males						Females					
	Campaspe		Regional Victoria		Victoria		Campaspe		Regional Victoria		Victoria	
	2006	2011	2006	2011	2006	2011	2006	2011	2006	2011	2006	2011
	%	%	%	%	%	%	%	%	%	%	%	%
Postgraduate Degree	1%	1%	3%	3%	6%	7%	1%	2%	2%	3%	5%	7%
Graduate Diploma & Graduate Certificate	2%	2%	2%	2%	3%	3%	4%	3%	4%	5%	5%	5%
Bachelor Degree	9%	9%	12%	13%	21%	23%	19%	20%	21%	22%	28%	30%
Advanced Diploma and Diploma	8%	9%	10%	11%	12%	13%	15%	16%	16%	17%	16%	17%
Certificate Level	57%	57%	50%	51%	38%	37%	29%	31%	26%	29%	20%	21%
Inadequately described	2%	1%	2%	1%	2%	2%	3%	3%	3%	3%	3%	2%
Not stated	21%	20%	21%	18%	19%	16%	28%	25%	27%	21%	24%	18%
<b>Total</b>	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
<b>Total No.</b>	6,553	7,057	na	na	na	na	5,781	6,704	na	na	na	na

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS 2012

## Non School Qualification – by Indigenous Status

In 2011, compared to the total Campaspe population aged 15 years and over and the Victorian Indigenous population in this age group, the Campaspe Indigenous population aged 15 years and over was less likely to have a postgraduate degree, graduate diploma or graduate certificate, bachelor degree, advanced diploma or diploma, or to have a certificate III level qualification. Compared to the Victorian Indigenous population aged 15 years and over.

Between 2006 and 2011, the proportion of Campaspe Indigenous population with a bachelor degree decreased slightly, while the proportion with an advanced diploma or diploma increased slightly.

**Figure 71. Non-School Qualification by Indigenous Status (2006 and 2011)**

Qualification	Campaspe				Victoria			
	Indigenous Population 2006	Indigenous Population 2011	Total Population 2006	Total Population 2011	Indigenous Population 2006	Indigenous Population 2011	Total Population 2006	Total Population 2011
Pop 15 yrs and over	406	506	28,437	29,120	19,019	24,607	3,982,036	4,355,245
Postgraduate Degree Level	**	0%	1%	1%	1%	1%	3%	4%
Grad. Diploma & Grad. Certificate	0%	**	1%	1%	1%	1%	2%	2%
Bachelor Degree	3%	2%	6%	7%	4%	5%	13%	15%
Adv. Diploma & Diploma Level	3%	4%	5%	6%	4%	5%	7%	8%
Certificate II	#	**	#	1%	#	2%	#	1%
Certificate III and over	#	15%	#	19%	#	16%	#	14%

2006 and 2011 Census of Population and Housing, Indigenous Profiles, ABS 2012 \*\* Actual number was randomised by the ABS and was too small to be statistically reliable. # Figure from data source not comparable to 2011

## Retention Rates

The most recent school apparent retention figures available on the Department of Education website are for February 2011. The apparent retention rate for schools of the Loddon Mallee Region in February 2011 was 75.7% for years 10-12, and 72.6% for years 7 – 12. Both of these rates were lower than the Victorian average. Between February 2008 and February 2011, the apparent retention rate for Loddon Mallee schools decreased for years 10 – 12 and for years 7 – 12.

**Figure 72. School Apparent Retention Rates (February 2011)**

Region	February 2011				February 2008			
	Schools	Students (FTE)	ARR		Schools	Students (FTE)	ARR	
			10-12	7-12			10-12	7-12
Grampians	129	25,051.4	73.9%	69.6%	131	25,556.1	71.6%	66.2%
<b>Loddon Mallee</b>	<b>156</b>	<b>37,238.2</b>	<b>75.7%</b>	<b>72.6%</b>	<b>166</b>	<b>39,562.8</b>	<b>78.0%</b>	<b>72.8%</b>
Hume	155	30,311.5	71.1%	64.3%	162	32,468.7	67.6%	61.4%
Gippsland	150	29,356.9	77.0%	75.0%	151	29,843.2	69.9%	64.1%
Metropolitan	820	381,378.7	87.0%	88.9%	837	370,430.1	83.3%	84.1%
Non-metropolitan	719	160,613.3	74.0%	70.4%	750	167,686.1	72.2%	67.0%
<b>Total Vic regions</b>	<b>1,539</b>	<b>541,992.0</b>	<b>82.8%</b>	<b>82.6%</b>	<b>1587</b>	<b>538,116.2</b>	<b>79.7%</b>	<b>78.2%</b>

www.education.vic.gov.au School census July 2011 Created using figures from the Adolescent Community Profile for Campaspe Shire, DEECD 2010

# Access to Health Services

## Health Services Located in PCP Region

In 2014, compared to Victoria (1.2), Campaspe had the same rate of general practitioners (GPs) per 1,000 population.

In 2015, compared to Victoria, Campaspe had a higher rate of:

- GP clinics per population (0.5 vs 0.3)
- Allied health sites per population (1.0 vs 0.5), and
- Pharmacies per population (0.3 vs 0.2).

However, compared to Victoria (0.3), Campaspe (0.2) had a slightly lower rate of dental services per population.

**Figure 73. GPs Per Population (2014)**

Location	Rate*
Campaspe	1.2
<b>Victoria</b>	<b>1.2</b>

2015 LGA Profiles, Department of Health & Human Services Victoria, November 2016 \* Age standardised rate per 1,000 population.

**Figure 74. General Practice Clinics Per Population (2015)**

Location	Rate*
Campaspe	0.5
<b>Victoria</b>	<b>0.3</b>

2015 LGA Profiles, Department of Health & Human Services Victoria, November 2016 \* Age standardised rate per 1,000 population.

**Figure 75. Allied Health# Sites Per Population (2015)**

Location	Rate*
Campaspe	1.0
<b>Victoria</b>	<b>0.5</b>

2015 LGA Profiles, Department of Health & Human Services Victoria, November 2016 \* Age standardised rate per 1,000 population.

# Allied health services include services such as audiology, chiropractic, physiotherapy and podiatry, but exclude complementary therapies such as homeopathy and naturopathy.

**Figure 76. Dental Services Per Population (2015)**

Location	Rate*
Campaspe	0.2 ●
<b>Victoria</b>	<b>0.3</b>

2015 LGA Profiles, Department of Health & Human Services Victoria, November 2016 \* Age standardised rate per 1,000 population.

**Figure 77. Pharmacies Per Population (2015)**

Location	Rate*
Campaspe	0.3
<b>Victoria</b>	<b>0.2</b>

2015 LGA Profiles, Department of Health & Human Services Victoria, November 2016 \* Age standardised rate per 1,000 population.

## Utilisation of Health Services

In 2013-14, compared to Victoria, Campaspe had:

- A higher GP attendance rate per population (6,484 vs 5,889)
- A slightly higher proportion of male population that consulted a specialist (31.7% vs 30.9%)
- A lower proportion of female population that consulted a specialist (34.5% vs 37.6%)
- A lower proportion of GP attendances that were bulk-billed (78.9% vs 82.8%), and
- A lower proportion of specialist attendances that were bulk-billed (27.9% vs 30.4%).

In 2013-14, Campaspe had:

- A much higher rate of female GP attendances compared to male attendances (7,428 vs 5,546), and
- A higher proportion of females than males that had consulted a medical specialist (34.5% vs 31.7%).

**Figure 78. General Practitioner Attendance Rate\* by Sex (2013-14)**

Location	Males	Females	Persons*
Campaspe	5,546	7,428	6,484
<b>Victoria</b>	<b>5,019</b>	<b>6,741</b>	<b>5,889</b>

2015 LGA Profiles, Department of Health & Human Services Victoria, November 2016 \* Age standardised rate per 1,000 population.

**Figure 79. Proportion of Population that had Consulted a Specialist - by Sex (2013-14)**

Location	Males	Females	Persons*
Campaspe	31.7% ●	34.5%	33.1%
<b>Victoria</b>	<b>30.9%</b>	<b>37.6%</b>	<b>34.3%</b>

2015 LGA Profiles, Department of Health & Human Services Victoria, November 2016 \* Age standardised rate per 1,000 population.

**Figure 80. % of GP and Specialist Attendances Bulk-billed\* (2013-14)**

Location	GP	Specialist
Campaspe	78.9% ●	27.9% ●
<b>Victoria</b>	<b>82.8%</b>	<b>30.4%</b>

2015 LGA Profiles, Department of Health & Human Services Victoria, November 2016 \* Age standardised rate per 1,000 population.

In 2014-15, compared to Victoria, the Campaspe SA3 region population had a notably lower rate of:

- Allied health services delivered (204 vs 275) and Allied Mental Health services delivered (167 vs 233); and a lower rate of GP Mental Health services delivered (134 vs 143) per 1,000 population.
- Compared to Victoria, the Campaspe SA3 region population had a notably higher rate of: GP Chronic Disease services delivered (428 vs 269), GP Health Assessments delivered (67 vs 33), and Practice Nurse/Aboriginal Health Worker services delivered (75 vs 43) per 1,000 population.

**Figure 81. Other MBS Item Services Delivered\* (2014-15)**

Service	Campaspe SA3		Victoria	
	No.	Rate*	No.	Rate*
Allied Health	7,516	204	1,607,417	275
Allied Mental Health	6,177	167	1,361,394	233
GP Chronic Disease	15,772	428	1,572,639	269
GP Health Assessments	2,489	67	191,686	33
GP Mental Health	4,926	134	837,329	143
Practice Nurse/Aboriginal Health Worker	2,750	75	251,526	43

\*MBS data by Statistical Area 3 and MBS Item, for 2012-13 to 2014-15', Department of Health, Australian Government, 2016. \*Rate of services delivered per 1,000 persons based on the 2014 ERP NOTE: figures are for total services claimed through Medicare not individuals



# Health Behaviours

## Chronic Disease Risk Factors

### Smoking

In 2014, compared to Victoria (13.1%) and regional Victoria (15.5%), Campaspe (21.9%) had a notably higher proportion of population aged 18 years and over that were current smokers. Campaspe (19.4%) also had a much higher proportion of population that are daily smokers, compared to the Victorian average (9.8%) and regional Victoria average (12.6%).

Synthetic estimates based upon the Australian Health Survey 2011-12 indicate that Campaspe males (27.2 per 100) were much more likely to be current smokers than females (21.7 per 100); and the rates of male and female smokers were much higher than state averages and slightly higher than regional Victoria averages.

**Figure 82. Population# That are Current Smokers (%\*) (2014)**

Location	Current smoker <sup>(a)</sup>	Ex-smoker	Non-smoker
Campaspe	21.9 ●	23.2	54.0
Regional Victoria	15.5	25.9	57.8
<b>Victoria</b>	<b>13.1</b>	<b>24.8</b>	<b>61.5</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Modifiable risk factors contributing to chronic disease, State Government of Victoria, Melbourne \* Age standardised to 2011 Victorian population - per 100 persons aged 18 years and over. # Aged 18 yrs and over (a) A person who smoked daily or occasionally was categorised as a current smoker

**Figure 83. Current Smokers# - By Sex (synthetic prediction) (2011-12)**

Location	Males	Females
	Rate	Rate*
Campaspe	27.2 ●	21.7 ●
Regional Victoria	25.2	20.2
<b>Victoria</b>	<b>21.0</b>	<b>15.7</b>

Social Health Atlas of Australia, Victorian Local Government Areas, May 2016 release, PHIDU 2016 - based on results of the 2011-12 Australian Health Survey #Population aged 18 years and over \*Age Standardised rate per 100 persons aged 18 years and over.

**Figure 84. Population# That Are Daily Smokers (%\*) (2014)**

Location	Daily Smoker	Occasional Smoker
Campaspe	19.4 ●	**
Regional Victoria	12.6	2.9
<b>Victoria</b>	<b>9.8</b>	<b>3.4</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Modifiable risk factors contributing to chronic disease, State Government of Victoria, Melbourne \* Age Standardised rate per 100 persons aged 18 years and over.

Findings from the Victorian Population Health Survey 2014 indicate that across Victoria:

- Prevalence of smoking was significantly higher among men compared with women, and
- The proportion of current smokers was higher for adults living in rural areas (15.5 per cent) compared with metropolitan areas (13.1 per cent).

## Nutrition

"The 2013 Australian guidelines recommend a minimum daily vegetable intake of five and a half serves for men 18 years of age or 51–70 years of age, six serves for men 19–50 years of age and five serves for men 71 years of age or older. The recommended minimum daily vegetable intake for women 18 years of age or older is five serves, where a serve is defined as half a cup of cooked vegetables or a cup of green leafy or raw salad vegetables (NHMRC 2013)."

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Modifiable risk factors contributing to chronic disease

### Vegetable and Fruit Consumption

In 2014, compared with the Victorian average (7.4%), Campaspe (7.3%) had a similar proportion of population that consumed recommended minimum daily serves of vegetables (5). Compared with the Victorian average (47.8%), Campaspe (36.5%) had a notably lower proportion of population that consumed the recommended minimum daily serves of fruit (2).

**Figure 85. Serves of vegetables Consumed Each Day (%)# (2014)**

Location	< 1	1-2	3-4	5+
Campaspe	3.6*	61.1	27.5	7.3
Regional Victoria	4.6	56.6	28.4	9.0
<b>Victoria</b>	<b>5.8</b>	<b>59.1</b>	<b>26.2</b>	<b>7.4</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Modifiable risk factors contributing to chronic disease, State Government of Victoria, Melbourne. #Age standardised to 2011 Victorian population. \* Estimate has a relative standard error (RSE) of 25 - 50 per cent and should be interpreted with caution. \*\* RSE greater than, or equal to 50 per cent; point estimate (%) is unreliable, hence not reported

**Figure 86. Serves of Fruit Consumed Each Day (%)# (2014)**

Location	<2	>2
Campaspe	63.2	36.5 ●
Regional Victoria	51.7	47.4
<b>Victoria</b>	<b>51.2</b>	<b>47.8</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Modifiable risk factors contributing to chronic disease, State Government of Victoria, Melbourne. #Age standardised to 2011 Victorian population.

Findings from the Victorian Population Health Survey 2014 indicate that across Victoria:

- Females were much more likely to meet the daily vegetable consumption guidelines as well as the daily fruit consumption guidelines, compared with males, and
- Persons aged 55 years and over were more likely than younger persons to meet the daily vegetable consumption guidelines; while persons aged 65 years and over were more likely than younger persons to meet the daily fruit consumption guidelines.

### Sharing a Meal With Family

In 2011, compared to Victoria (65.5 per 100), Campaspe residents (71.5) were more likely to share a meal with family five or more days per week.

**Figure 87. Proportion of Population That Shares a Meal With Family 5 or More Days a Week ( )**

Campaspe	Victoria
71.5	65.5

VicHealth Indicators Survey 2011, VicHealth 2012

### Takeaway Meals and Snack Consumption

In 2014, a lower proportion of Campaspe population (10.4%) reported they never eat takeaway food or snacks compared to the regional Victoria (13.8%) and Victoria (16.6%) average. A higher proportion (79.7%) reported they eat takeaway meals or snacks up to once per week compared to regional Victoria (74.4%) and Victoria (71.2%) averages. Figures for more than once per week are not sufficiently reliable to enable meaningful comparison.

**Figure 88. Population Who Eat Takeaway Meals Or Snacks by Frequency (2014)**

Location	Never	0 to 1 Weekly	1 to 3 Weekly	>3 Weekly
Campaspe	10.4 ●	79.7	5.5*	**
Regional Victoria	13.8	74.4	8.8	2.5
<b>Victoria</b>	<b>16.6</b>	<b>71.2</b>	<b>9.9</b>	<b>1.9</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Modifiable risk factors contributing to chronic disease, State Government of Victoria, Melbourne. #Data were age-standardised to the 2011 Victorian population. \*RSE between 25 and 50 per cent; point estimate (%) should be interpreted with caution. \*\*RSE greater than, or equal to 50 per cent; point estimate (%) is unreliable, hence not reported

### Sugar-sweetened Soft Drink Consumption

The 2014 Victorian Population Health Survey defines sugar-sweetened soft drinks as "any beverage with added sugar, and includes carbonated drinks, flavoured mineral water, cordial, sports drinks and energy drinks. Ready-to-drink alcoholic beverages were also included as sugar-sweetened beverages because they are mixed with other flavours such as fruit juice or soft drink."

"Dissolved and invisible but not benign, the excess sugar intake from sugary drinks is contributing to many preventable diseases for Australians. A high intake of sugar-sweetened beverages is associated with poor health outcomes, such as increased risk of weight gain and tooth decay." - H30 Challenge, Switch to water for health, VicHealth, May 2015

In 2014, Campaspe had a much higher proportion of population (17.5%) that consumed sugar-sweetened soft drink on a daily basis compared to Victoria (11.2%). However, results from the 2011-12 Victorian Population Health Survey suggest that Campaspe (473 ml) daily consumers of sugar-sweetened soft drink drank a notably smaller quantity on average than the Victoria and regional Victoria averages (595ml and 649ml respectively).

**Figure 89. Proportion (%) of Persons That Consume Sugar-Sweetened Soft Drink Daily# (2014)**

Location	%
Campaspe	17.5 ●
Regional Victoria	13.8
<b>Victoria</b>	<b>11.2</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Modifiable risk factors contributing to chronic disease, State Government of Victoria, Melbourne. #Age standardised to 2011 Victorian population

**Figure 90. Mean no. of Millilitres Consumed Each Day by 'Daily' Consumers ‡# (2011-12)**

Location	Mean dailyml.
Campaspe	473
Regional Victoria	649
<b>Victoria</b>	<b>595</b>

Department of Health and Human Services 2014, Victorian Population Health Survey 2011-12, ‡Of sugar-sweetened soft drinks #Age standardised to 2011 Victorian population.

Findings from the Victorian Population Health Survey 2014 and 2011-12 indicate that across Victoria:

- Males were more than twice as likely than females to report they consumed sugar-sweetened soft drink daily
- Persons aged 25 to 34 years were most likely to report they consumed sugar-sweetened soft drink daily, and
- Persons living in regional Victoria were more likely to report they consumed sugar-sweetened soft drink daily compared to persons living in metropolitan Melbourne.

## Daily Water Intake

In 2011-12, Campaspe (1.4 litres) recorded a slightly higher average daily quantity of water consumed than the Victoria (1.3) or regional Victoria (1.2) average.

**Figure 91. Mean Quantity (Litres) of Water Consumed Each Day# (2011-12)**

Location	Litres
Campaspe	1.4
Regional Victoria	1.2
<b>Victoria</b>	<b>1.3</b>

Victoria Population Health Survey 2011-12, DoH 2014 #Age standardised to 2011 Victorian population.

State-wide findings from the Victorian Population Health Survey 2011-12 indicate that across Victoria:

- Males had a higher mean daily water intake compared to women
- Males and females aged 18-34 years had a significantly higher mean daily intake of water compared with all Victorian males and females, and
- Males and females aged 55 years or over had a significantly lower mean daily intake of water compared with the means for all Victorian males and females.

**Figure 92. Water Consumption (2015)**

Location	Population who consume no water per day (%)	Average number of cups of water consumed per day
Campaspe	7.3 ●	5.5
Regional Victoria	3.8	5.2
<b>Victoria</b>	<b>3.1</b>	<b>5.4</b>

VicHealth Indicators Survey 2015 Selected findings; Victorian Health Promotion Foundation, 2016

**Figure 93. Water Consumption (2015)**

Location	Population who consume no water per day (%)		Average number of cups of water consumed per day	
	M	F	M	F
Campaspe	na	na	6.1	4.9 ●
<b>Victoria</b>	<b>4.0</b>	<b>2.3</b>	<b>5.6</b>	<b>5.2</b>

VicHealth Indicators Survey 2015 Selected findings; Victorian Health Promotion Foundation, 2016

## Obesity and Body Weight Status

In 2014, compared to the Victoria (18.8%) and regional Victoria (22.0%) averages, Campaspe (32.3%) had a substantially higher proportion of population that was obese.

Note that while 'class of obesity' data was measured in the VPHS 2014, data has not been included in this profile, as numbers were too low to be statistically reliable.

**Figure 94. Persons (%) Who Are Pre-Obese or Obese<sup>#</sup> (2014)**

Location	Underweight	Normal	Pre-obese <sup>##</sup>	Obese
	<18.5 kg/m <sup>2</sup>	18.5 - 24.9 kg/m <sup>2</sup>	25.0 - 29.9 kg/m <sup>2</sup>	>30.0 kg/m <sup>2</sup>
Campaspe	**	25.9	30.0	32.3 ●
Regional Victoria	1.5*	35.3	32.1	22.0
<b>Victoria</b>	<b>1.8</b>	<b>39.8</b>	<b>31.2</b>	<b>18.8</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Modifiable risk factors contributing to chronic disease, State Government of Victoria, Melbourne. <sup>#</sup>Age standardised to the 2011 Victorian population. <sup>\*</sup> Estimate has a relative standard error (RSE) of 25 - 50 per cent and should be interpreted with caution. <sup>\*\*</sup> Estimate has a RSE greater than 50 per cent and is not reported as it is unreliable for general use. <sup>##</sup> This category was referred to as 'overweight' in the VPHS 2011-12

### Sex Breakdown

In 2011-12, Campaspe (19.8%) had a higher proportion of males that were obese, compared to Victoria (17.6%), but a slightly lower proportion than the regional Victoria average (20.6%). However, Campaspe (50.7%) had a notably higher proportion of males that were overweight, compared to both regional Victoria and Victoria (41.6% and 40.9% respectively).

Campaspe (19.0%) also had a higher proportion of females that were obese, compared to Victoria (17.3%) but a lower proportion compared to regional Victoria (20.7%). The proportion of Campaspe (17.3%) females that were overweight was notably lower than the Victoria (24.8%) and regional Victoria (27.3%) averages.

In 2011-12, Campaspe males and females were equally as likely to be obese, however Campaspe males were more than twice as likely as females to be overweight.

**Figure 95. Proportion (%) of Population That is Overweight or Obese - by Sex<sup>#</sup> (2008 and 2011-12)**

Location		Males		Females	
		Overweight <sup>1</sup>	Obese <sup>2</sup>	Overweight <sup>1</sup>	Obese <sup>2</sup>
Campaspe	2008	40.0 ●	21.5 ●	37.9 ●	16.7 ●
	2011-12	50.7 ●	19.8 ●	17.3	19.0 ●
Regional Victoria	2008	41.6	20.1	27.5	19.5
	2011-12	41.6	20.6	27.3	20.7
<b>Victoria</b>	2008	<b>39.9</b>	<b>17.3</b>	<b>24.2</b>	<b>16.1</b>
	2011-12	<b>40.9</b>	<b>17.6</b>	<b>24.8</b>	<b>17.3</b>

Department of Health and Human Services 2014, Victorian Population Health Survey 2011-12 Survey findings, State Government of Victoria. <sup>#</sup>Age standardised to the 2011 Victorian population

Findings from the Victorian Population Health Survey 2014 indicate that across Victoria:

- There was a significantly higher proportion of people who lived in rural Victoria who were obese, compared with people who lived in metropolitan Melbourne
- There was a significantly higher proportion of males who were pre-obese (overweight) and obese compared with their female counterparts
- A significantly higher proportion of 55–74 year old people were pre-obese (overweight)
- A significantly higher proportion of 45–54 year old men were obese compared with all Victorian men, and
- A significantly higher proportion of 55–74 year old women were obese compared with all Victorian women.

## Physical Inactivity

In 2014, compared to regional Victoria (41.3%) and Victoria (41.4%), a similar proportion of Campaspe population (41.6%) undertook sufficient time and sessions of physical activity.

However, compared to the regional Victoria average, Campaspe residents were notably more likely to report they exercised 0 times per week (25.8% vs 18.9%). Compared to regional Victoria, Campaspe residents were similarly as likely to report that they participated in physical activity organised through a club or organisation (13.9% versus 13.5%) and males were much more likely than females to participate in physical activity organised through a club or organisation.

Compared to regional Victoria, Campaspe residents were less likely to report they participated in any non-organised physical activity (63.6% versus 70.2%).

Campaspe residents (28.7%) were notably less likely to report that their occupation involved mostly sitting compared to the regional Victoria (37.9%) and Victoria (49.6%) averages; whereas they were notably more likely to report their occupation involved mostly walking or mostly heavy labour / physically demanding work.

**Figure 96. Physical Activity Levels (%)# (2014)**

Location	Sedentary##	Insufficient time & sessions	Sufficient** time and sessions
Campaspe	2.6	52.6	41.6
Regional Victoria	3.2	50.3	41.3
<b>Victoria</b>	<b>3.6</b>	<b>50.4</b>	<b>41.4</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Modifiable risk factors contributing to chronic disease, State Government of Victoria, Melbourne. #Age standardised to 2011 Victorian population. \* Estimate has a relative standard error (RSE) of 25 - 50 per cent and should be interpreted with caution. \*\* For persons aged 18-64 years: 150 minutes of moderate intensity or 75 minutes of vigorous intensity physical activity, or an equivalent combination of both moderate and vigorous activities and muscle strengthening activities on at least 2 days each week; and, for persons 65 years and over: 30 minutes of moderate intensity physical activity every day. ## 0 minutes of moderate or vigorous intensity physical activity and 0 muscle strengthening sessions

**Figure 97. Physical Activity (%)# (2015)**

Location	0 days per week %	4 or more days per week %
Campaspe	25.8	39.8
Regional Victoria	19.6	43.4
<b>Victoria</b>	<b>18.9</b>	<b>41.3</b>

VicHealth Indicators Survey 2015 Selected findings; Victorian Health Promotion Foundation, 2016

**Figure 98. Occupational Physical Activity (%)# (2014)**

Location	Mostly Sitting	Mostly Standing	Mostly Walking	Mostly heavy labour/physically demanding
Campaspe	28.7	16.2*	30.5	22.8
Regional Victoria	37.9	19.4	19.6	19.1
<b>Victoria</b>	<b>49.6</b>	<b>18.4</b>	<b>16.0</b>	<b>12.8</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Modifiable risk factors contributing to chronic disease, State Government of Victoria, Melbourne. #Age standardised to 2011 Victorian population. \* Estimate has a relative standard error (RSE) of 25 - 50 per cent and should be interpreted with caution.

Findings from the Victorian Population Health Survey 2014 indicate that across Victoria:

- Females were much more likely than males to engage in sedentary behaviour
- Persons aged 18–34 years were least likely to engage in sedentary behaviour; while persons aged 45 to 64 years were most likely to have insufficient physical activity
- Males from rural Victoria were much more likely to have a job that involved mostly walking or heavy labour/physically demanding activity and were much less likely to have a job that involved mostly sitting, compared to metropolitan males. - Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Modifiable risk factors contributing to chronic disease, State Government of Victoria, Melbourne

**Figure 99. Physical Activity - By Sex (%)# (2015)**

Location	0 days per week %		4 or more days per week %	
	Male	Female	Male	Female
Campaspe	24.8 ●	26.8 ●	40.1 ●	39.5
<b>Victoria</b>	<b>16.9</b>	<b>20.9</b>	<b>43.5</b>	<b>39.1</b>

VicHealth Indicators Survey 2015 Selected findings; Victorian Health Promotion Foundation, 2016

**Figure 100. Participation in Organised Physical Activity (%)# (2015)**

Location	Participation in any organised physical activity	Organised by a fitness, leisure or indoor sports centre	Organised by a sports club or association
Campaspe	26.7 ●	4.4 ●	13.9
Regional Victoria	27.6	6.5	13.5
<b>Victoria</b>	<b>28.7</b>	<b>9.2</b>	<b>9.8</b>

VicHealth Indicators Survey 2015 Selected findings; Victorian Health Promotion Foundation, 2016

**Figure 101. Participation in Organised Physical Activity - by Sex (%)# (2015)**

Location	Participation in any organised physical activity		Organised by a fitness, leisure or indoor sports centre		Organised by a sports club or association	
	M	F	M	F	M	F
Campaspe	24.5 ●	28.9 ●	na	na	17.3	10.5
<b>Victoria</b>	<b>27.6</b>	<b>29.6</b>	<b>8.1</b>	<b>10.3</b>	<b>12.8</b>	<b>7.0</b>

VicHealth Indicators Survey 2015 Selected findings; Victorian Health Promotion Foundation, 2016

**Figure 102. Visit to Green Space (≥ Once Per Week)**

Campaspe	Victoria
Rate*	Rate*
34.1 ●	50.7

VicHealth Indicators Survey 2011 Selected findings 2012 \*Age standardised rate per 100

**Figure 103. Participation in Non-organised Physical Activity (%)# (2015)**

Location	Any non-organised physical activity	Walking	Jogging or running	Cycling
Campaspe	63.6 ●	49.1 ●	7.4 ●	10.0 ●
Regional Victoria	70.2	54.2	11.6	12.4
<b>Victoria</b>	<b>70.5</b>	<b>51.2</b>	<b>14.0</b>	<b>11.8</b>

VicHealth Indicators Survey 2015 Selected findings; Victorian Health Promotion Foundation, 2016

**Figure 104. Participation in Non-organised Physical Activity (%)# (2015)**

Location	Any non-organised physical activity		Walking		Jogging or running		Cycling	
	M	F	M	F	M	F	M	F
Campaspe	65.2 ●	62.0 ●	44.2 ●	54.0 ●	np	np	np	np
<b>Victoria</b>	<b>72.6</b>	<b>68.5</b>	<b>46.8</b>	<b>55.3</b>	<b>16.3</b>	<b>11.9</b>	<b>16.1</b>	<b>7.7</b>

VicHealth Indicators Survey 2015 Selected findings; Victorian Health Promotion Foundation, 2016



## Work Life and Lifestyle

### Work, Sleep and Time

In 2011, compared to Victoria, Campaspe had a higher rate of population that reported they had inadequate sleep (34.7 vs 31.0) and a lower rate that reported they had adequate work-life balance (50.4 vs 57.3).

**Figure 105. Work, sleep and time (2011)**

Indicator	Campaspe	Victoria
Inadequate sleep (<7 hours per weekday)	34.7 ●	31.0
Lack time for friends/family	26.9	27.6
Time pressure	39.2	41.3
Adequate work-life balance	50.4 ●	57.3

VicHealth Indicators Survey 2011 Selected findings 2012 \*Age standardised rate per 100

### Time Spent Sitting

In 2014, the Campaspe (13.7%) population was less likely to spend 8 or more hours sitting each week day, compared with the regional Victoria (17.4%) and Victoria (23.8%) averages. The Campaspe (6.5%) population was also less likely to spend 8 or more hours sitting on a weekend day, compared with the regional Victoria (8.9%) and Victoria (10.4%) averages.

**Figure 106. Time (Hours) Spent Sitting Each Day (2014)**

Location		<2	2 to 4	4 to 6	6 to 8	>8
Week day	Campaspe	7.8	33.5	18.3	14.4	13.7
	Regional Victoria	6.9	31.1	25.8	14.1	17.4
	Victoria	5.9	27.0	24.7	14.4	23.8
Weekend day	Campaspe	12.9*	30.8	28.7	13.9	6.5
	Regional Victoria	9.5	37.6	29.4	9.8	8.9
	Victoria	8.5	36.1	28.9	11.1	10.4

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Modifiable risk factors contributing to chronic disease, State Government of Victoria, Melbourne #Age standardised to 2011 Victorian population. \* Estimate has a relative standard error (RSE) of 25 - 50 per cent and should be interpreted with caution.

### Walking and Cycling For Transport

In 2014, compared to Victoria (92.9%) and regional Victoria (93.1%), a slightly greater proportion of Campaspe population (94.3%) reported they did not cycle for transport in the previous week. Compared to Victoria (57.4%), a higher proportion of Campaspe population (59.7%) reported that in the previous week they walked for transport for zero days.

**Figure 107. Population (%) That Did Not Cycle For Transport in Previous Week (2014)**

Location	%
Campaspe	94.3
Regional Victoria	93.1
Victoria	92.9

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Modifiable risk factors contributing to chronic disease, State Government of Victoria, Melbourne #Data were age-standardised to the 2011 Victorian population #Respondents were asked if they cycled as a means of transport to places like school, work, the shops and the train station for trips longer than 10 minutes.

**Figure 108. Population (%) That Walked For Transport# in Previous Week by Frequency (2014)**

Location	1 day %	2-3 days %	≥4 days %	None %
Campaspe	16.5	8.5	15.0*	59.7 ●
Regional Victoria	6.1	15.2	13.4	65.0
Victoria	7.3	16.8	18.1	57.4

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Modifiable risk factors contributing to chronic disease, State Government of Victoria, Melbourne #Data were age-standardised to the 2011 Victorian population \*RSE between 25 and 50 per cent; point estimate (%) should be interpreted with caution. Respondents were asked about the number days they walked for transport for trips longer than 10 minutes during the preceding week



### Sun Protective Behaviour

In 2011-12, compared to Victoria and regional Victoria, Campaspe residents were notably more likely to report they wear both a hat and sunglasses when out in the sun.

**Figure 109. Sun Protective Behaviours (%)# (2011-12)**

Location	Wore both a hat and sunglasses
Campaspe	53.3%
Regional Victoria	46.4%
<b>Victoria</b>	<b>39.3%</b>

Department of Health and Human Services 2014, Victorian Population Health Survey 2011-12 Survey findings, State Government of Victoria.  
#Age standardised.

Findings from the Victorian Population Health Survey 2011-12 indicate that across Victoria:

- A higher proportion of men wear both a hat and sunglasses compared with their female counterparts; however, men were also more likely than women not to wear either
- The proportion of women who usually wear a hat and sunglasses declined between 2003 and 2011-12, while no such decline was observed in men, and
- A higher proportion of men and women living in rural Victoria wore both a hat and sunglasses when exposed to sunlight compared with their metropolitan counterparts.

# Health Screening and Checks

## Visited a GP

In 2014, compared to Victorian averages (55.4% and 17.8% respectively), a slightly higher proportion of Campaspe population (58.2% and 17.9%) had visited a GP in the last 3 months or in the last 3 to 6 months. A notably lower proportion of Campaspe population (6.3%) reported that their last visit to a GP was 12 or more months ago, compared to regional Victoria (15.0%) or Victoria (13.3%).

**Figure 110. Last Visit to a GP# by LGA\* (2014)**

Location	< 3 months %	3-6 months %	6-12 months %	≥ 12 months %
Campaspe	58.2	17.9	15.7	6.3
Regional Victoria	53.5	16.1	14.3	15.0
<b>Victoria</b>	<b>55.4</b>	<b>17.8</b>	<b>12.8</b>	<b>13.3</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria, Melbourne. #Self-reported \*Age standardised

Findings from the Victorian Population Health Survey 2014 indicate that across Victoria:

- Males (13.3%) were much more likely than females (7.6%) to report they their last visit to a doctor or GP was more than 12 months ago.

## Other Health Checks

In 2014, compared to Victorian and Regional Victorian averages, a greater proportion of Campaspe population reported having had a blood pressure, cholesterol or blood glucose/diabetes check in the two years preceding the survey.

**Figure 111. Participation (% of Persons) in Selected Health Checks (2014)**

Location	Blood pressure check	Cholesterol check	Blood sugar or diabetes check
Campaspe	87.0	64.4	66.5
Regional Victoria	80.7	56.3	51.5
<b>Victoria</b>	<b>79.9</b>	<b>59.5</b>	<b>53.1</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria, Melbourne. #Self-reported \*Age standardised to 2011 Victorian population.

Findings from the 2014 Victorian Population Health Survey also indicate that across Victoria:

- Males aged 18 - 34 years were less likely than females in this age group to have had a blood pressure check in the last 2 years
- Males aged 25 years and over were more likely than females in this age group to have had a cholesterol check in the last 2 years, and
- Males aged 18 to 34 years were less likely than females in this age group to have had a blood glucose/diabetes check in the last 2 years.

## Breast Cancer Screening

In 2014, some 90.6% of Campaspe females aged 50 to 74 years had ever had a mammogram and this figure was similar to the regional Victoria and Victoria averages (each 90%). Of the Campaspe females aged 50 to 74 years who had ever had a mammogram, 81% had the mammogram undertaken by BreastScreen Victoria and this figure was slightly higher than the regional Victoria average (80%).

**Figure 112. Females 50 to 74 Years Who Have Ever Had a Mammogram# (2014)**

Location	%
Campaspe	90.6
Regional Victoria	90.0
<b>Victoria</b>	<b>90.0</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria. #Self-reported \*Age standardised

**Figure 113. Females 50 to 74 Years Who Have Ever Had a Mammogram# by Service Provider (2014)**

Location	BreastScreen Victoria %	Public hospital %	Private service %
Campaspe	81.0	15.7	1.8
Regional Victoria	80.0	10.0	5.5
<b>Victoria</b>	<b>78.5</b>	<b>7.9</b>	<b>8.7</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria. #Self-reported \*Age standardised

In 2014, some 72.4% of Campaspe females aged 50 to 74 years had a mammogram in the past two years and this figure was similar to the regional Victoria and Victoria averages (72.9% and 73% respectively). Of the Campaspe females aged 50 to 74 years who had ever had a mammogram, 82.5% had it undertaken by BreastScreen Victoria.

**Figure 114. Females 50 to 74 years Who Had A Mammogram# In Past Two Years (2014)**

Location	%
Campaspe	72.4 ●
Regional Victoria	72.9
<b>Victoria</b>	<b>73.0</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria #Self-reported \*Age standardised to 2011 Victorian population.

**Figure 115. Females 50-74 Yrs Who Had A Mammogram# In Past Two Years By Service Provider % 2014)**

Location	BreastScreen Victoria	Public service	Private service
Campaspe	82.5	15.1	**
Regional Victoria	83.9	8.5	5.0
<b>Victoria</b>	<b>82.2</b>	<b>6.8</b>	<b>8.6</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria. #Self-reported \*Age standardised

## Cervical Cancer Screening

In 2014, compared to Victoria (83.1%), a greater proportion of Campaspe (85.5%) females aged 18 years and over reported they had ever had a Pap Test. However, just 63.7% of Campaspe females aged 18 yrs and over reported they had a Pap Test within the last 2 years compared to the Victorian average of 72.1%. Figures from the Victorian Cervical Cytology Registry for 2013-2014 indicate that Campaspe pap test participation rates are generally slightly higher than the Victorian average.

**Figure 116. Females# Who Have Ever Had a Pap Test\* (2014)**

Location	%
Campaspe	85.5
Regional Victoria	85.7
<b>Victoria</b>	<b>83.1</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria. #Self-reported and females aged 18 yrs and over \*Age standardised

**Figure 117. Duration Since Last Pap Test# (2014)**

Location	<2 Years %	2 - 5 Years %	>5 Years %
Campaspe	63.7 ●	19.0*	12.3
Regional Victoria	71.3	12.1	12.8
<b>Victoria</b>	<b>72.1</b>	<b>12.7</b>	<b>11.9</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria. #Self-reported and females aged 18 yrs and over \*Age standardised

In the 24 month period of 2013 to 2014, compared to the Victorian average (59.2%), Campaspe (62.4%) females aged 20 - 69 years were more likely to have had a pap screen in the past two years. Between 2012-13 (24 months) and 2013-14 (24 months) pap screen participation rates in Campaspe decreased by a small amount.

**Figure 118. Proportion (%) of Eligible Women<sup>(A)</sup> Screened for Cervical Cancer (2013-14)**

Location	2012-13	2013-14
Campaspe	63.5	62.4
<b>Victoria</b>	<b>60.4</b>	<b>59.2</b>

Statistical Report 2014, Victorian Cervical Cytology Registry <sup>a</sup>Two year participation rate of women aged 20-69 years

## Bowel Cancer Checks

In 2014, compared to Victoria (59.9%) and regional Victoria (64.3%), a greater proportion of Campaspe (68.4%) population aged 50 years over who had been sent the bowel cancer testing kit in the last two years reported they had completed and returned the kit.

**Figure 119. Persons That Completed and Returned NBCSP FOBT# Kit in Previous Two Years\* (2014)**

Location	%
Campaspe	68.4
Regional Victoria	64.3
<b>Victoria</b>	<b>59.9</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria. #Self-reported \*Age standardised

# Prevalence of Health Conditions

## Self Rated Health

In 2014, compared to Victoria (20.3%) and regional Victoria (20.7%) averages, the Campaspe population (26.9%) was more likely to report its health status as fair/poor.

Subjective wellbeing scores from 0 - 100, however, indicate that Campaspe males (79.1) and females (80.2) rate their overall wellbeing (not just health) as slightly better than the Victorian averages (76.7 and 77.9 respectively). Scores for satisfaction with life as a whole also indicate that Campaspe males and females (each scoring 8 out of 10) were slightly more satisfied with life as a whole compared to Victorian averages (7.7 and 7.9 respectively).

**Figure 120. Self-reported Health Status\* (2014)**

Location	Excellent / Very good %	Good %	Fair / Poor %
Campaspe	34.2	38.6	26.9 ●
Regional Victoria	41.2	37.8	20.7
<b>Victoria</b>	<b>40.2</b>	<b>39.1</b>	<b>20.3</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria, Melbourne. #Age standardised to 2011 Victorian population.

**Figure 121. Subjective Wellbeing Score (Range 0–100) (2015)**

Location	Male	Female	All Persons
Campaspe	79.1	80.2	79.6
<b>Victoria</b>	<b>76.7</b>	<b>77.9</b>	<b>77.3</b>

VicHealth 2016, VicHealth Indicators Survey 2015 accessed online January 2017

**Figure 122. Satisfaction with Life as a Whole Score (Range 0–10) (2015)**

Location	Male	Female	All Persons
Campaspe	8.0	8.0	8.0
<b>Victoria</b>	<b>7.7</b>	<b>7.9</b>	<b>7.8</b>

VicHealth 2016, VicHealth Indicators Survey 2015 accessed online January 2017

# Deaths

## Median Age at Death

In 2010-2014, the median age at death for Campaspe males was the same as the regional Victoria and Victoria average (79 years); however males living in the Kyabram/ Rochester/ Rushworth PHA had a younger median age at death (77.5 years). The median age at death for Campaspe females was the same as the regional Victoria average (84 years). Campaspe males (79 years) had a notably younger median age at death than Campaspe females (84 years).

**Figure 123. Median Age at Death by Sex (2010 to 2014)**

Location	Males		Females		Persons	
	No.	Age	No.	Age	No.	Age
Echuca/ Lockington - Gunbower	505	79.0	437	84.0	942	82.0
Kyabram/ Rochester/ Rushworth	488	77.5 ●	383	84.0	871	80.0 ●
Campaspe (S)	896	79.0	812	84.0	1,709	81.0
Regional Victoria	30,291	79.0	28,906	84.0	59,197	82.0
<b>Victoria</b>	<b>91,120</b>	<b>79.0</b>	<b>90,762</b>	<b>85.0</b>	<b>181,882</b>	<b>82.0</b>

Social Health Atlas of Australia December 2016 Release, PHIDU 2016 NOTE: refer to the following web link for further data source and methodology information: [http://www.phidu.torrens.edu.au/current/data/sha-aust/notes/phidu\\_data\\_sources\\_notes.pdf](http://www.phidu.torrens.edu.au/current/data/sha-aust/notes/phidu_data_sources_notes.pdf)

## Avoidable Mortality

The Public Health Information Development Unit, in its Australian and New Zealand Atlas of Avoidable Mortality (2006) report, defines Avoidable Mortality as comprising "those causes of death that are potentially avoidable at the present time, given available knowledge about social and economic policy impacts, health behaviours, and health care ..."

The report, which analyses mortality across Australia, found that:

*"Rates of avoidable mortality were approximately 80% higher in the most disadvantaged areas compared to the least disadvantaged areas. There was also a clear socioeconomic gradient in rates for all causes of avoidable mortality and for most conditions examined..."*

Amongst others, the key causes of death contributing to avoidable mortality statistics include neoplasms (cancers); cardiovascular diseases; infections; nutritional, endocrine and metabolic conditions (such as diabetes); respiratory diseases; drug use disorders; and unintentional and intentional injuries. For further information about avoidable mortality, refer to the PHIDU website: [www.publichealth.gov.au](http://www.publichealth.gov.au)

## All Causes

In 2010-14, compared to regional Victoria (131.5) and Victoria (108.6), Campaspe (139.3) had a higher estimated rate of avoidable deaths. Within the PCP region, the Kyabram/ Rochester/ Rushworth PHA (156.6) had a much higher rate than Victoria average.

The estimate rate of avoidable deaths in the Campaspe male population (173.6) was substantially higher than the rate for females (103.0).

**Figure 124. Rate of Avoidable Deaths (Ages 0 to 74 Years) from All Causes (2010 to 2014)**

Location	Males		Females		Persons	
	No.	Rate	No.	Rate	No.	Rate
Echuca/ Lockington - Gunbower	80	166.7 ●	36	74.2	116	120.5 ●
Kyabram/ Rochester/ Rushworth	100	179.5 ●	67	130.7 ●	167	156.6 ●
Campaspe (S)	179	173.6 ●	102	103.0 ●	281	139.3 ●
Regional Victoria	6,136	167.7	3,380	94.0	9,516	131.5
<b>Victoria</b>	<b>18,042</b>	<b>137.9</b>	<b>10,477</b>	<b>79.5</b>	<b>28,519</b>	<b>108.6</b>

Social Health Atlas of Australia, Population Health Areas and Local Government Areas, December 2016 release, PHIDU 2016 \*Average annual age standardised modelled estimate rate per 100,000 persons

## Premature Mortality

Premature mortality refers to all deaths that take place before a selected age, compared to avoidable deaths which refer to those deaths that were considered to have been avoidable.

*Premature mortality refers to "...deaths that occur at a younger age than a selected cut-off... This cut-off age produces conservative estimates of premature mortality because it is lower than the current median age at death (81 years in 2012) and life expectancy at birth (80 for males and 84 for females in 2012)..." (Australian Institute of Health and Welfare, Overview of premature mortality.)*

In 2010-14, compared to regional Victoria (258.6) and Victoria (219.9), Campaspe (275.8) had a higher estimated rate of premature deaths. Within the PCP region, the Kyabram/ Rochester/ Rushworth PHA (276.3) and the Echuca/ Lockington - Gunbower PHA (275.0) had similar rates.

The rate of premature deaths in the Campaspe male population (328.5) was substantially higher than in the female population (219.4).

**Figure 125. Rate of Premature Deaths (Ages 0 to 74 Years) from All Causes (2010 to 2014)**

Location	Males		Females		Persons	
	No.	Rate	No.	Rate	No.	Rate
Echuca/ Lockington - Gunbower	159	323.8 ●	111	225.4 ●	270	275.0 ●
Kyabram/ Rochester/ Rushworth	191	332.4 ●	112	213.6 ●	303	276.3 ●
Campaspe (S)	348	328.5 ●	222	219.4 ●	570	275.8 ●
Regional Victoria	11,874	318.1	7,181	197.0	19,055	258.6
<b>Victoria</b>	<b>35,454</b>	<b>271.5</b>	<b>22,210</b>	<b>168.8</b>	<b>57,664</b>	<b>219.9</b>

Social Health Atlas of Australia December 2016 Release, PHIDU 2016 # In persons aged 0 - 74 years \*Average annual age-standardised Rate per 100,000  
NOTE: refer to the following web link for further data source and methodology information: [http://www.phidu.torrens.edu.au/current/data/sha-aust/notes/phidu\\_data\\_sources\\_notes.pdf](http://www.phidu.torrens.edu.au/current/data/sha-aust/notes/phidu_data_sources_notes.pdf)

## Cause of Death

### Males

Diseases of the circulatory system were the most common cause of death in 2007 for Campaspe Shire males, followed by neoplasms and then external causes of morbidity or mortality. Compared to Victoria, Campaspe Shire males had a significantly higher proportion of certain causes of death. The causes of death with the greatest proportional difference compared to Victoria were (in order):

- diseases of the skin and subcutaneous tissue
- certain conditions originating in the perinatal period
- symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified
- diseases of the genitourinary system
- external causes of morbidity and mortality
- endocrine, nutritional and metabolic diseases, and
- diseases of the circulatory system

Campaspe Shire males had a much lower proportion of neoplasms as an underlying cause of death, compared to Victoria. Mental and behavioral disorders, diseases of the nervous system and diseases of the respiratory system were also responsible for a smaller proportion of deaths.

### Females

Diseases of the circulatory system were the most common cause of death in 2007 for Campaspe Shire females, followed by neoplasms and endocrine, nutritional and metabolic diseases. Compared to Victoria, Campaspe Shire females had a significantly higher proportion of certain causes of death. The causes of death with the greatest proportional difference compared to Victoria were (in order):

- diseases of the skin and subcutaneous tissue
- diseases of the blood and blood-forming organs & certain disorders involving the immune mechanism
- congenital malformations, deformations and chromosomal abnormalities
- diseases of the digestive system
- diseases of the musculoskeletal system and connective tissue
- endocrine, nutritional and metabolic diseases
- diseases of the respiratory system

Campaspe Shire females had a lower proportion of neoplasms as an underlying cause of death, compared to Victoria, as well as diseases of the nervous system, diseases of the circulatory system, certain infectious and parasitic diseases, and mental and behavioral disorders.



**Figure 126. Cause of Death (2007)**

Cause	Campaspe				Victoria			
	Male	Male	Female	Female	Male	Male	Female	Female
Certain infectious and parasitic diseases	0	0.0%	2	1.2%	181	1.1%	221	1.3%
Neoplasms	39	25.7%	42	25.5%	5,686	33.6%	4,561	26.8%
Dis. of blood/blood-forming organs & certain disorders of immune mechanism	0	0.0%	4	2.4%	56	0.3%	65	0.4%
Endocrine, nutritional & metabolic diseases	9	5.9%	12	7.3%	690	4.1%	813	4.8%
Mental and behavioral disorders	1	0.7%	9	5.5%	549	3.2%	972	5.7%
Diseases of the nervous system	1	0.7%	5	3.0%	649	3.8%	806	4.7%
Diseases of the circulatory system	57	37.5%	54	32.7%	5,210	30.8%	6,030	35.5%
Diseases of the respiratory system	8	5.3%	16	9.7%	1,437	8.5%	1,362	8.0%
Diseases of the digestive system	6	3.9%	9	5.5%	581	3.4%	589	3.5%
Diseases of the skin & subcutaneous tissue	3	2.0%	3	1.8%	26	0.2%	47	0.3%
Diseases of the musculoskeletal system & connective tissue	0	0.0%	3	1.8%	95	0.6%	203	1.2%
Diseases of the genitourinary system	5	3.3%	5	3.0%	362	2.1%	482	2.8%
Certain conditions originating in the perinatal period	4	2.6%	0	0.0%	72	0.4%	66	0.4%
Congen. malformations, deformations & chromosomal abnormalities	0	0.0%	2	1.2%	78	0.5%	67	0.4%
Symptoms, signs & abnormal clinical & lab. findings, not elsewhere classified	4	2.6%	1	0.6%	125	0.7%	87	0.5%
External causes of morbidity and mortality	15	9.9%	3	1.8%	1,139	6.7%	620	3.6%
All Causes	152	100%	165	100%	16,938	100%	16,992	100%

www.abs.gov.au - commissioned data March 2009

# Hospitalisations

## Ambulatory Care Sensitive Conditions

Ambulatory care is any medical care delivered where the patient does not need to stay in hospital overnight. If a patient visits a doctor's office, hospital or health centre without an overnight stay it is considered ambulatory care. Hospitalisation rates for ambulatory care sensitive conditions (ACSC) can be used as an indicator of access to and quality of primary health care. Factors including disease prevalence in a community, personal choices, socio-economic factors and hospital admission and coding practices can also influence rates.

*NOTE: ACSC reports for the period 2014-15 onwards are based on the classification and codes in National Healthcare Agreement: PI 18 – Selected potentially preventable hospitalisations, 2015. ACSC rates for previous years are based on classification and codes in Victorian Ambulatory Care Sensitive Conditions - Report 2001-2002. As such, 2014/15 rates cannot be compared with rates in previous years.*

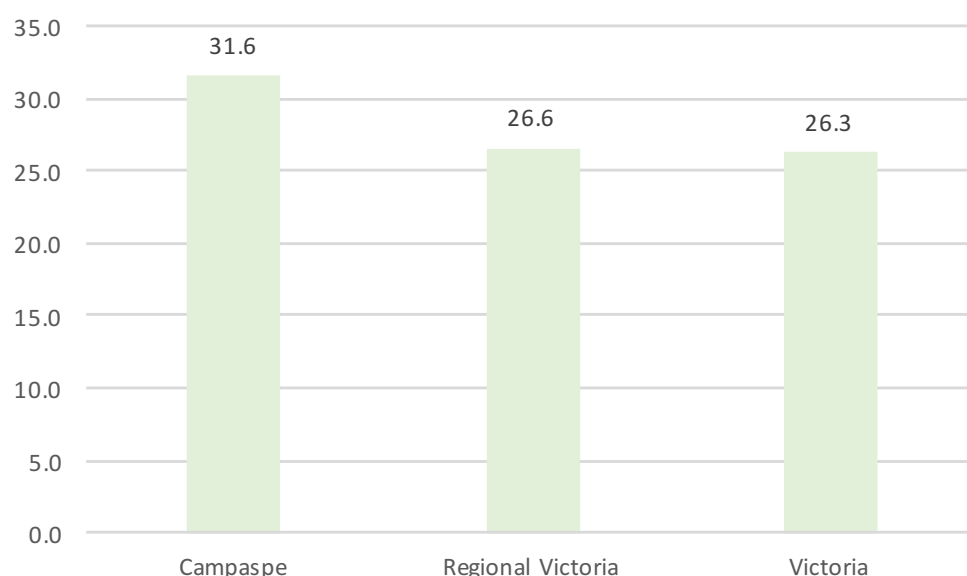
In 2014/15, the total ACSC admission rate for the Campaspe PCP region was 31.6 per 1,000 persons and this rate was higher than regional Victoria (26.6) and Victoria (26.3) averages. Campaspe also had a higher rate of admissions for chronic ACSCs (16.8) and acute ACSCs (14.7) compared with regional Victoria (13.3 and 12.5) and Victoria (13.0 and 11.8).

**Figure 127. ACSC Standardised# Admission Rates\* (2014/15)**

ACSC Category	Campaspe		Regional Victoria		Victoria
	No.	Rate*		Rate*	Rate*
Chronic ACSCs	802	16.8 ●		13.3	<b>13.0</b>
Vaccine-preventable ACSCs	16	0.4		1.0	<b>1.7</b>
Acute ACSCs	576	14.7 ●		12.5	<b>11.8</b>
Total ACSCs	1383	31.6 ●		26.6	<b>26.3</b>

Victorian Health Information Surveillance System, DHHS, accessed online January 2017 \*Standardised rate per 1000 population, based on 2011 estimated resident population.

**Figure 128. Total ACSCs Standardised# Admission Rates\* - Chart (2014/15)**



Victorian Health Information Surveillance System, DHHS, accessed online January 2017 \*Standardised rate per 1000 population, based on 2011 estimated resident population.

### Most Common ACSCs

In 2014/15, the highest ACSC admission rates in Campaspe population were for iron deficiency anaemia (4.2 per 1,000), followed by cellulitis (3.7), urinary tract infections (3.5) and COPD (3.4). Compared to Victoria, Campaspe had slightly higher admission rates for most ACSCs, with the greatest difference recorded for iron deficiency anaemia (4.2 vs 2.7).

**Figure 129. Most Common# Campaspe ACSC Admission Rates Comparison (2014/15)**

ACSC	Campaspe Rate*	Regional Victoria Rate*	Victoria Rate*
Iron deficiency anaemia	4.2 ●	2.5	2.7
Cellulitis	3.7 ●	2.9	2.7
Urinary tract infections, incl. pyelonephritis	3.5 ●	2.5	2.7
Chronic Obstructive Pulm. Disease (COPD)	3.4 ●	3.0	2.5
Congestive cardiac failure	3.3 ●	2.2	2.5
Dental conditions	2.9 ●	3.1	2.7
Diabetes complications	2.2 ●	2.0	1.8
Convulsions and epilepsy	1.8 ●	1.4	1.3
Angina	1.7 ●	1.7	1.5
Ear, nose and throat infections	1.4	1.5	1.4
Asthma	1.0	1.2	1.3

Victorian Health Information Surveillance System, DHHS, accessed online January 2017 \*Standardised rate per 1000 population, based on 2011 estimated resident population. #Excludes those ACSCs with rates less than 1 in 1,000

### Most Common ACSCs by Sex

In 2014/15, Campaspe males and females had similar admission rates of chronic, acute, vaccine-preventable and total ACSCs. At the individual ACSC level, many rates were similar for males and females, however Campaspe males had notably higher admission rates for angina, cellulitis, COPD, and gangrene; while Campaspe females had notably higher rates for iron deficiency anaemia and urinary tract infections - including pyelonephritis.

**Figure 130. Campaspe ACSCs# by Sex (2014/15)**

ACSC	Males		Females	
	No.	Rate*	No.	Rate*
Angina	56	2.4 ♦	29	1.2
Asthma	16	0.9	21	1.0
Cellulitis	88	4.5 ♦	61	3.1
Chronic Obstructive Pulm. Disease (COPD)	104	4.2 ♦	70	2.8
Congestive cardiac failure	86	3.7 ♦	92	3.1
Convulsions and epilepsy	34	1.9	29	1.8
Dental conditions	49	2.6	60	3.3 ♦
Diabetes complications	52	2.4 ♦	44	2.1
Ear, nose and throat infections	27	1.5	24	1.3
Gangrene	27	1.2 ♦	10	0.5
Iron deficiency anaemia	76	3.2	113	5.2 ♦
Urinary tract infections, incl. pyelonephritis	55	2.5	87	4.4 ♦
Chronic ACSCs	400	17.1	402	16.7
Vaccine-preventable ACSCs	9	0.4	7	0.4
Acute ACSCs	290	14.6	286	15.0
<b>Total ACSCs</b>	<b>690</b>	<b>31.7</b>	<b>693</b>	<b>32.0</b>

Victorian Health Information Surveillance System, DHHS, accessed online January 2017 \*Standardised rate per 1000 population, based on 2011 estimated resident population. #Excluding those with rates less than 1 in 1,000 = higher than male/female rate

## All Hospital Separations

Between 2004/05 and 2014/15, there was a 2% increase in the number of inpatient separations of Campaspe residents and this figure was lower than the Victorian average increase (3%). The projected increase to separations for Campaspe residents between 2014/15 and 2026/27 (1.7%) is also lower than the increase projected for Victoria (3.1%).

**Figure 131. Annual Change to Inpatient Separations (2004/05 to 2014/15 )**

Location	Change 2004/05 to 2014/15	Projected change 2014/15 to 2026/27
Campaspe	2.0%	1.7%
<b>Victoria</b>	<b>3.0%</b>	<b>3.1%</b>

Department of Health and Human Services 2016, "2015 local government areas (LGA) profiles" November 2016, Victoria State Government

**Figure 132. Average Length of Stay in Hospital (2014/15 )**

Location	Average no. of days
Campaspe	3.0 ●
<b>Victoria</b>	<b>2.8</b>

Department of Health and Human Services 2016, "2015 local government areas (LGA) profiles" November 2016, Victoria State Government

Over the three year period from 2011/12 to 2013/14:

- The rate of hospital separations per population for Campaspe (41,430 per 100,000) was much higher than the Victorian average rate (26,038 per 100,000)
- The rate of hospital separations for the Campaspe Indigenous population (38,737 per 10,000) was also higher than the Victorian Indigenous average (34,692)
- Campaspe males and females made up the same (50%) proportion of separations
- Campaspe Indigenous males (53.7%) made up a greater proportion than Campaspe Indigenous females (46.3%) or Victorian Indigenous males (44.7%) of hospital separations.

**Figure 133. Rate of Total Hospital Separations by Indigenous Status (2011/12 to 2013/14)**

Measure	Campaspe		Victoria	
	Indigenous	Total	Indigenous	Total
2013 Population (ERP)	1,061	37,108	<b>49,694</b>	<b>5,738,111</b>
No. of separations	1,233	46,122	<b>51,720</b>	<b>4,482,205</b>
Rate of separations per 2013 ERP	38,737	41,430	<b>34,692</b>	<b>26,038</b>

Numbers provided by the Department of Health and Human Services, commissioned VAED public hospital data for the period 2011/12 to 2013/14. Rates prepared by author #average annual rate per 100,000 persons based on the 2013 estimated resident population sourced from ABS 3235.0 Population by Age and Sex, Regions of Australia, 30<sup>th</sup> June 2013 - released August 2014. Rates are not standardised

**Figure 134. Total Hospital Separations by Sex (2011/12 to 2013/14)**

Sex	Campaspe		Victoria	
	No.	%	No.	%
Female	23,097	50.1%	<b>2,272,478</b>	<b>50.7%</b>
Male	23,025	49.9%	<b>2,209,727</b>	<b>49.3%</b>
<b>Total</b>	<b>46,122</b>	<b>100%</b>	<b>4,482,205</b>	<b>100%</b>

Numbers provided by the Department of Health and Human Services, commissioned VAED public hospital data for 2011/12 to 2013/14

**Figure 135. Indigenous Hospital Separations by Sex (2011/12 to 2013/14)**

Sex	Campaspe		Victoria	
	No.	%	No.	%
Female	571	46.3%	<b>28,601</b>	<b>55.3%</b>
Male	662	53.7%	<b>23,119</b>	<b>44.7%</b>

Numbers provided by the Department of Health and Human Services, commissioned VAED public hospital data for 2011/12 to 2013/14

Over the three year period from 2011/12 to 2013/14, compared to Victoria, Campaspe had a higher rate of separations per population for all major diagnostic categories (MDC), and rates were substantially higher for many MDCs.

Rates for the following MDCs were more than 100% higher than the state average:

- Diseases and disorders of the skin, subcutaneous tissue and breast
- Diseases and disorders of the male reproductive system
- Diseases and disorders of the digestive system, and
- Diseases and disorders of blood, blood forming organs, immunological disorders.

*Note that rates are not age standardised and one individual may be responsible for multiple separations.*

**Figure 136. Rate of Hospital Separations by Major Diagnostic Category (2011/12 to 2013/14)**

Major Diagnostic Category (MDC)	Campaspe		Victoria
	No.	Rate#	Rate#
Alcohol/Drug Use & Alcohol/Drug Induced Organic Mental Disorders	117	105 ●	97
Burns	50	45 ●	24
Diseases & Disorders of Blood, Blood Forming Organs, Immun. Disorders	1,425	1,280 ●	619
Diseases & Disorders of the Circulatory System	3,208	2,882 ●	1,823
Diseases & Disorders of the Digestive System	6,292	5,652 ●	2,484
Diseases & Disorders of the Ear, Nose, Mouth & Throat	1,815	1,630 ●	877
Diseases & Disorders of the Eye	911	818 ●	487
Diseases & Disorders of the Female Reproductive System	1,089	978 ●	609
Diseases & Disorders of the Hepatob. System & Pancreas	816	733 ●	459
Diseases & Disorders of the Kidney & Urinary Tract	6,997	6,285 ●	5,878
Diseases & Disorders of the Male Reproductive System	536	481 ●	211
Diseases & Disorders of the Musculoskeletal System & Conn. Tissue	3,455	3,104 ●	1,709
Diseases & Disorders of the Nervous System	2,291	2,058 ●	1,345
Diseases & Disorders of the Respiratory System	2,250	2,021 ●	1,261
Diseases & Disorders of the Skin, Subcutaneous Tissue & Breast	2,882	2,589 ●	840
Edit DRGs	36	32 ●	23
Endocrine, Nutritional & Metabolic Diseases & Disorders	511	459 ●	349
Factors Influencing Health Status & Other Contacts with Health Svces	1,888	1,696 ●	996
Infectious & Parasitic Diseases, Systemic or Unspecified Sites	428	384 ●	281
Injuries, Poisonings & Toxic Effects of Drugs	806	724 ●	631
Mental Diseases & Disorders	774	695 ●	615
Neoplastic Disorders (Haematological & Solid Neoplasms)	3,713	3,335 ●	1,832
Newborns & Other Neonates	1,549	1,391 ●	1,069
Pregnancy, Childbirth & the Puerperium	2,183	1,961 ●	1,449
Unassignable to MDC	74	66 ●	54

*Numbers provided by the Department of Health and Human Services, commissioned VAED public hospital data for the period 2011/12 to 2013/14. Rates prepared by author #average annual rate per 100,000 persons based on the 2013 estimated resident population sourced from ABS 3235.0 Population by Age and Sex, Regions of Australia, 30<sup>th</sup> June 2013 - released August 2014. Rates are not standardised*

Over the three year period from 2011/12 to 2013/14, compared to Victoria, Campaspe had a higher rate of separations per Indigenous population for most major diagnostic categories (MDC).

Campaspe Indigenous population rates for the following MDCs were more than 100% higher than the state Indigenous average:

- Diseases and disorders of blood, blood forming organs, immunological disorders.
- Diseases and disorders of the respiratory system, and
- Infectious and parasitic diseases, systemic or unspecified sites.

*Note that rates are not age standardised and one individual may be responsible for multiple separations.*

**Figure 137. Rate of Hospital Separations by MDC - Indigenous Population (2011/12 to 2013/14)**

Major Diagnostic Category (MDC)	Campaspe		Victoria
	No.	Rate#	Rate#
Alcohol/Drug Use & Alcohol/Drug Induced Organic Mental Disorders	17	534 ●	339
Burns	<5	np	20
Diseases & Disorders of Blood, Blood Forming Organs, Immun. Disorders	29	911 ●	394
Diseases & Disorders of the Circulatory System	46	1,445	1,537
Diseases & Disorders of the Digestive System	108	3,393 ●	2,360
Diseases & Disorders of the Ear, Nose, Mouth & Throat	63	1,979 ●	1,505
Diseases & Disorders of the Eye	6	189	205
Diseases & Disorders of the Female Reproductive System	19	597 ●	594
Diseases & Disorders of the Hepatobiliary System & Pancreas	35	1,100 ●	633
Diseases & Disorders of the Kidney & Urinary Tract	290	9,111	12,502
Diseases & Disorders of the Male Reproductive System	<5	np	135
Diseases & Disorders of the Musculoskeletal System & Conn. Tissue	56	1,759 ●	1,515
Diseases & Disorders of the Nervous System	47	1,477 ●	1,030
Diseases & Disorders of the Respiratory System	112	3,519 ●	1,588
Diseases & Disorders of the Skin, Subcutaneous Tissue & Breast	38	1,194 ●	834
Edit DRGs		-	np
Endocrine, Nutritional & Metabolic Diseases & Disorders	16	503 ●	390
Factors Influencing Health Status & Other Contacts with Health Svces	21	660 ●	634
Infectious & Parasitic Diseases, Systemic or Unspecified Sites	16	503 ●	246
Injuries, Poisonings & Toxic Effects of Drugs	26	817	857
Mental Diseases & Disorders	57	1,791 ●	1,079
Neoplastic Disorders (Haematological & Solid Neoplasms)	7	220	1,012
Newborns & Other Neonates	91	2,859 ●	1,906
Pregnancy, Childbirth & the Puerperium	126	3,959 ●	2,569
Unassignable to MDC	<5	np	23

*Numbers provided by the Department of Health and Human Services, commissioned VAED public hospital data for the period 2011/12 to 2013/14. Rates prepared by author #average annual rate per 100,000 persons based on the 2013 estimated resident population sourced from ABS 3235.0 Population by Age and Sex, Regions of Australia, 30<sup>th</sup> June 2013 - released August 2014. Rates are not standardised*

Over the three year period from 2011/12 to 2013/14, compared to the Campaspe total population, the Campaspe Indigenous population had a higher rate of separations for many major diagnostic categories (MDC).

Campaspe Indigenous population rates for the following MDCs were more than 100% higher than the Campaspe total population rates:

- Alcohol/drug use and alcohol/drug induced organic mental disorders
- Mental diseases and disorders
- Newborns and other neonates
- Pregnancy, childbirth and the puerperium

*Note that rates are not age standardised and one individual may be responsible for multiple separations.*

**Figure 138. Hospital Separations - Campaspe Indigenous and Total Population (2011/12 to 2013/14)**

Major Diagnostic Category (MDC)	Campaspe		diff %
	Indigenous population Rate	Total population Rate	
Alcohol/Drug Use & Alcohol/Drug Induced Org. Mental Disorders	534 ♦	105	408%
Burns	np	45	
Diseases & Dis'rders of Blood, Blood Forming Organs, Immun. Disorders	911	1,280	-29%
Diseases & Disorders of the Circulatory System	1,445	2,882	-50%
Diseases & Disorders of the Digestive System	3,393	5,652	-40%
Diseases & Disorders of the Ear, Nose, Mouth & Throat	1,979 ♦	1,630	21%
Diseases & Disorders of the Eye	189	818	-77%
Diseases & Disorders of the Female Reproductive System	597	978	-39%
Diseases & Disorders of the Hepatobiliary System & Pancreas	1,100 ♦	733	50%
Diseases & Disorders of the Kidney & Urinary Tract	9,111 ♦	6,285	45%
Diseases & Disorders of the Male Reproductive System	np	481	
Diseases & Disorders of the Musculoskeletal System & Conn.Tissue	1,759	3,104	-43%
Diseases & Disorders of the Nervous System	1,477	2,058	-28%
Diseases & Disorders of the Respiratory System	3,519 ♦	2,021	74%
Diseases & Disorders of the Skin, Subcutaneous Tissue & Breast	1,194	2,589	-54%
Edit DRGs	-	32	-100%
Endocrine, Nutritional & Metabolic Diseases & Disorders	503 ♦	459	10%
Factors Influencing Health Status & Other Contacts with Health Svces	660	1,696	-61%
Infectious & Parasitic Diseases, Systemic or Unspecified Sites	503 ♦	384	31%
Injuries, Poisonings & Toxic Effects of Drugs	817 ♦	724	13%
Mental Diseases & Disorders	1,791 ♦	695	158%
Neoplastic Disorders (Haematological & Solid Neoplasms)	220	3,335	-93%
Newborns & Other Neonates	2,859 ♦	1,391	105%
Pregnancy, Childbirth & the Puerperium	3,959 ♦	1,961	102%
Unassignable to MDC	np	66	

Numbers provided by the Department of Health and Human Services, commissioned VAED public hospital data for the period 2011/12 to 2013/14. Rates prepared by author #average annual rate per 100,000 persons based on the 2013 estimated resident population sourced from ABS 3235.0 Population by Age and Sex, Regions of Australia, 30<sup>th</sup> June 2013 - released August 2014. Rates are not standardised



Hospital admission rates by principal diagnosis and sex for 2012-13 indicate that, compared to the regional Victoria male average, the Campaspe male population had notably higher admission rates for:

- Circulatory system diseases
- Genitourinary system diseases, and
- All cancers.

Compared to the regional Victoria female average, the Campaspe female population had notably higher admission rates for:

- Circulatory system diseases
- All cancers
- Pregnancy and childbirth

Compared with the Campaspe female admission rates, Campaspe males had notably higher (where applicable) rates for:

- Circulatory system diseases, and
- Injury, poisoning & other external causes

Compared with the Campaspe male admission rates, Campaspe females had notably higher (where applicable) rates for:

- Genitourinary system diseases

*Note that rates are age standardised in this table and one individual may be responsible for multiple separations.*

**Figure 139. Hospital Admission Rates<sup>#</sup> by Principal Diagnosis and Sex (2012-13)**

Principal Diagnosis	Campaspe		Regional Victoria		Victoria	
	Male	Female	Male	Female	Male	Female
Infectious & parasitic diseases	**	**	493	589	<b>494</b>	<b>574</b>
All cancers	3,436 ●	3,315 ●	2,854	2,563	<b>2,936</b>	<b>2,590</b>
Mental health related conditions	**	1,253	817	1,092	<b>1,007</b>	<b>1,535</b>
Circulatory system diseases	3,181 ●	2,590 ●	2,575	1,953	<b>2,554</b>	<b>1,960</b>
Respiratory system diseases	2,135 ●	2,068 ●	1,954	1,793	<b>1,670</b>	<b>1,516</b>
Digestive system diseases	4,505 ●	4,703 ●	4,113	4,388	<b>4,289</b>	<b>4,587</b>
Musculosk. system & conn. tissue diseases	2,630 ●	2,757 ●	2,503	2,529	<b>2,153</b>	<b>2,349</b>
Genitourinary system diseases	1,562 ●	2,684 ●	1,281	2,504	<b>1,467</b>	<b>2,425</b>
Pregnancy & childbirth	na	13,892 ●	na	11,625	<b>na</b>	<b>9,866</b>
Injury, pois. & other external causes	2,350	2,099	2,635	2,094	<b>2,426</b>	<b>2,131</b>

Social Health Atlas of Australia, Victoria, data by Local Government Area, May 2016 Release 2. Public Health Information Development Unit, December 2016 #Age standardised rate per 100,000 modelled estimate of persons aged 18 years and over.

## Emergency Department (ED) Presentations

In 2014/15, compared to Victoria (263.0), Campaspe had a much higher rate (429.5) of emergency department (ED) presentations per 1,000 population. Compared to Victoria (103.0), Campaspe (236.8) also had a much higher rate of primary care type presentations to emergency departments per 1,000 population. The 2014/15 rate of total ED presentations and primary care type ED presentations is higher than the 2009/10 rates.

Campaspe males made up a greater proportion (52%) of total ED presentations than females (48%), and this proportion was higher than the Victoria average (50%).

Campaspe Indigenous males also made up a greater proportion (53%) of Indigenous ED presentations than Indigenous females (47%), and this proportion was higher than the Victoria average (48%).

**Figure 140. ED Presentations\* (2009/10 and 2014/15)**

Type of ED Presentation	2009/10		2014/15	
	Campaspe Rate#	Victoria Rate#	Campaspe Rate#	Victoria Rate#
Total presentations	339.4 ●	<b>249.9</b>	429.5 ●	<b>263.0</b>
Primary care type presentations	191.3 ●	<b>115.6</b>	236.8 ●	<b>103.0</b>

Department of Health and Human Services 2016, "2015 local government areas (LGA) profiles" November 2016, Victoria State Government #Age standardised rate per 1,000 persons AND 2012 local government area (LGA) profiles. \*Compare time periods with caution, as different methodology and coding may apply in different years.

**Figure 141. ED Presentations by Sex and Indigenous Status (2011/12 to 2013/14)**

Population	Sex	Campaspe		Victoria	
		Total	%	Total	%
Total Population	Female	21,495	48%	2,217,651	50%
	Male	22,955	52%	2,176,684	50%
	Total	44,450	100%	4,394,335	100%
Indigenous Population	Female	1,098	47%	31,192	52%
	Male	1,247	53%	29,090	48%
	Total	2,345	100%	60,282	100%

Numbers provided by the Department of Health and Human Services, commissioned VAED public hospital data for the period 2011/12 to 2013/14

# Selected Health Conditions

## Multiple Chronic Diseases

In 2014, compared to Victoria (58.6%) and regional Victoria (55.3%), a lower proportion of Campaspe population (50.2%) reported that they had no chronic disease. Compared to Victoria (9.7 and 5.1 respectively), a notably higher proportion of Campaspe population (11.7 and 8.1 respectively), reported they had two or had three or more chronic diseases.

**Figure 142. Lifetime Prevalence<sup>#</sup> of Multiple Chronic Diseases\* by LGA (2014)**

Location	0 %	1 %	2 %	≥3 %
Campaspe	50.2	30.0	11.7 ●	8.1 ●
Regional Victoria	55.3	27.6	11.5	5.6
<b>Victoria</b>	<b>58.6</b>	<b>26.6</b>	<b>9.7</b>	<b>5.1</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria. #Self reported that a doctor had diagnosed them with a chronic disease/s over their lifetime \*Age standardised.

## Cancer

In 2014, compared to the Victorian average (7.4%) and the regional Victoria average (7.3%), Campaspe had a higher (10.2%) proportion of population that reported they had been diagnosed by a doctor with cancer in their lifetime.

**Figure 143. Lifetime Prevalence of Cancer<sup>#</sup> (2014)**

Location	%
Campaspe	10.2 ●
Regional Victoria	7.3
<b>Victoria</b>	<b>7.4</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria, Melbourne. #Age standardised to 2011 Victorian population.

Over the three year period 2011/12 to 2013/14, the rate of hospitalisations for neoplastic disorders (includes malignant and benign growths) for the Campaspe population (3,335) was substantially higher than the Victorian average (1,832). Note that rates are not standardised.

**Figure 144. Hospitalisations for Neoplastic Disorders (2011/12 - 2013/14)**

Campaspe		Victoria
No.	Rate#	Rate#
3,713	3,335 ●	1,832

Numbers provided by the Department of Health and Human Services, commissioned VAED public hospital data for the period 2011/12 to 2013/14. Rates prepared by author #average annual rate per 1,000 persons based on the 2013 estimated resident population sourced from ABS 3235.0 Population by Age and Sex, Regions of Australia, 30<sup>th</sup> June 2013 - released August 2014. Rates are not standardised

## New Cancer Diagnoses

Between 2013 and 2015, Campaspe had a slightly higher rate of new cancer diagnoses per population than the state average (553 versus 529 per 100,000). However, rates are not age standardised and cancer prevalence increases with age.

The Campaspe rate of new diagnoses per male population (618) was much higher than the rate for females (488). Rates of new diagnoses in Campaspe population aged less than 20 years (42) and aged 20 to 29 years (86) were notably higher than the state averages (17 and 49 respectively).

Prostate cancer was the most common new cancer diagnosed, followed by breast cancer then melanoma. Compared to state average figures, rates of new diagnoses for melanoma were much higher in the Campaspe population (70 versus 43).

**Figure 145. New Cancer Diagnoses - by Population Group (2013 - 15)**

Population Group	Campaspe		Victoria Rate*
	No.	Rate*	
Total	612	553	529
Male	343	618	573
Female	269	488	487
Under 20	12	42	17
20-29	9	86	49
30-39	9	84	115
40-49	37	256	299
50-59	82	509	681
60-69	165	1,167	1,397
70-79	199	2,014	2,089
Over 80	99	1,570	2,696

Victorian Cancer Council commissioned data 2017. Rates prepared by author. \*Average annual rate per 2014 population in relevant population group. NOTE that rates are not standardised and the prevalence of many cancers increases with age

**Figure 146. New Cancer Diagnoses - by Cancer Type (2013 - 15)**

Cancer Type	Campaspe		Victoria Rate*
	No.	Rate*	
Prostate	79	142	147
Breast	77	140	144
Bowel	71	64	64
Lung	54	49	47
Melanoma	77	70	43
Lymphoma	34	31	26
Leukaemia	19	17	17
Kidney	19	17	15
Head & Neck	14	13	14
Pancreas	17	15	14
Uterus	16	29	25
Bladder	19	17	12
Myelodysplastic etc	8	7	12
Thyroid	6	5	10
Stomach	7	6	10
Liver	11	10	9
Cancer of unknown primary	8	7	9
Multiple myeloma	6	5	9
Brain & CNS	8	7	8
Oesophagus	10	9	6
All other cancers	52	47	45

Victorian Cancer Council commissioned data 2017. Rates prepared by author. \*Average annual rate per 2014 population in relevant population group. NOTE that rates are not standardised and the prevalence of many cancers increases with age

## Avoidable Mortality

### All Cancers

Between 2010 and 2014, Campaspe (31.4 per 100,000) had a higher estimated rate of avoidable mortality from all cancers compared to Victoria (28.6); while it had a similar rate compared to regional Victoria (31.6).

### Colorectal Cancer

Between 2010 and 2014, Campaspe (6.9 per 100,000) had a lower estimated rate of avoidable mortality from colorectal cancer compared to Victoria (9.5) and regional Victoria (10.1).

### Breast Cancer

Between 2010 and 2014, Campaspe (22.9 per 100,000) had a notably higher estimated rate of avoidable mortality from breast cancer compared to Victoria (16.4) and regional Victoria (17.0).

**Figure 147. Avoidable Deaths (at Ages 0 to 74 Years) from Cancer (2010-14)**

Location	All Cancers		Colorectal Cancer		Breast Cancer	
	No.	Rate*	No.	Rate*	No.	Rate*
Echuca/ Lockington - Gunbower	27	27.0	5	5.0	10	20.5 ●
Kyabram/ Rochester/ Rushworth	40	35.4 ●	10	8.7	13	25.1 ●
Campaspe (S)	67	31.4 ●	15	6.9	23	22.9 ●
Regional Victoria	2,372	31.6	767	10.1	617	17.0
<b>Victoria</b>	<b>7,501</b>	<b>28.6</b>	<b>2492</b>	<b>9.5</b>	<b>2161</b>	<b>16.4</b>

*Social Health Atlas of Australia, Population Health Areas and Local Government Areas, December 2016 release, PHIDU 2016 \*Average annual age standardised modelled estimate rate per 100,000 persons*

## Premature Mortality

### All Cancers

Between 2010 and 2014, Campaspe (109.4 per 100,000) had a higher estimated rate of premature deaths from all cancers compared to Victoria (96.3); while it had a similar rate compared to regional Victoria (108.2).

### Colorectal Cancer

Between 2010 and 2014, Campaspe (6.9 per 100,000) had a lower estimated rate of premature deaths from colorectal cancer compared to Victoria (9.3) and regional Victoria (9.9).

### Breast Cancer

Between 2010 and 2014, Campaspe (22.9 per 100,000) had a higher estimated rate of premature deaths from breast cancer compared to Victoria (16.4) and regional Victoria (17.0).

### Lung Cancer

Between 2010 and 2014, Campaspe (21.7 per 100,000) had a higher estimated rate of premature deaths from lung cancer compared to Victoria (19.0); while it had a similar rate compared to regional Victoria (22.2).

**Figure 148. Premature Deaths (at Ages 0 to 74 Years) from Cancer (2010-14)**

Location	All Cancers		Colorectal Cancer		Breast Cancer		Lung Cancer	
	No.	Rate*	No.	Rate*	No.	Rate*	No.	Rate*
Echuca/ Lockington - Gunbower	114	112.8 ●	5	5.0	10	20.5 ●	26	25.3 ●
Kyabram/ Rochester/ Rushworth	122	106.3 ●	10	8.7	13	25.1 ●	22	18.6
Campaspe (S)	235	109.4 ●	15	6.9	23	22.9 ●	48	21.7 ●
Regional Victoria		108.2		9.9		17.0		22.2
<b>Victoria</b>		<b>96.3</b>		<b>9.3</b>		<b>16.4</b>		<b>19.0</b>

*Social Health Atlas of Australia, Population Health Areas and Local Government Areas, December 2016 release, PHIDU 2016 \*Average annual age standardised modelled estimate rate per 100,000 persons*

## Cancer Deaths

Between 2013 and 2015, Campaspe had a much higher rate of cancer deaths per population than the state average (268 versus 187 per 100,000). However, rates are not age standardised and cancer prevalence increases with age.

The Campaspe rate of deaths per male population (281) was higher than the rate for females (256). Rates of deaths in Campaspe population aged 30 to 39 years (47) and 70 to 79 years (1,113) were notably higher than the state averages (13 and 828 respectively).

Lung cancer was the most cancer causing death (49) followed by breast in the female population (42) then bowel (36). Compared to state averages, rates of deaths were higher for most cancer types, particularly: breast and lung cancer.

**Figure 149. Cancer Deaths - by Population Group (2013 - 15)**

Population Group	Campaspe		Victoria Rate*
	No.	Rate*	
Total	297	268	187
Male	156	281	209
Female	141	256	164
Under 20	#		2
20-29	#		4
30-39	5	47	13
40-49	6	42	45
50-59	17	106	141
60-69	51	361	371
70-79	110	1,113	828
Over 80	106	1,681	1,797

Victorian Cancer Council commissioned data 2017. Rates prepared by author. \*Average annual rate per 2014 population in relevant population group NOTE that rates are not standardised and the prevalence of many cancers increases with age

**Figure 150. Cancer Deaths - by Cancer Type (2013 - 15)**

Population Group	Campaspe		Victoria Rate*
	No.	Rate*	
Prostate	17	31	25
Breast	23	42	25
Bowel	40	36	24
Lung	54	49	36
Melanoma	10	9	6
Lymphoma	14	13	7
Leukaemia	13	12	7
Head & Neck	6	5	4
Pancreas	18	16	11
Bladder	12	11	5
Stomach	6	5	7
Liver	12	11	6
Cancer of unknown primary	13	12	8
Multiple myeloma	6	5	4
Brain & CNS	7	6	6
Oesophagus	9	8	4
All other cancers	30	27	18

Victorian Cancer Council commissioned data 2017. Rates prepared by author. \*Average annual rate per 2014 population in relevant population group IMPORTANT NOTE : Rates are not standardised and the prevalence of many cancers increases with age

## Diabetes

In February 2017, data from the National Diabetes Support Scheme (NDSS) indicate there are 2,616 Campaspe residents with diabetes. Compared to the Victoria average (5.1%), Campaspe (6.4%) has a greater proportion of population with diabetes. NDSS registrations also indicate that the Campaspe population (89.7%) has a greater proportion of persons with Type 2 diabetes than the Victorian average (87.0%). Note that data is not standardised.

**Figure 151. Persons with Diabetes (2011 and February 2017)**

Location		2011	2017
Campaspe	Number	2,238	2,616
	Proportion of population	5.7% ●	6.4% ●
<b>Victoria</b>	<b>Proportion of population</b>	<b>4.5%</b>	<b>5.1%</b>

Map of National Diabetes Support Scheme Registrants, NDSS 2016 \* NDSS advises that it is possible that some persons with diabetes other than Type 1 and not requiring ongoing treatment may not be registered. Note: NDSS data is updated regularly. Please visit <http://www.diabetesmap.com.au> for most current LGA data.

**Figure 152. Proportion of Persons with Diabetes by Diabetes Type (%) (February 2017)**

Location	Type 2	Type 1	Gestational	Other
Campaspe	89.7%	8.1%	1.6%	0.6%
<b>Victoria</b>	<b>87.0%</b>	<b>9.3%</b>	<b>3.1%</b>	<b>0.6%</b>

Map of National Diabetes Support Scheme Registrants, NDSS 2016 \* NDSS advises that it is possible that some persons with diabetes other than Type 1 and not requiring ongoing treatment may not be registered. Note: NDSS data is updated regularly. Please visit <http://www.diabetesmap.com.au> for most current LGA data.

In 2014, compared to the Victorian average (5.3%) and the regional Victoria average (5.2%), Campaspe had a greater proportion (8.9%) of population that reported they had been diagnosed by a doctor with type 2 diabetes in their lifetime. Note that data from the NDSS above, suggest that prevalence of Type 2 diabetes in the Campaspe population is likely to be closer to 6.3%.

**Figure 153. Lifetime Prevalence of Type 2 Diabetes<sup>#</sup> (2014)**

Location	%
Campaspe	8.9 ●
Regional Victoria	5.2
<b>Victoria</b>	<b>5.3</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria, Melbourne. <sup>#</sup>Age standardised to 2011 Victorian population.

## Avoidable Deaths

Between 2010 and 2014, Campaspe (6.8) had a higher rate of avoidable mortality from diabetes in population aged 0 to 74 years compared to Victoria (5.1) and a slightly higher rate compared with regional Victoria (6.2). Within the PCP region, the Kyabram/Rochester/Rushworth PHA (7.7) had a notably higher estimated rate compared to the Echuca/Lockington-Gunbower PHA (5.9).

**Figure 154. Avoidable Deaths From Diabetes, Persons Aged 0 to 74 Years (2010-14)**

Location	Number	Rate*
Echuca/ Lockington - Gunbower	6	5.9 ●
Kyabram/ Rochester/ Rushworth	9	7.7 ●
Campaspe (S)	15	6.8 ●
Regional Victoria	474	6.2
<b>Victoria</b>	<b>1,340</b>	<b>5.1</b>

Social Health Atlas of Australia, Population Health Areas and Local Government Areas, December 2016 release, PHIDU 2016 \*Average annual age standardised modelled estimate rate per 100,000 persons

## Cardiovascular Disease

### Heart Disease

In 2014, compared to the Victorian average (7.2%) and the regional Victoria average (7.1%), Campaspe had a similar proportion (7.4%) of population that reported they had been diagnosed by a doctor with heart disease in their lifetime. Between 2011/12 and 2013/14, Campaspe hospitalisation rates\* (2,882) for circulatory system diseases and disorders were notably higher than the state average (1,823). \*Note that rates are not age standardised.

**Figure 155. Lifetime Prevalence of Heart Disease# (2014)**

Location	%
Campaspe	7.4 ●
Regional Victoria	7.1
<b>Victoria</b>	<b>7.2</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria, Melbourne. #Age standardised to 2011 Victorian population.

**Figure 156. Hospitalisations for Circulatory System Diseases and Disorders (2011/12 - 2013/14)**

Campaspe		Victoria
No.	Rate#	Rate#
3,208	2,882 ●	1,823

Numbers provided by the Department of Health and Human Services, commissioned VAED public hospital data for the period 2011/12 to 2013/14. Rates prepared by author #average annual rate per 1,000 persons based on the 2013 estimated resident population sourced from ABS 3235.0 Population by Age and Sex, Regions of Australia, 30<sup>th</sup> June 2013 - released August 2014. Rates are not standardised

### Circulatory System Diseases

In 2011-12, Campaspe Shire (17.0) had a slightly higher estimated rate of circulatory system diseases per 100 population than Victoria overall (16.6). The Echuca/ Lockington - Gunbower PHA had a slightly higher estimated rate than the Kyabram/Rochester/Rushworth PHA.

### Hypertensive Disease

In 2014, compared with Victoria (25.9%) and regional Victoria (28.0%), Campaspe (36.8%) had a much higher proportion of population who reported they had ever been told by a doctor that they have high blood pressure.

**Figure 157. Proportion of Population Diagnosed\* With High Blood Pressure (2014)**

Location	%
Campaspe	36.8 ●
Regional Victoria	28.0
<b>Victoria</b>	<b>25.9</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Modifiable risk factors contributing to chronic disease, State Government of Victoria, Melbourne. #Age standardised to the 2011 Victorian population. \*Where survey respondent reported that a doctor had ever diagnosed them with having high blood pressure

**Figure 158. Estimated Population With Circulatory System Diseases (2011-12)**

Location	Number	Rate*
Echuca/ Lockington - Gunbower (PHA)	3,446	17.2 ●
Kyabram/ Rochester/ Rushworth (PHA)	3,848	16.9 ●
Campaspe (S)	7,255	17.0 ●
Regional Victoria	258,228	17.1
<b>Victoria</b>	<b>900,395</b>	<b>16.6</b>

Social Health Atlas of Australia, Population Health Areas and Local Government Areas, December 2016 release, PHIDU 2016. \*Age Standardised modelled estimate rate per 100 persons



### High Cholesterol

In 2011-12, Campaspe LGA (34.2) as well as the Kyabram/Rochester/Rushworth PHA (35.5) had a higher rate of population with high blood cholesterol compared to the regional Victoria (34.1) and Victoria (33.4) average.

**Figure 159. High Blood Cholesterol<sup>#</sup> (2011-12)**

Location	Number	Rate*
Echuca/ Lockington - Gunbower	4,682	32.9
Kyabram/ Rochester/ Rushworth	5,380	35.5 ●
Campaspe (S)	10,009	34.2 ●
Regional Victoria	368,630	34.1
<b>Victoria</b>	<b>1,432,576</b>	<b>33.4</b>

*Social Health Atlas of Australia, Population Health Areas and Local Government Areas, December 2016 release, PHIDU 2016 \*Age Standardised modelled estimate rate per 100 persons*

### Stroke

In 2014, compared to the Victorian average (2.4%) and the regional Victoria average (2.6%), Campaspe had a slightly higher (3.1%) of population that reported they had been diagnosed by a doctor with stroke in their lifetime.

**Figure 160. Lifetime Prevalence of Stroke<sup>#</sup> (2014)**

Location	%
Campaspe	3.1 ●
Regional Victoria	2.6
<b>Victoria</b>	<b>2.4</b>

*Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria, Melbourne. #Age standardised to 2011 Victorian population.*

#### Avoidable Deaths Due to Cardiovascular Disease

Between 2010 and 2014, Campaspe (49.3) had a much higher estimated average annual rate of avoidable mortality from cardiovascular disease for population aged 0 to 74 years, compared with regional Victoria (39.5) and Victoria (33.7). Within the PCP region, the Kyabram/Rochester/ Rushworth PHA (54.8) had a notably higher estimated rate than the Echuca/Lockington-Gunbower PHA (43.3).

#### Avoidable Deaths Due to Ischaemic Heart Disease

Between 2010 and 2014, Campaspe (31.0) had a much higher estimated average annual rate of avoidable mortality from ischaemic heart disease for population aged 0 to 74 years, compared with regional Victoria (25.6) and Victoria (21.5). Within the PCP region, the Kyabram/Rochester/ Rushworth PHA (34.9) had a notably higher estimated rate than the Echuca/Lockington-Gunbower PHA (26.6).

#### Avoidable Deaths Due to Cerebrovascular Disease

Between 2010 and 2014, Campaspe (9.6) had a higher estimated average annual rate of avoidable mortality from cerebrovascular disease for population aged 0 to 74 years, compared with regional Victoria (9.0) and Victoria (8.0). Within the PCP region, the Echuca/Lockington-Gunbower PHA (10.7) had a higher estimated rate than the Kyabram/Rochester/ Rushworth PHA (8.6).

**Figure 161. Avoidable Deaths at Ages 0 to 74 Years: Cardiovascular Disease (2010 to 2014)**

Location	All cardiovascular system diseases		Ischaemic heart disease		Cerebrovascular diseases	
	No.	Rate*	No.	Rate*	No.	Rate*
Echuca/ Lockington - Gunbower	44	43.3 <span>●</span>	27	26.6 <span>●</span>	11	10.7 <span>●</span>
Kyabram/ Rochester/ Rushworth	63	54.8 <span>●</span>	40	34.9 <span>●</span>	10	8.6 <span>●</span>
Campaspe (S)	106	49.3 <span>●</span>	67	31.0 <span>●</span>	21	9.6 <span>●</span>
Regional Victoria	3001	39.5	1,945	25.6	689	9.0
Victoria	8827	33.7	5,626	21.5	2,110	8.0

*Social Health Atlas of Australia, Population Health Areas and Local Government Areas, December 2016 release, PHIDU 2016* \*Average annual age standardised modelled estimate rate per 100,000 persons

## Respiratory System Diseases

In 2011-12, Campaspe PCP (31.0) had a slightly higher estimated rate of all respiratory system diseases per 100 population than Victoria (29.7). However, over 2011/12 to 2013/14, Campaspe (2,021 per 1,000) had a notably higher rate of hospital separations\* for respiratory system diseases compared to Victoria (1,261 per 1,000). \* Rate is not age standardised.

### Asthma

In 2011-12, compared to Victoria (10.9) and regional Victoria (11.6), Campaspe (10.4\*) had a slightly lower proportion of population that reported they had current asthma#. However, data from other sources indicate that Campaspe has a slightly higher rate of overall asthma (not necessarily 'current') compared to Victoria.

### COPD

In 2011-12, Campaspe PCP (2.2) had a slightly higher estimated rate of COPD per 100 population compared to regional Victoria (2.1) and Victoria (1.9).

**Figure 162. Population with Current Asthma# (2011-2012)**

Location	%
Campaspe	10.4*
Regional Victoria	11.6
<b>Victoria</b>	<b>10.9</b>

Department of Health and Human Services 2014, Victorian Population Health Survey 2011-12 Survey findings, State Government of Victoria. Age standardised to the 2011 Victorian population. #Reported ever having been diagnosed with asthma by a doctor and have experienced asthma symptoms in the past 12 months. \* Estimate has a relative standard error (RSE) of between 25 and 50 per cent and should be interpreted with caution

**Figure 163. Estimated Population with Respiratory System Diseases# (2011 – 12)**

Location	Respiratory System Diseases		Asthma		COPD	
	No.	Rate*	No.	Rate*	No.	Rate*
Echuca/ Lockington - Gunbower	5,517	30.5 ●	2,578	14.2 ●	442	2.2 ●
Kyabram/ Rochester/ Rushworth	5,937	31.4 ●	2,523	13.3 ●	466	2.1 ●
Campaspe (S)	11,394	31.0 ●	5,076	13.7 ●	904	2.2 ●
Regional Victoria	433,328	31.8	184,268	13.5	31,622	2.1
<b>Victoria</b>	<b>1,655,044</b>	<b>29.7</b>	<b>604,850</b>	<b>10.9</b>	<b>103,728</b>	<b>1.9</b>

Social Health Atlas of Australia, Population Health Areas and Local Government Areas, December 2016 release, PHIDU 2016 \*Age Standardised modelled estimate rate per 100 persons

**Figure 164. Hospitalisations for Respiratory System Diseases and Disorders (2011/12 - 2013/14)**

Campaspe		Victoria
No.	Rate#	Rate#
2,250	2,021 ●	1,261

Numbers provided by the Department of Health and Human Services, commissioned VAED public hospital data for the period 2011/12 to 2013/14. Rates prepared by author #average annual rate per 1,000 persons based on the 2013 estimated resident population sourced from ABS 3235.0 Population by Age and Sex, Regions of Australia, 30th June 2013 - released August 2014. Rates are not standardised

### Avoidable Deaths Due to Respiratory System Diseases

Between 2010 and 2014, Campaspe (11.1) had a higher estimated average annual rate of avoidable mortality from respiratory system diseases compared with Victoria (8.0) and a similar rate to regional Victoria (11.0). Within the PCP region, the Kyabram/Rochester/Rushworth PHA (12.4) had a notably higher estimated rate than the Echuca/Lockington-Gunbower PHA (9.5).

### Avoidable Deaths Due To Chronic Obstructive Pulmonary Disease (COPD)

Between 2010 and 2014, Campaspe (9.6) had a higher estimated average annual rate of avoidable mortality from COPD compared with Victoria (7.3) and a similar rate to regional Victoria (9.9). Within the PCP region, the Kyabram/Rochester/Rushworth PHA (9.8) and the Echuca/Lockington-Gunbower PHA (9.4) had similar rates.

**Figure 165. Avoidable Deaths (at Ages 0 to 74 Years) from Respiratory System Diseases (2010 to 2014)**

Location	All Respiratory System Diseases		COPD	
	No.	Rate*	No.	Rate*
Echuca/ Lockington - Gunbower	10	9.5 ●	10	9.4 ●
Kyabram/ Rochester/ Rushworth	15	12.4 ●	12	9.8 ●
Campaspe (S)	25	11.1 ●	22	9.6 ●
Regional Victoria	854	11.0	782	9.9
<b>Victoria</b>	<b>2,109</b>	<b>8.0</b>	<b>1,913</b>	<b>7.3</b>

*Social Health Atlas of Australia, Population Health Areas and Local Government Areas, December 2016 release, PHIDU 2016 \*Average annual age standardised modelled estimate rate per 100,000 persons*

## Musculoskeletal System Diseases

### Osteoporosis

In 2014, compared to the Victorian average (5.2%) and regional Victoria average (6.0%), Campaspe (4.5%) had a lower proportion of population that reported they had been diagnosed by a doctor with osteoporosis in their lifetime.

**Figure 166. Lifetime Prevalence of Osteoporosis<sup>#</sup> (2014)**

Location	%
Campaspe	4.5
Regional Victoria	6.0
<b>Victoria</b>	<b>5.2</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria, Melbourne. <sup>#</sup>Age standardised to 2011 Victorian population.

### Arthritis

In 2014, compared to the Victorian average (19.8%) and the regional Victoria average (22.2%), Campaspe (24.3%) had a higher proportion of population that reported they had been diagnosed by a doctor with arthritis in their lifetime.

**Figure 167. Lifetime Prevalence of Arthritis<sup>#</sup> (2014)**

Location	%
Campaspe	24.3 ●
Regional Victoria	22.2
<b>Victoria</b>	<b>19.8</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria, Melbourne. <sup>#</sup>Age standardised to 2011 Victorian population.

In 2011/12, compared to Victoria (26.6 per 100), Campaspe (28.3) had a higher estimated rate of population with musculoskeletal diseases. They Kyabram/Rochester/Rushworth PHA (28.8) had a slightly higher rate than the Echuca/Lockington-Gunbower PHA (27.9) and both were higher than the state average but similar to the regional Victoria average (28.2)

**Figure 168. Estimated Population with Musculoskeletal Diseases - by PHA (2011-12)**

Location	All musculoskeletal diseases		Arthritis	
	No.	Rate*	No.	Rate*
Echuca/ Lockington - Gunbower (PHA)	5,415	27.9 ●	3,102	15.0 ●
Kyabram/ Rochester/ Rushworth (PHA)	6,146	28.8 ●	3,766	16.0 ●
Campaspe (S)	11,499	28.3 ●	6,830	15.5 ●
Regional Victoria	414,713	28.2	240,424	15.4
<b>Victoria</b>	<b>1,482,537</b>	<b>26.6</b>	<b>778,658</b>	<b>14.0</b>

Social Health Atlas of Australia, Population Health Areas and Local Government Areas, December 2016 release, PHIDU 2016 \*Age Standardised modelled estimate rate per 100 persons

**Figure 169. Hospitalisations for Diseases and Disorders of the Musculoskeletal System and Connective Tissue (2011/12 - 2013/14)**

Campaspe		Victoria
No.	Rate <sup>#</sup>	Rate <sup>#</sup>
3,455	3,104 ●	<b>1,709</b>

Numbers provided by the Department of Health and Human Services, commissioned VAED public hospital data for the period 2011/12 to 2013/14. Rates prepared by author #average annual rate per 1,000 persons based on the 2013 estimated resident population sourced from ABS 3235.0 Population by Age and Sex, Regions of Australia, 30<sup>th</sup> June 2013 - released August 2014. Rates are not standardised

# Infectious Diseases

*The following background information about infectious diseases has been extracted from` the Strategic Directions for Communicable Disease Prevention and Control 2009-12 document, Division of the Chief Health Officer, Queensland Government (2009).*

While the incidence of most communicable diseases has decreased with improved living conditions and immunisation, some have increased (eg. campylobacter enteritis, dengue, pertussis and salmonellosis). In addition, the changing world environment has resulted in an increased risk of bioterrorism, critical incidents and emerging communicable diseases (eg. Australian bat lyssavirus, Hendra virus, Murray Valley encephalitis and Japanese encephalitis). The arrival in Australia

of Pandemic (H1N1) 2009 (Human Swine Influenza) illustrates the vulnerability of Australians to the emergence of a novel influenza virus capable of causing a pandemic.

Communicable disease and environmental health professionals work with a range of partners to prevent diseases spreading from person to person, from animals to people, and from the environment to people, as well as controlling communicable disease outbreaks when they occur.

Some disease control and prevention methods include:

- immunisation
- community and health provider education
- surveillance and case finding
- post exposure prophylaxis
- hygiene and other disease transmission prevention activities
- ensuring food and water are free of organisms that cause disease
- controlling animals and vectors that carry disease (eg. mosquitoes)
- legislation, and
- outbreak control strategies.

## Notifiable Infectious Diseases

The Victorian Government's Department of Human Services conducts surveillance on infectious diseases. Data is obtained from medical practitioners and laboratories and reports are produced on a regular basis. It should be noted that this is only a measurement of the diseases that are presented at medical practitioners and laboratories and that, in many instances, diseases are not presented and, thus, not recorded in this data collection. As such, the data should only be interpreted in terms of what diseases were presented and not actual prevalence of a disease. Data is updated regularly on the Department's website and should be referred to for the most up to date figures.

The table below indicates that, in the 12 months leading to January 2017, the Campaspe PCP region had particularly high rates (compared to state averages) of: hepatitis C - newly acquired, cryptosporidiosis, salmonellosis, shiga-toxin and vero-toxin producing escherichia coli, pertussis, varicella zoster infection (unspecified), and Ross River infection. ***It is important to note that figures presented below have not been age or gender standardised.***

**Figure 170. Rates of Reported Notifiable Infectious Diseases (January 2016 to 2017)**

Notifiable condition	Campaspe		Victoria
	Count	Rate#	Rate#
<b>Blood Borne Viruses</b>	<b>22</b>	<b>60.0</b>	<b>79.2</b>
Hepatitis B - Unspecified	2	5.5	33.0
Hepatitis C - Newly acquired	3	8.2 ●	2.0
Hepatitis C - Unspecified	17	46.4 ●	42.8
<b>Enteric Diseases</b>	<b>101</b>	<b>275.5 ●</b>	<b>243.4</b>
Campylobacter infection	53	144.6 ●	139.9
Cryptosporidiosis	9	24.5 ●	14.6
Salmonellosis	34	92.7 ●	73.7
Shiga-toxin and Vero-toxin producing Escherichia coli	3	8.2 ●	0.6
Shigellosis	2	5.5	10.3
<b>Other Conditions</b>	<b>3</b>	<b>8.2</b>	<b>14.5</b>
Blood lead greater than 10 ug/dL	2	5.5 ●	2.5
Legionellosis	1	2.7 ●	1.4
<b>Sexually Transmissible Infections</b>	<b>7</b>	<b>19.1</b>	<b>137.4</b>
Gonococcal infection	6	16.4	96.1
Syphilis - Late	1	2.7	17.0
<b>Vaccine Preventable Diseases</b>	<b>121</b>	<b>330.0</b>	<b>386.4</b>
Influenza	47	128.2	236.9
Mumps	1	2.7 ●	0.6
Pertussis	34	92.7 ●	51.3
Pneumococcal infection (IPD)	2	5.5	7.2
Varicella zoster infection (Chickenpox)	4	10.9 ●	9.4
Varicella zoster infection (Shingles)	7	19.1	21.2
Varicella zoster infection (Unspecified)	26	70.9 ●	57.4
<b>Vector Borne Diseases</b>	<b>38</b>	<b>103.6 ●</b>	<b>18.7</b>
Dengue virus infection	3	8.2 ●	7.8
Flavivirus	1	2.7 ●	0.3
Malaria	1	2.7 ●	1.4
Ross River virus infection	33	90.0 ●	8.5

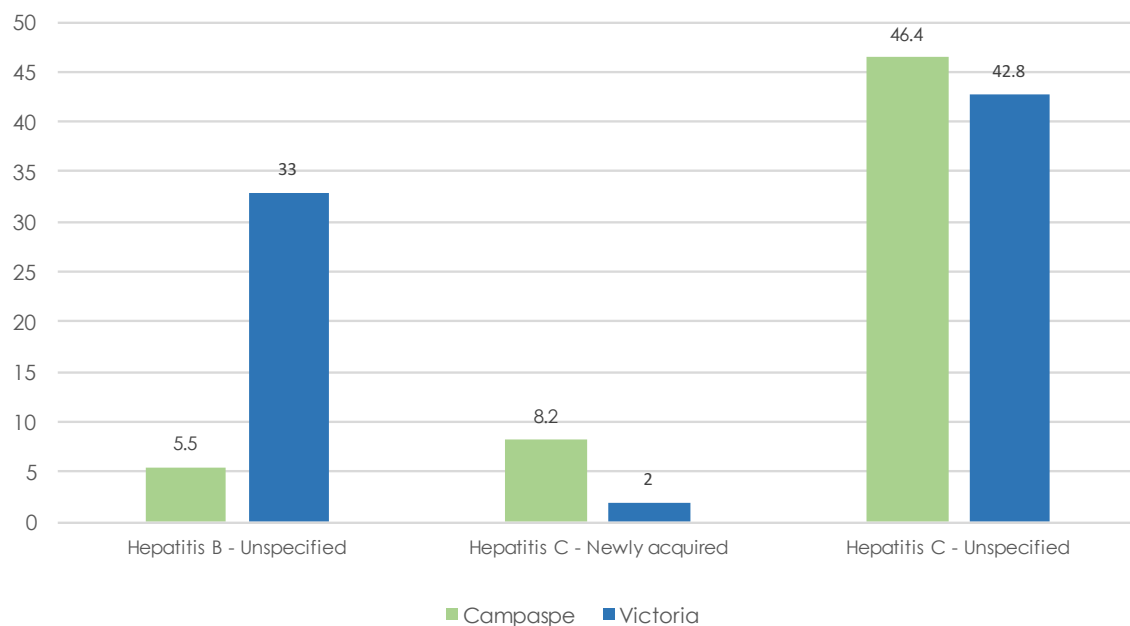
Department of Health – Communicable Disease Prevention and Control Unit -25th January 2017 # Rate per 100,000 for the 12 month period 26-Jan-2016 to 25-Jan-2017 calculated using ABS 2011 estimated resident population

### Blood Borne Diseases

Blood borne diseases are diseases in which an infectious agent present in the blood of an infected individual is transmitted by contact with the blood of a susceptible individual. *Infectious Diseases Epidemiology & Surveillance, Department of Health - January 2012*

Between January 2016 and 2017, compared to Victorian averages, Campaspe PCP had a higher rate of hepatitis C – unspecified (46.4 vs 42.8) and hepatitis C- newly acquired (8.2 vs 2.0). 'Unspecified' are cases of each disease where it was not able to be specified whether the disease had been acquired in the 24 months previous (which would make it 'newly acquired'). For detailed definitions and other information about notifiable diseases, please refer to the Australian national notifiable diseases case definitions available at <http://www.health.gov.au/internet/main/publishing.nsf/Content/cdna-casedefinitions.htm>

**Figure 171. Blood borne Virus Rates (January 2016 to 2017)**



Department of Health – Communicable Disease Prevention and Control Unit -25th January 2017 # Rate per 100,000 for the 12 month period 26-Jan-2016 to 25-Jan-2017 calculated using ABS 2011 estimated resident population

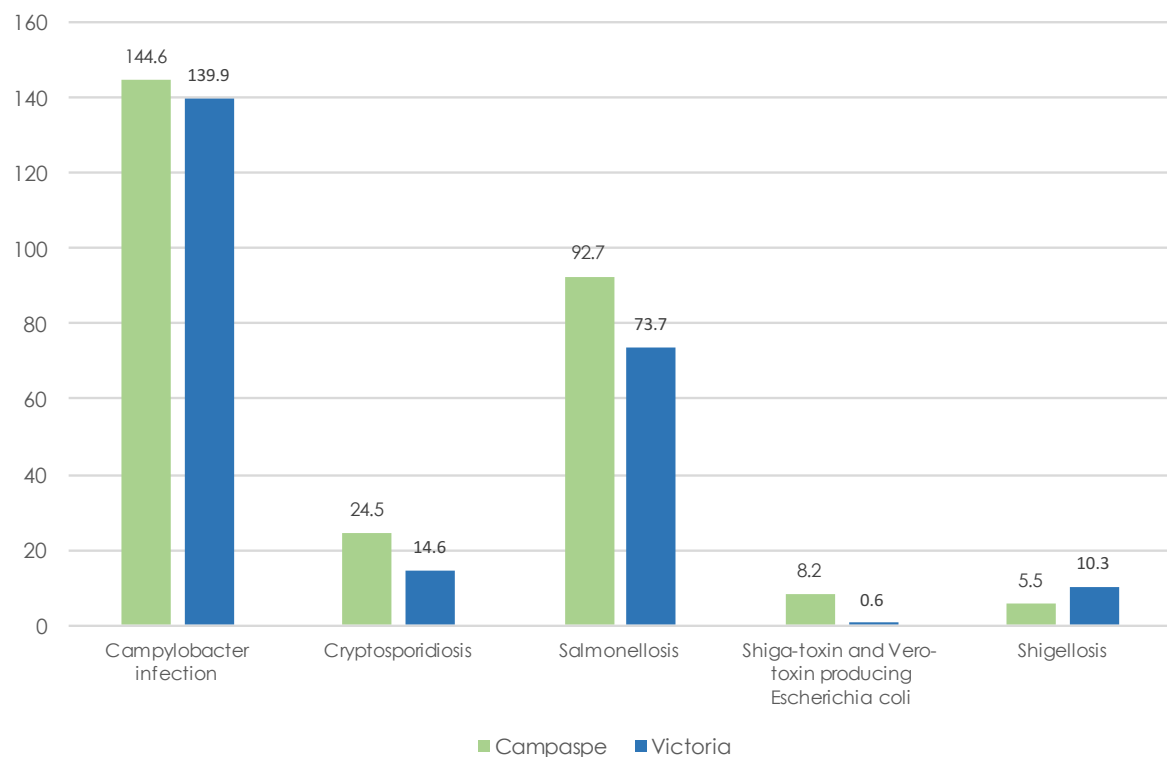


## Enteric Diseases

Enteric diseases are most commonly caused by an infectious agent entering the body through the mouth and intestinal tract. They are usually spread through contaminated food or water, or by contact with vomit or faeces. - Infectious Diseases Epidemiology & Surveillance, Department of Health - January 2012

Between January 2016 and 2017, compared to Victorian averages, Campaspe PCP had a higher rate of salmonellosis (92.7 vs 73.7), cryptosporidiosis (24.5 vs 14.6), shiga-toxin and vero-toxin producing *Escherichia coli* (8.2 vs 0.6) and of campylobacter infection (144.6 vs 139.9). For detailed definitions and other information about the notifiable diseases, please refer to the Australian national notifiable diseases case definitions available at <http://www.health.gov.au/internet/main/publishing.nsf/Content/cdna-casedefinitions.htm>

**Figure 172. Enteric Disease Rates (January 2016 to 2017)**

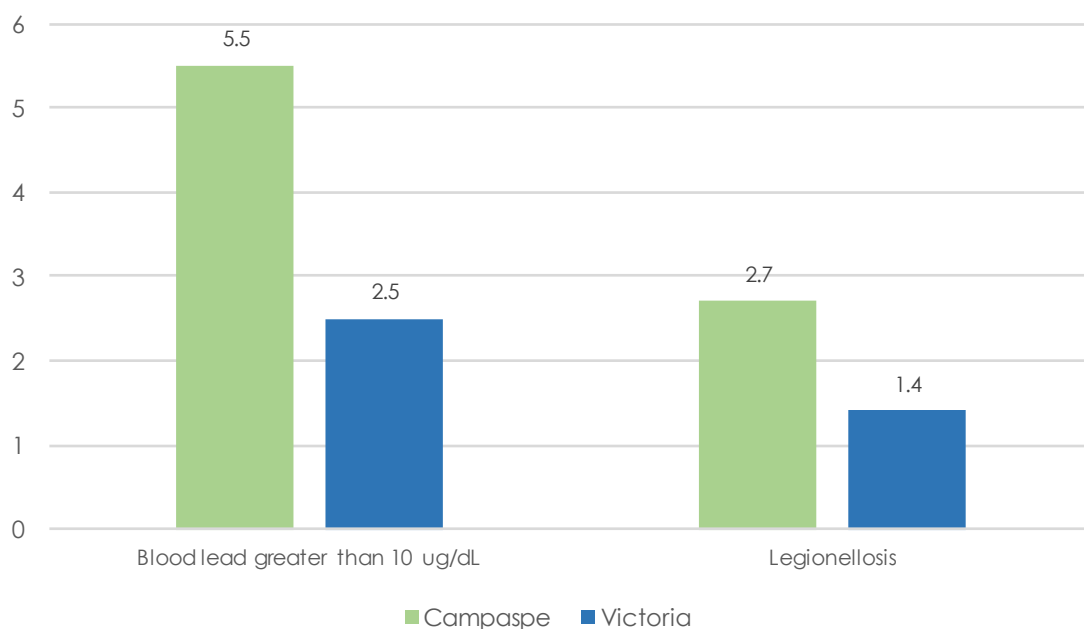


Department of Health – Communicable Disease Prevention and Control Unit -25th January 2017 # Rate per 100,000 for the 12 month period 26-Jan-2016 to 25-Jan-2017 calculated using ABS 2011 estimated resident population

### Other Notifiable Conditions

Between January 2016 and 2017, compared to Victorian averages, Campaspe PCP had a higher rate of blood lead greater than 10 ug/dL (5.5 vs 2.5) and of Legionellosis (2.7 vs 1.4). For detailed definitions and other information about the notifiable diseases, please refer to the Australian national notifiable diseases case definitions available at <http://www.health.gov.au/internet/main/publishing.nsf/Content/cdna-casedefinitions.htm>

**Figure 173. Other Notifiable Condition Rates (January 2016 to 2017)**



Department of Health – Communicable Disease Prevention and Control Unit -25th January 2017 # Rate per 100,000 for the 12 month period 26-Jan-2016 to 25-Jan-2017 calculated using ABS 2011 estimated resident population

### Reported Sexually Transmitted Infections

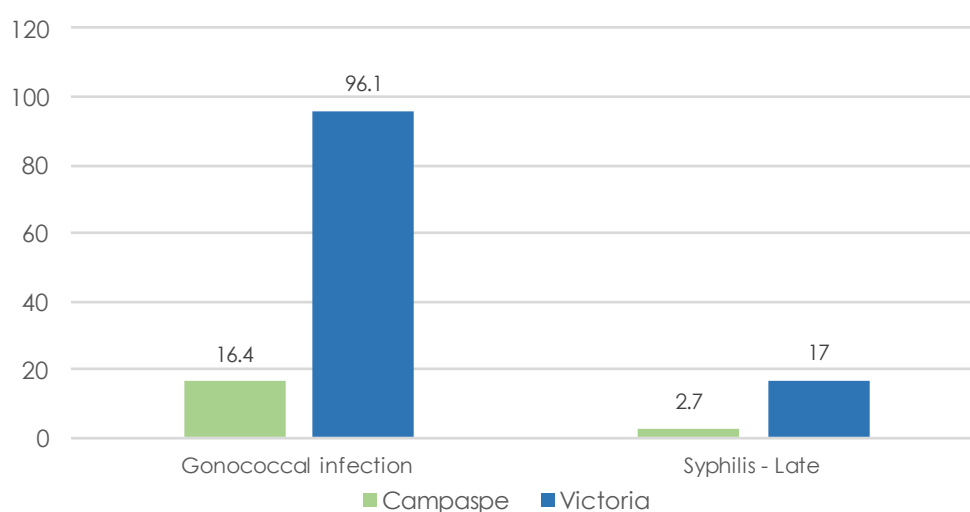
Sexually transmissible infections are diseases in which an infectious agent is transmitted from an infected individual to a susceptible individual through body fluids during sexual contact; including vaginal intercourse, oral sex, and anal sex. - *Infectious Diseases Epidemiology & Surveillance, Department of Health - January 2012*

Between January 2016 and 2017, compared to Victorian averages, Campaspe PCP had a lower rate of gonococcal infection (16.4 vs 96.1 ) and of Syphilis - late (2.7 vs 17). **Note: the Health Protection Branch of the Department of Health and Human Services has advised that, at the time of writing, Victorian chlamydia data is not available due to a data entry backlog.**

For detailed definitions and other information about notifiable diseases, please refer to the Australian national notifiable diseases case definitions available at

<http://www.health.gov.au/internet/main/publishing.nsf/Content/cdna-casedefinitions.htm>

**Figure 174. Sexually Transmitted infection Rates (January 2016 to 2017)**



Department of Health – Communicable Disease Prevention and Control Unit -25th January 2017 # Rate per 100,000 for the 12 month period 26-Jan-2016 to 25-Jan-2017 calculated using ABS 2011 estimated resident population

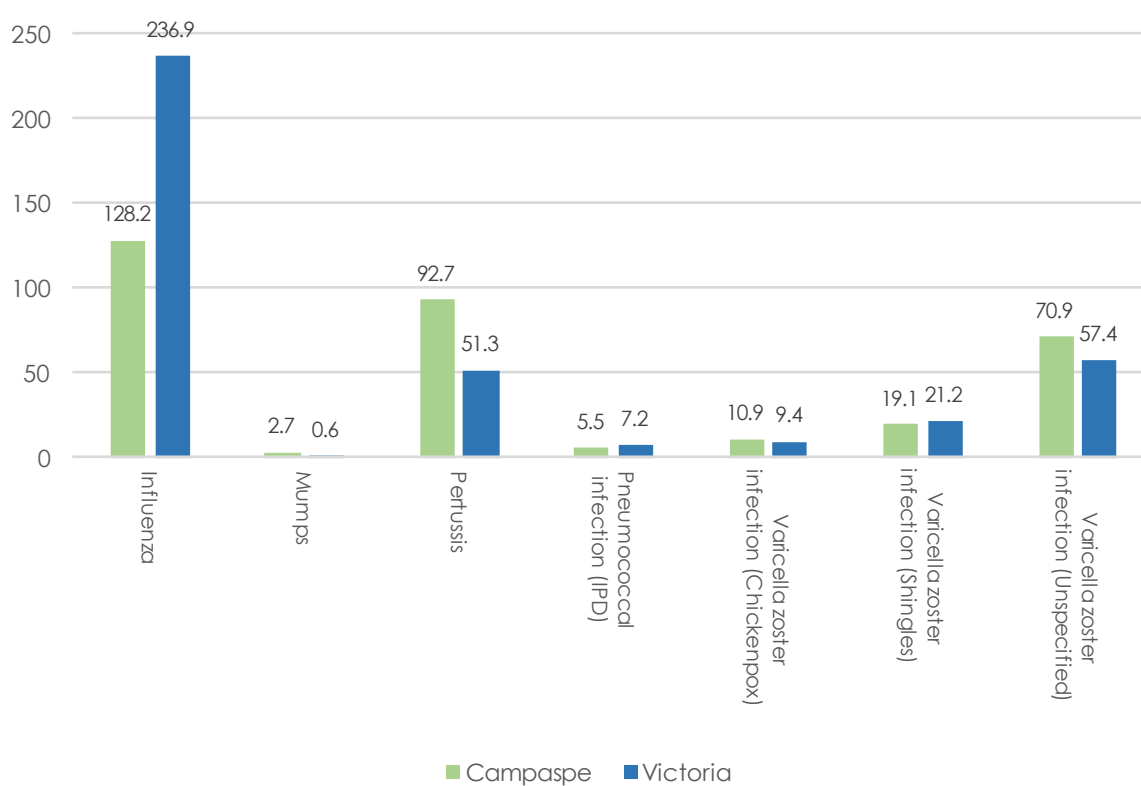
## Vaccine Preventable Diseases

The Vaccine Preventable Diseases listed below are those diseases that can be prevented by vaccines included on the National Immunisation Program. Other vaccine preventable (including cholera, hepatitis A, plague, rabies, bat lyssavirus, Japanese encephalitis, Q fever, tuberculosis, typhoid, and yellow fever) are not included in this group. - *Infectious Diseases Epidemiology & Surveillance, Department of Health - January 2012*

Between January 2016 and 2017, compared to Victorian averages, Campaspe PCP had a substantially higher rate of Pertussis (92.7 vs 51.3) as well as a higher rate of varicella zoster infection (unspecified) (70.9 vs 57.4), and slightly higher rates of mumps and chickenpox. For detailed definitions and other information about the notifiable diseases, please refer to the Australian national notifiable diseases case definitions available at

<http://www.health.gov.au/internet/main/publishing.nsf/Content/cdna-casedefinitions.htm>

**Figure 175. Vaccine Preventable Disease Rates (January 2016 to 2017)**



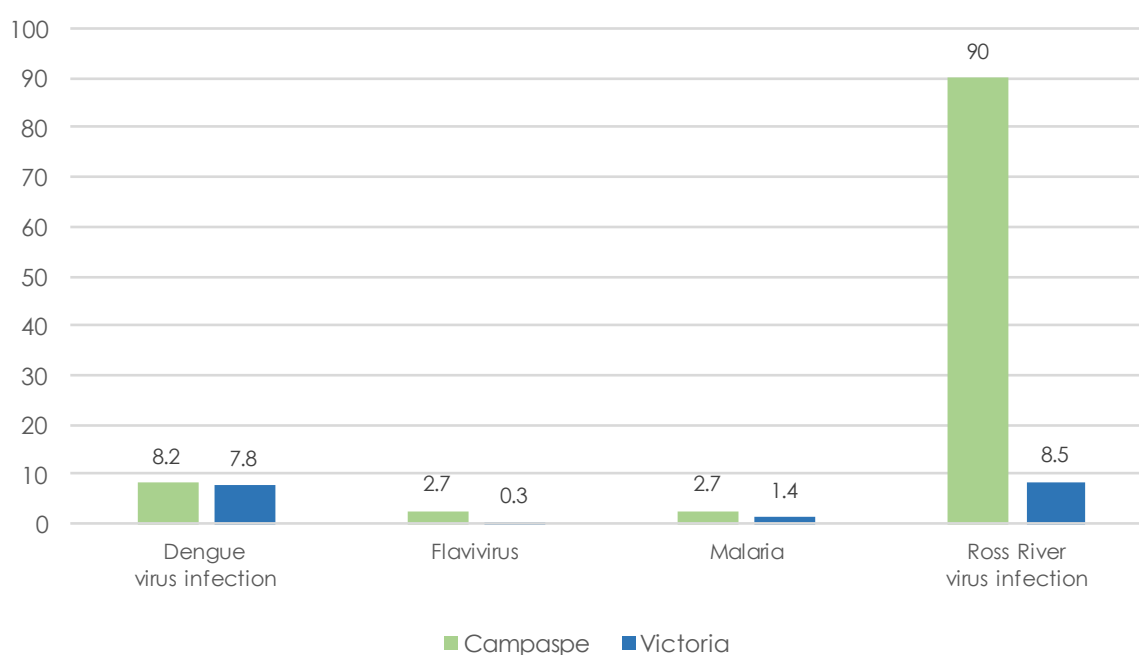
Department of Health – Communicable Disease Prevention and Control Unit -25th January 2017 # Rate per 100,000 for the 12 month period 26-Jan-2016 to 25-Jan-2017 calculated using ABS 2011 estimated resident population

## Vector Borne Diseases

Vector Borne Diseases are those in which the infectious agent is transmitted from an infected individual to a susceptible individual by an insect or other living character, such as by the bite of a blood-feeding vector or by other inoculation.- - *Infectious Diseases Epidemiology & Surveillance*, Department of Health - January 2012

Between January 2016 and 2017, compared to Victorian averages, Campaspe PCP had a substantially higher rate of Ross River virus (90.0 vs 8.5) and also had slightly higher rates of Dengue virus, Flavivirus and Malaria. For detailed definitions and other information about the notifiable diseases, please refer to the Australian national notifiable diseases case definitions available at <http://www.health.gov.au/internet/main/publishing.nsf/Content/cdna-casedefinitions.htm>

**Figure 176. Vector Borne Disease Rates (January 2016 to 2017)**



Department of Health – Communicable Disease Prevention and Control Unit -25th January 2017 # Rate per 100,000 for the 12 month period 26-Jan-2016 to 25-Jan-2017 calculated using ABS 2011 estimated resident population

## Eye Health

In 2014, compared to regional Victoria (39.5%) and Victoria (38.9%), a greater proportion of Campaspe population (43.5%) reported they had noticed a change in their vision in the past 12 months. However, compared to Victoria (89.1%), Campaspe (88.8%) had a slightly lower proportion of population that reported they had ever seen an eye professional. Additionally, Campaspe had a smaller proportion of population that had visited an eye clinic or specialist in the last 12 months (43.5% vs 51.0%) or the last two years (17.5% vs 22.7%).

**Figure 177. Persons that Noticed a Change in Vision in the Previous 12 Months (2014)**

Location	Rate*
Campaspe	43.5 ●
Regional Victoria	39.5
<b>Victoria</b>	<b>38.9</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria. #Self-reported \*Age standardised

**Figure 178. Ever seen an Eye Health Professional (2014)**

Location	Rate*
Campaspe	88.8
Regional Victoria	84.1
<b>Victoria</b>	<b>89.1</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria. #Self-reported \*Age standardised

**Figure 179. Last Visited an Eye Clinic or Specialist (2014)**

Location	<12 months %	≥1 <2 yrs %	≥2 <5 yrs %	≥5 yrs %
Campaspe	43.5	17.5	12.2	18.4*
Regional Victoria	50.5	23.0	14.3	11.4
<b>Victoria</b>	<b>51.0</b>	<b>22.7</b>	<b>15.3</b>	<b>10.5</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria. #Self-reported \*Age standardised

## Dental Health

In 2011-12, compared to Victoria (13.4% and 5.6% respectively), Campaspe (14.3% and 6.7%) had a slightly higher proportion of population that rated their dental health as fair or poor.

Just over 44% of Campaspe residents reported they had visited a dental health professional in the last 12 months, compared to the Victorian average of 56.7% and the regional Victoria average of 50.2%; while a notably greater proportion of Campaspe population (10.3%) reported that their last visit to a dental health professional was more than 10 years ago, compared to Victoria (5.0%) and regional Victoria (7.1%).

Compared to Victoria (30.1%) and regional Victoria (31.2%), a higher proportion of Campaspe residents (36.2%) reported that they had avoided or delayed visiting a dental professional because of cost.

**Figure 180. Self Rated Dental Health (%) (2011-12)**

Location	Excellent %	Very Good %	Good %	Fair %	Poor %	Not applicable* %
Campaspe	14.1	27.1	29.6	14.3 ●	6.7 ●	8.2
Regional Victoria	14.0	26.5	33.7	12.9	5.3	7.3
<b>Victoria</b>	<b>15.9</b>	<b>27.6</b>	<b>31.7</b>	<b>13.4</b>	<b>5.6</b>	<b>5.6</b>

Department of Health and Human Services 2014, Victorian Population Health Survey 2011-12 Survey findings, State Government of Victoria. Age standardised to the 2011 Victorian population. \*has dentures/no natural teeth

**Figure 181. Last Visit to a Dental Health Professional (%) (2011-12)**

Location	<12 mnts	1 yr - <2 yrs	2 yrs - <5 yrs	5 yrs - <10 yrs	>10 yrs	Never
Campaspe	44.1 ●	22.3	14.7	6.9* ●	10.3 ●	0.0
Regional Victoria	50.2	20.0	15.7	6.1	7.1	0.2*
<b>Victoria</b>	<b>56.7</b>	<b>18.2</b>	14.2	<b>5.1</b>	<b>5.0</b>	<b>0.4</b>

Department of Health and Human Services 2014, Victorian Population Health Survey 2011-12 Survey findings, State Government of Victoria. Age standardised to the 2011 Victorian population. \* Estimate has a relative standard error (RSE) of between 25 and 50 per cent and should be interpreted with caution

**Figure 182. Avoided Or Delayed (%) Visiting a Dental Professional Due to Cost (%) (2011-12)**

Location	Yes	No
Campaspe	36.2 ●	63.7
Regional Victoria	31.2	68.7
<b>Victoria</b>	<b>30.1</b>	<b>69.6</b>

Department of Health and Human Services 2014, Victorian Population Health Survey 2011-12 Survey findings, State Government of Victoria. Age standardised to the 2011 Victorian population.

In 2014-15, compared to the Victoria average, Campaspe had:

- A slightly higher rate of hospitalisations for dental condition ambulatory care sensitive conditions
- A slightly higher rate of hospitalisations of children aged 0-14 years; and of persons aged 25-59 years for dental condition ambulatory care sensitive conditions, and
- A slightly lower rate of hospitalisations of young children aged 0-4 years; of young people aged 15-24 years; and of persons aged 60 years and older.

**Figure 183. Admission Rate for Dental Conditions ACSC (2014/15)**

Campaspe Rate*	Regional Victoria Rate*	Victoria Rate*
2.9 ●	3.1	2.7

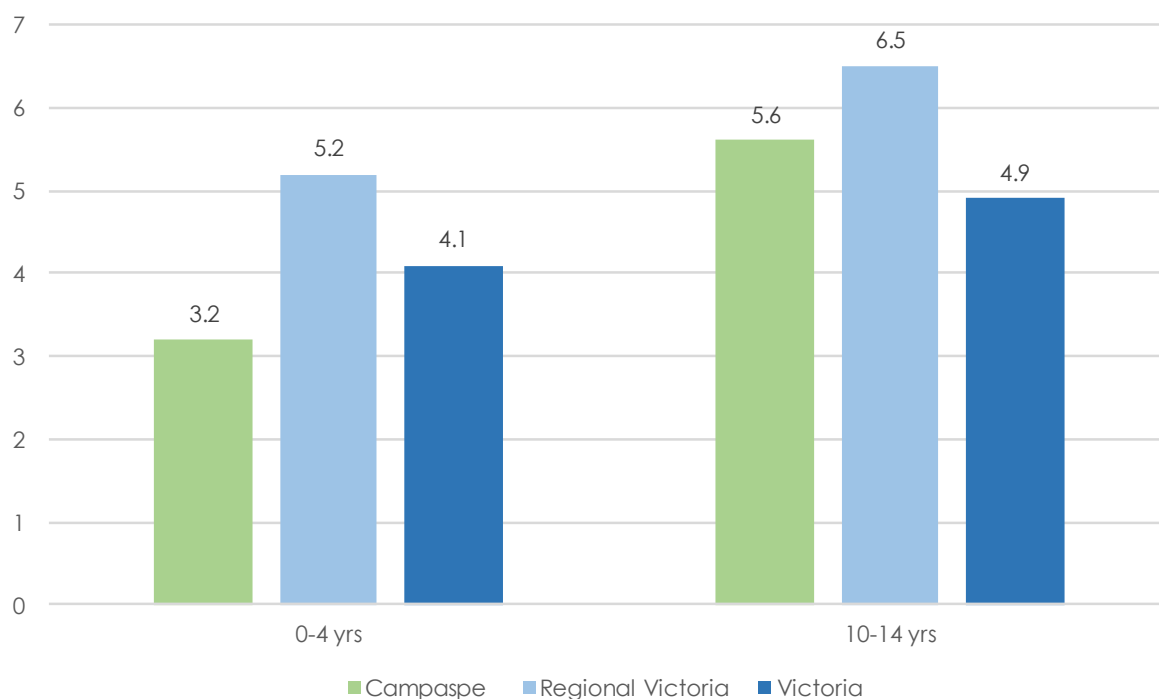
Victorian Health Information Surveillance System, DHHS, accessed online January 2017 \*Standardised rate per 1000 population, based on 2011 estimated resident population. #Excludes those ACSCs with rates less than 1 in 1,000

**Figure 184. Rate\* of Hospitalisations for ACSC Dental Conditions - by Age (2014-15)**

Location	0-4 yrs	10-14 yrs	15-24 yrs	25-59 yrs	>60 yrs
Campaspe	3.2	5.6 ●	2.1	2.2 ●	2.5
Regional Victoria	5.2	6.5	2.1	2.5	2.4
<b>Victoria</b>	<b>4.1</b>	<b>4.9</b>	<b>2.3</b>	<b>1.9</b>	<b>2.7</b>

Victorian Health Information Surveillance System, DHHS, accessed online January 2017 \*Standardised rate per 1000 population, based on 2011 estimated resident population.

**Figure 185. Rate\* of Hospitalisations for ACSC Dental Conditions in Young People - Chart (2014-15)**



Victorian Health Information Surveillance System, DHHS, accessed online January 2017 \*Standardised rate per 1000 population, based on 2011 estimated resident population.



**Figure 186. Public Dental Clinics in Region (2015)**

Location	Chairs
Bendigo Health Care Group	31
Echuca Regional Health	4
Rumbalara Aboriginal Co-op (Mooroopna)	4

*Murray Primary Health Network Oral Health Profile, dental health services Victoria, 2016*

### General Dental Care Waiting Times

Between July 2010 and June 2011, the average waiting time for general dental care treatment at public dental clinics was shorter than the state-wide average at Echuca Regional Health and notably longer at Bendigo Health Care Group.

**Figure 187. Average Time to Treatment for General Dental Care – Months (2010-11)**

	July – Sep 2010	Oct – Dec 2010	Jan – March 2011	Apr – June 2011
Bendigo Health Care Group	25	28	30	32
Echuca Regional Health	14	16	14	15
<b>State-wide average</b>	<b>18</b>	<b>18</b>	<b>17</b>	<b>17</b>

*Victorian Health Services Performance Report - September 2011 Quarter*

### Denture Care Waiting Times

Between July 2010 and June 2011, the average waiting time for denture care treatment at public dental clinics was longer than the state-wide average at Echuca Regional Health and at Bendigo Health Care Group in three out of the four quarters.

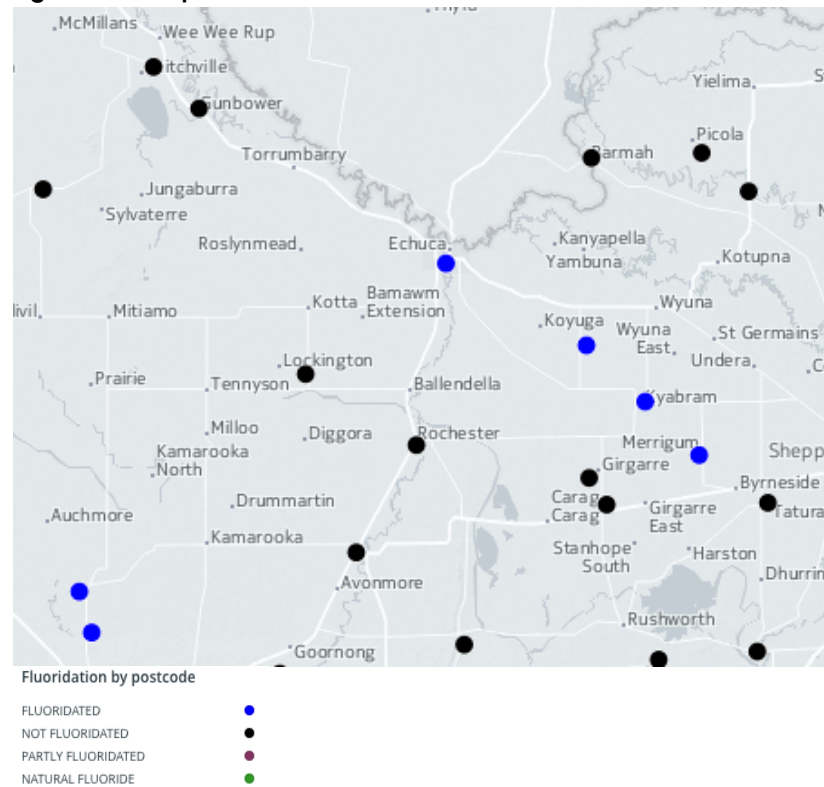
**Figure 188. Average Time to Treatment for Denture Care – Months (2010-11)**

	July – Sep 2010	Oct – Dec 2010	Jan – March 2011	Apr – June 2011
Bendigo Health Care Group	27	28	28	24
Echuca Regional Health	18	21	21	24
<b>State-wide average</b>	<b>19</b>	<b>18</b>	<b>17</b>	<b>17</b>

*Victorian Health Services Performance Report - September 2011 Quarter*

The water fluoridation map on the Department of Health website indicates that some locations in the Campaspe PCP region, including Rochester, Lockington, Gunbower, Carag, Avonmore and Rushworth do not have water fluoridation.

**Figure 189. Map of Areas with Water Fluoridation**



Fluoridation by Postcode Map, Victorian State Government Department of Health website, accessed January 2017

# Mental Health

**Figure 190. Resilience\* Score (2015)**

Location	Score (0 - 10)		
	M	F	Total
Campaspe	6.9	6.8	6.9
Regional Victoria	na	na	6.6
<b>Victoria</b>	<b>6.4</b>	<b>6.4</b>	<b>6.4</b>

VicHealth Indicators Survey 2015 Selected findings; Victorian Health Promotion Foundation, 2016 \*Survey participants were asked questions about their ability to adapt to change...and if they tend to bounce back after illness or hardship

## Psychological Distress

Psychological distress is a key risk factor for a wide range of health conditions and diseases, including migraine, cardiovascular disease, COPD, cerebrovascular disease, injury, self harm, obesity, depression and anxiety. Psychological distress is also a significant risk factor for risky drinking, smoking and drug use. (Victorian Population Health Survey 2011-12, Department of Health, Victoria State Government 2014).

The Kessler 10 Psychological Distress Scale (K10) categorises levels of psychological distress and has been validated as a simple measure of anxiety, depression and worry. Based on their score, individuals are categorised as having low, moderate, high or very high levels of psychological distress.

In 2014, compared to the regional Victoria (13.1%) and Victoria (12.6%) average, a higher proportion of Campaspe population (18.3%) had a high or very high level of psychological distress.

**Figure 191. Population With a High or Very High Level of Psychological Distress (2014)**

Location	Rate*
Campaspe	18.3 ●
Regional Victoria	13.1
<b>Victoria</b>	<b>12.6</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Modifiable risk factors contributing to chronic disease, State Government of Victoria, Melbourne. \*Age standardised rate per 100 persons

State-wide findings from the 2014 Victorian Population Health Survey indicate that:

- Females were more likely to have high / very high levels of psychological distress compared with males
- Males and females aged 18-24 years were most likely to have high / very high levels of psychological distress, and
- Generally speaking, the proportion of population with high / very high levels of psychological distress decreased with age until the age of 85 years (when it increased slightly).

In 2011-12, compared to Victoria, the proportion of persons who reported they were totally unable to work, study or manage day to day activities for zero (none) days due to psychological distress was higher in Campaspe (90.0%) than the Victoria average (87.2%).

**Figure 192. No. of days totally unable to work, study or manage daily activities due to psychological distress# (2011-12)**

Location	None	1 - 7 days	8 - 14 days	15 - 28 days
Campaspe	90.0	6.4	**	1.3*
Regional Victoria	88.6	7.5	1.3	1.8
<b>Victoria</b>	<b>87.2</b>	<b>9.0</b>	<b>1.1</b>	<b>1.4</b>

Department of Health and Human Services 2014, Victorian Population Health Survey 2011-12 Survey findings, State Government of Victoria.  
#Age standardised to 2011 Victorian population. \* Estimate has a relative standard error (RSE) of between 25 and 50 per cent and should be interpreted with caution. \*\* Estimate has a RSE greater than 50 per cent and is not reported as it is unreliable for general use.

In 2011-12, the proportion of persons who reported they had to cut down on work, study or managing day to day activities for zero (none) days due to psychological distress was higher in Campaspe (82.2%) than the Victoria average (79.0%).

**Figure 193. No. of Days Had to Cut Down on Work, Study or Manage Daily Activities Due to Psychological Distress# (% of population) (2011-12)**

Location	None	1 - 7 days	8 - 14 days	15 - 28 days
Campaspe	82.2	13.9	**	1.9*
Regional Victoria	81.9	12.7	2.4	2.2
<b>Victoria</b>	<b>79.0</b>	<b>15.3</b>	<b>2.0</b>	<b>2.3</b>

Department of Health and Human Services 2014, Victorian Population Health Survey 2011-12 Survey findings, State Government of Victoria.  
#Age standardised to 2011 Victorian population. \* Estimate has a relative standard error (RSE) of between 25 and 50 per cent and should be interpreted with caution. \*\* Estimate has a RSE greater than 50 per cent and is not reported as it is unreliable for general use.

In 2011-12, compared to Victoria, the proportion of Campaspe population (90.4%) who reported they had never visited a health professional due to psychological distress was higher than the Victoria average (88.1%).

The proportion of Campaspe population (9.0%) that reported physical ill health was the main cause of psychological distress all or most of the time was the same as or similar to the Victoria (9.0%) and regional Victoria (9.6%) averages.

**Figure 194. No. of Visits to a Health Professional Due to Psychological Distress# (2011-12)**

Location	None	Once	Twice	> twice
Campaspe	90.4	4.4*	3.6*	1.4*
Regional Victoria	88.2	6.3	2.7	2.3
<b>Victoria</b>	<b>88.1</b>	<b>6.2</b>	<b>2.6</b>	<b>2.3</b>

Department of Health and Human Services 2014, Victorian Population Health Survey 2011-12 Survey findings, State Government of Victoria.  
#Age standardised to 2011 Victorian population. \*Estimate has a relative standard error (RSE) of between 25 and 50 per cent and should be interpreted with caution. \*\* Estimate has a RSE greater than 50 per cent and is not reported as it is unreliable for general use.

**Figure 195. Physical Ill Health as Main Cause of Psychological Distress All / Most of Time (2011-12)**

Location	% all or most of the time
Campaspe	9.0
Regional Victoria	9.6
<b>Victoria</b>	<b>9.0</b>

Department of Health and Human Services 2014, Victorian Population Health Survey 2011-12 Survey findings, State Government of Victoria.  
#Age standardised to 2011 Victorian population.

# Social Connection and Support

## Community Interaction

In 2011-12, compared to state averages, Campaspe residents were much more likely to be engaging and connecting with their community, particularly through volunteering (49.4%) and attending local community events (76.6%). Campaspe residents were also much more likely to be members of sports groups (35.9%) or groups that have taken local action (35.8%).

Campaspe residents (16.4%) were less likely the regional Victoria (21.6%) or Victoria (21.4%) average to report they had only spoken to 0 to 4 people the previous day; while Campaspe residents (58.3%) were more likely to report they had spoken with 10 or more people the previous day compared to regional Victoria (52.4%) or Victoria (51.2%).

**Figure 196. Community Engagement (2011)**

Location	Volunteering (≥ once per month)	Citizen engagement (in last year)	Attended a local community event in last 6 months (%)	Member of a decision- making board/ committee
Campaspe	49.4	57.9	76.6	24.0
Reg Victoria	na	na	68.4	21.4
<b>Victoria</b>	<b>33.9</b>	<b>50.1</b>	<b>55.3</b>	<b>17.8</b>

*VicHealth Indicators Survey 2011, VicHealth 2012 and Victorian Population Health Survey 2011-12, Survey findings - Social capital, Department of Health & Human Services 2015. Note figures are age-standardised na = figure not available*

**Figure 197. Persons (%) Who are Members of Organised Group (2011-12)**

Location	Sports group	Religious group	School group	Professional group	Other community/ action group	Group that has taken local action
Campaspe	35.9	17.9	14.3	20.9	21.5	35.8
Regional Victoria	31.3	17.1	13.6	20.0	22.7	30.3
<b>Victoria</b>	<b>26.5</b>	<b>18.0</b>	<b>12.5</b>	<b>24.0</b>	<b>18.7</b>	<b>25.7</b>

*Victorian Population Health Survey 2011-12, Survey findings - Social capital, Department of Health & Human Services 2015. Note figures are age-standardised*

**Figure 198. Number of People Spoken to Previous Day# (%) (2011-12)**

Location	0 - 4 people	5 - 9 people	≥10 people
Campaspe	16.4	25.3	58.3
Regional Victoria	21.6	27.4	52.4
<b>Victoria</b>	<b>21.4</b>	<b>27.1</b>	<b>51.2</b>

*Department of Health and Human Services 2014, Victorian Population Health Survey 2011-12 Survey findings, State Government of Victoria. #Age standardised to 2011 Victorian population.*

## Trust in Community

In 2015, compared to regional Victoria (81.3%) and Victoria (74.1%) averages, a greater proportion of Campaspe residents (85.2%) reported they believed people in their Neighbourhood are willing to help each other.

Campaspe residents (75.7%) were also much more likely to report they believe they live in a close-knit neighbourhood, compared to regional Victoria (70.1%) and Victoria (61.0%) averages; while they were more likely than the state average (71.9%) and similarly likely compared to the regional Victoria average (78.2%) to state they believe people in their neighbourhood can be trusted (77.5%).

**Figure 199. Population Who Believe People in Their Neighborhood Are Willing To Help Each Other (2015)**

Location	M	F	Total
Campaspe	82.0	88.3	85.2
Regional Victoria	na	na	81.3
<b>Victoria</b>	<b>72.6</b>	<b>75.6</b>	<b>74.1</b>

*VicHealth Indicators Survey 2015 Selected findings; Victorian Health Promotion Foundation, 2016*

**Figure 200. Population Who Believe They Live In a Close-knit Neighbourhood (2015)**

Location	M	F	Total
Campaspe	74.1	77.2	75.7
Regional Victoria	na	na	70.1
<b>Victoria</b>	<b>59.5</b>	<b>62.5</b>	<b>61.0</b>

*VicHealth Indicators Survey 2015 Selected findings; Victorian Health Promotion Foundation, 2016*

**Figure 201. Population Who Believe People in Their Neighborhood Can Be Trusted (2015)**

Location	M	F	Total
Campaspe	73.4	81.5	77.5
Regional Victoria	na	na	78.2
<b>Victoria</b>	<b>71.6</b>	<b>72.1</b>	<b>71.9</b>

*VicHealth Indicators Survey 2015 Selected findings; Victorian Health Promotion Foundation, 2016*

## Support from Community

In 2011-12, compared to regional Victoria, Campaspe residents were similarly as likely to report they:

- Definitely feel valued by society (53.5% vs 52.8%)
- Attended a support group meeting (10.6% vs 10.4%)
- received help from a volunteer organisation (5.1% vs 5.4%), and
- Were definitely able to get help from neighbours when needed (63.0% vs 62.0%).

Campaspe residents, compared to regional Victoria, were more likely to report they were definitely able to get help:

- From a relative / friend to find a job (66.0% vs 59.6%)
- With care in an emergency (93.4% vs 91.6%)
- From family when needed (87.0% vs 82.7%), and
- From friends when needed (89.1% vs 83.3%).

However, compared to the state average, a greater proportion of Campaspe population had a low level of support for gender equality in relationships (males and females).

**Figure 202. Support from Community**

Indicator	Campaspe	Regional Victoria	Victoria
Feels valued by society (yes, definitely response)	53.5	52.8	<b>52.6</b>
Attended a support group meeting	10.6	10.4	<b>9.1</b>
Received help from a volunteer organisation	5.1*	5.4	<b>5.0</b>
Able to get help from a relative or friend to find job	66.0	59.6	<b>55.7</b>
Able to get help with care in an emergency	93.4	91.6	<b>89.8</b>

Department of Health and Human Services 2014, Victorian Population Health Survey 2011-12 Survey findings, State Government of Victoria.  
#Age standardised to 2011 Victorian population.

**Figure 203. Persons (%) Who Can Definitely Get Help When Needed (2011-12)**

Location	From family	From friends	From neighbours
Campaspe	87.0	89.1	63.0
Regional Victoria	82.7	83.3	62.0
<b>Victoria</b>	<b>82.6</b>	<b>81.9</b>	<b>54.4</b>

Victorian Population Health Survey 2011-12, Survey findings - Social capital, Department of Health & Human Services 2015. Note figures are age-standardised

**Figure 204. Population With Low Level of Support For Gender Equality in Relationships (2015)**

Location	M	F	Total
Campaspe	45.9	33.5	39.6
Regional Victoria	na	na	31.7
<b>Victoria</b>	<b>43.7</b>	<b>26.1</b>	<b>35.7</b>

VicHealth Indicators Survey 2015 Selected findings; Victorian Health Promotion Foundation, 2016

## Participation in Arts Activities

In 2011, compared to Victoria (63.8 and 35.2 respectively), Campaspe residents were notably less likely to have attended arts activities or events (50.8) or made or created art or crafts (31.6) in the last three months.

**Figure 205. Participation in Arts and Social Media\* (2011)**

Location	Attended arts activities or events (in the last 3 months)	Made or created art or crafts (in the last 3 months)
Campaspe	50.8 ●	31.6 ●
<b>Victoria</b>	<b>63.8</b>	<b>35.2</b>

*VicHealth Indicators Survey 2011, VicHealth 2012 \*age-standardised rate per 100 persons*

## People Living Alone

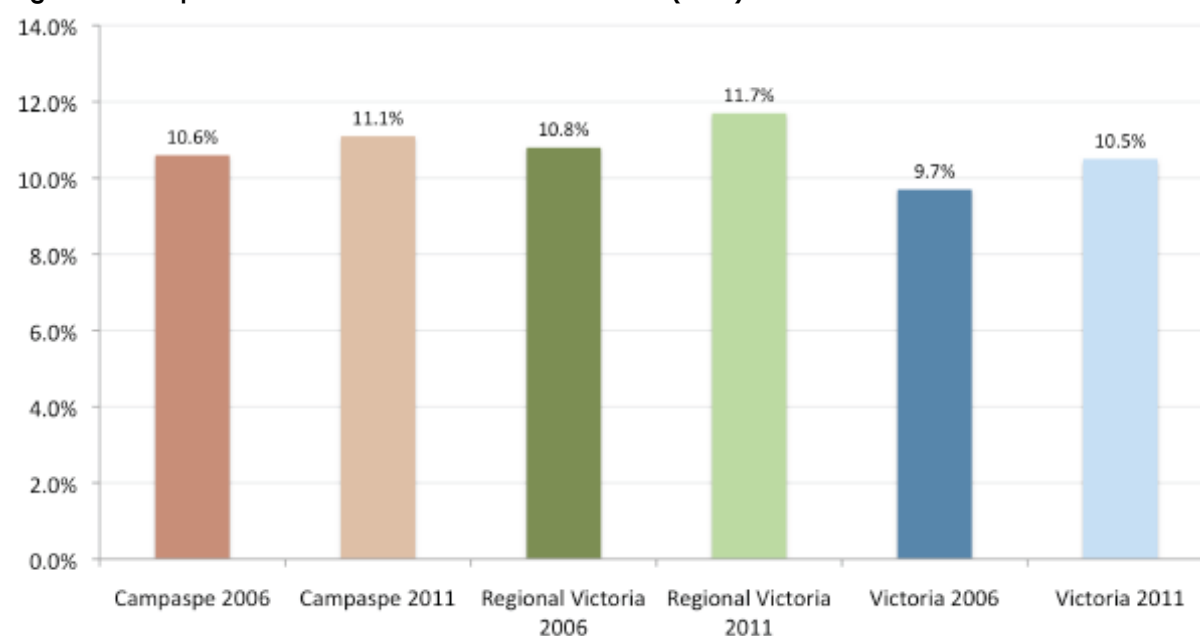
In 2011, the proportion of total population living alone in Campaspe was slightly higher (11.1%) than the Victoria average (10.5%), and lower than the regional Victoria average (11.7%). Between 2006 and 2011, the proportion of lone person households increased in Campaspe.

**Figure 206. Proportion of Lone Person Households (2011)**

Location	Year	Number	% of total population
Campaspe	2006	3,438	10.6%
	2011	3,704	11.1%
Regional Victoria	2006	-	10.8%
	2011	-	11.7%
<b>Victoria</b>	<b>2006</b>	-	<b>9.7%</b>
	<b>2011</b>	-	<b>10.5%</b>

*2011 Census of Population and Housing, Basic Community Profiles, ABS*

**Figure 207. Proportion of Lone Person Households - Chart (2011)**



*2011 Census of Population and Housing, Basic Community Profiles, ABS*



## Internet Access At Home

In 2011, just under 82% of Campaspe residents had internet access at home and this figure was notably lower than the Victorian average of 88.5%. Compared to the Victorian average (37.4%) in 2011, a slightly smaller proportion of Campaspe residents (36.1%) used social networking to organise time with family and friends.

**Figure 208. Persons with internet access at home (2011)**

Location	%
Campaspe	81.8 ●
<b>Victoria</b>	<b>88.5</b>

*VicHealth Indicators Survey 2011 Selected findings; Victorian Health Promotion Foundation, 2012*

**Figure 209. Social networking used to organise time with family and friends (2011)**

Location	%
Campaspe	36.1
<b>Victoria</b>	<b>37.4</b>

*VicHealth Indicators Survey 2011 Selected findings; Victorian Health Promotion Foundation, 2012*

## Prevalence of Mental Health Problems

In 2011-12, Campaspe (14.1) had a greater proportion of estimated population with mental and behavioural problems compared with Victoria (12.7) and a similar proportion to regional Victoria (14.0). Reflecting the state trend, Campaspe females (16.6) were estimated to be more likely to have mental and behavioural problems than Campaspe males (11.7).

**Figure 210. Estimated Population With Mental and Behavioural Problems (2011-12)**

Location	Persons		Males		Females	
	No.	Rate*	No.	Rate*	No.	Rate*
Echuca/ Lockington - Gunbower	2,611	14.4 ●	2,611	14.4 ●	1,545	17.0 ●
Kyabram/ Rochester/ Rushworth	2,641	13.9 ●	2,641	13.9 ●	1,509	16.3 ●
Campaspe (S)	5,226	14.1 ●	2,187	11.7	3,039	16.6 ●
Regional Victoria	191,782	14.0	296,800	10.8	109,671	16.0
<b>Victoria</b>	<b>707,539</b>	<b>12.7</b>	<b>82,111</b>	<b>12.0</b>	<b>410,739</b>	<b>14.6</b>

*Social Health Atlas of Australia, Population Health Areas and Local Government Areas, December 2016 release, PHIDU 2016 \*Age Standardised modelled estimate rate per 100 persons*

## Mood (Affective) Problems

The estimates of self-reported mood problems data indicates that, compared to regional Victoria and Victoria, males and females from Campaspe – Echuca and Campaspe – South SLAs were more likely to have reported having mood problems. Within the region, Campaspe - South SLA had the highest rate for males and females. Campaspe Shire, overall, had a rate that was slightly lower than the regional Victoria average and the same as the Victoria average.

**Figure 211. People With Mood Problems (2007-08)**

Location	Males		Females	
	Number	Rate in 100	Number	Rate in 100
<b>Statistical Local Areas</b>				
Campaspe – Echuca	394	6.5	564	8.6
Campaspe – Kyabram	386	6.2	480	8.0
Campaspe – Rochester	255	6.0	288	7.5
Campaspe - South	141	6.6	167	9.7
Campaspe Shire	1,176	6.3	1,500	8.3
Regional Victoria	44,352	6.4	59,109	8.5
<b>Victoria</b>	<b>156,455</b>	<b>6.0</b>	<b>222,683</b>	<b>8.3</b>

*Public Health Information Development Unit - 2011*

## Depression and Anxiety

In 2014, compared to the Victorian average (24.2%), Campaspe (24.3%) had a similar proportion of population that reported they had been diagnosed by a doctor with depression or anxiety in their lifetime; while it had a lower proportion compared to the regional Victoria average (28.7%).

**Figure 212. Lifetime Prevalence of Depression or Anxiety<sup>#</sup> (2014)**

Location	%
Campaspe	24.3
Regional Victoria	28.7
<b>Victoria</b>	<b>24.2</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria, Melbourne. <sup>#</sup>Age standardised to 2011 Victorian population.

In 2014, compared to the Victorian average (16.0%), Campaspe (17.1%) had a slightly higher proportion of population that reported they had sought professional help for a mental health problem; while it had a slightly lower proportion compared to the regional Victoria average (18.1%).

**Figure 213. Sought Professional Help For a Mental Health Problem<sup>#</sup> (2014)**

Location	%
Campaspe	17.1 ●
Regional Victoria	18.1
<b>Victoria</b>	<b>16.0</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Health and wellbeing, chronic conditions, screening and eye health, State Government of Victoria, Melbourne. <sup>#</sup>Age standardised to 2011 Victorian population.

## Hospital Separations and Presentations

Between 2011/12 and 2013/14, there were 774 hospital separations for Campaspe residents where mental diseases and disorders was the major diagnostic category (MDC). The Campaspe rate (695) was higher than the Victoria average rate (615). Over the same period, there were 1,043 ED presentations for Campaspe residents for the psychiatric illness MDC and the Campaspe rate (937) was substantially higher than the Victoria average rate (576).

**Figure 214. Hospitalisations for Mental Diseases and Disorders (2011/12 - 2013/14)**

Campaspe		Victoria
No.	Rate <sup>#</sup>	Rate <sup>#</sup>
774	695 ●	615

Numbers provided by the Department of Health and Human Services, commissioned VAED public hospital data for the period 2011/12 to 2013/14. Rates prepared by author <sup>#</sup>average annual rate per 100,000 persons based on the 2013 estimated resident population sourced from ABS 3235.0 Population by Age and Sex, Regions of Australia, 30th June 2013 - released August 2014. Rates are not standardised

**Figure 215. Emergency Department Presentations For Psychiatric Illness<sup>#</sup> (2011-12 to 2013-14)**

Location	No.	2013 ERP	Rate*
Campaspe	1,043		937 ●
<b>Victoria</b>	<b>na</b>	<b>na</b>	<b>576</b>

Department of Health and Human Services, VEMD public hospital data for the period 2011/12 to 2013/14. Commissioned from HosData 2015/16 <sup>#</sup> Psychiatric illness major diagnostic category \*Average annual rate per 100,000 persons based on 2013 estimated resident population - sourced from ABS 3235.0 Population by Age and Sex, Regions of Australia, 30th June 2013 - released August 2014. Rates are not age standardised.

## Intentional Self Harm

### Hospitalisations

Between 2011-12 and 2013-14, there were 83 hospitalisations of Campaspe residents for injuries caused by intentional self harm. The average annual rate of hospitalisations was 75 per 100,000 Campaspe population, which was lower than the regional Victoria (114) and Victoria (100) rates. Females accounted for 67% of the hospitalisations, which was the same as the Victoria figure. The 15-24 year age group accounted for 27% of the hospitalised persons and this figure was lower than the Victorian average of 31%.

**Figure 216. Hospitalisations# for Injuries Caused by Intentional Self-Harm (2011-12 to 2013-14)**

Location	No.	2012 ERP	Rate*
Campaspe (S)	83	36,954	75
Regional Victoria	4,943	1,442,366	114
<b>Victoria**</b>	<b>16,926</b>	<b>5,628,348</b>	<b>100</b>

Victorian Injury Surveillance Unit (VISU), Monash University Injury Research Institute, commissioned data 2015 \* Average annual rate per 100,000 population based on the 2012 ERP

**Figure 217. Hospitalisations# for Injuries Caused by Intentional Self-Harm - by Sex (2011-12 to 2013-14)**

Location	Male		Females		Total	
	No.	%	No.	%	No.	%
Campaspe (S)	27	33%	56	67%	83	100%
<b>Victoria**</b>	<b>5,543</b>	<b>33%</b>	<b>11,379</b>	<b>67%</b>	<b>16,922</b>	<b>100%</b>

Victorian Injury Surveillance Unit (VISU), Monash University Injury Research Institute, commissioned data 2015 \* Average annual rate per 100,000 population based on the 2012 ERP

**Figure 218. Hospitalisations# for Injuries Caused by Intentional Self-Harm - by Age (2011-12 to 2013-14)**

Location	0-14 years		15-24 years		25-64 years		65+ years		Total
	No.	%	No.	%	No.	% of all	No.	% of all	No.
Campaspe	*		22	27%	51	61%	*		83
<b>Victoria**</b>	<b>434</b>	<b>3%</b>	<b>5,299</b>	<b>31%</b>	<b>10,423</b>	<b>62%</b>	<b>782</b>	<b>5%</b>	<b>16,938</b>

Victorian Injury Surveillance Unit (VISU), Monash University Injury Research Institute, commissioned data 2015 \* Average annual rate per 100,000 population based on the 2012 ERP

## Deaths

Between 2010 and 2014, compared to Victoria (9.6) and regional Victoria (12.4), Campaspe (8.5%) had a lower rate of premature deaths attributed to suicide and self-inflicted injuries. The estimated rate for the Echuca/ Lockington - Gunbower PHA (9.9) was highest in the PCP region and was slightly higher than the state average.

Sex and age breakdown of figures are not available for Campaspe due to small numbers, however, across Victoria, males accounted for 77% of all deaths caused by self-inflicted injuries (suicides) that took place in 2014.<sup>†</sup>

National figures for 2014 indicate that the greatest *number* of suicides in males and females occurred in the 30 to 54 year age cohort. However, as a *rate* of population in the respective age group, the highest rate of male suicides was in the 85 years and over age group, while the highest rate of female suicides was seen in the 35 to 44 years age group.<sup>†</sup>

<sup>†</sup> Causes of death, Australia, 2014, ABS 3303.0

**Figure 219. Premature Deaths (Ages 0 to 74 years) From Suicide and Self-Inflicted Injuries (2010-14)**

Location	No.	Rate*
Echuca/ Lockington - Gunbower	8	9.9 ●
Kyabram/ Rochester/ Rushworth	6	7.2
Campaspe (S)	14	8.5
Regional Victoria	776	12.4
<b>Victoria</b>	<b>2,540</b>	<b>9.6</b>

Social Health Atlas of Australia, Population Health Areas and Local Government Areas, December 2016 release, PHIDU 2016 \*Average annual age standardised modelled estimate rate per 100,000 persons

## Mental Health Care Plans

The Commonwealth Better Access initiative aims to provide better access to mental health practitioners through Medicare. It aims to increase community access to mental health professionals and team-based mental health care, by encouraging general practitioners to work more closely and collaboratively with psychiatrists, clinical psychologists, registered psychologists and appropriately trained social workers and occupational therapists.

In 2009/10, compared to the regional Victoria and Victoria average, Campaspe – Echuca, Kyabram and Rochester SLAs all had a lower rate of mental health care plans per 100,000 population that had been prepared by GPs through the Better Access Program. Within the PCP region, Campaspe – Rochester had the lowest rate and Campaspe – South had the highest rate. *Note that a high rate of mental health care plans prepared does not necessarily translate to a high rate of mental illness in that population.*

**Figure 220. Better Access Program - Preparation of Mental Health Care Plan by GPs (2009/10)**

Statistical Local Area	No.	Rate*
Campaspe (S) - Echuca	1,008	7,784.8
Campaspe (S) - Kyabram	695	5,756.2
Campaspe (S) - Rochester	400	4,900.1
Campaspe (S) - South	454	12,387.7
Regional Victoria	124,700	8,838.4
<b>Victoria</b>	<b>498,786</b>	<b>9,030.3</b>

Public Health Information Development Unit – 2011      Compiled by PHIDU using data from the Department of Health and Ageing, 2009/10; and ABS Estimated Resident Population, average of 30 June 2009 and 30 June 2010.  
\*per 100,000 population

## PBS Prescribed Items

The table on the following page sets out the number and \$ benefit of the PBS items prescribed in 2009/10 across the different GP divisions that the Campaspe PCP region is located within.

These PBS figures have been divided into 2010 estimated resident population figures to provide a per population number and dollar value. Please refer to the data notes for limitations of the assumptions that can be drawn from this data.

In 2010/11, compared to the Australian average figures, Murray Plains and Goulburn Valley Divisions of General Practice had a significantly higher percentage of all Psycholeptics prescribed per population and a higher dollar value per population.

Murray Plains and Goulburn Valley Divisions of General Practice also had a significantly higher percentage of Antidepressants prescribed per population with a corresponding higher dollar value per population. The proportion and expenditure per population on Anti-dementia pharmaceuticals was also higher in both Divisions, particularly Murray Plains.

**Figure 221. PBS Data – Items Prescribed and \$ Benefit (2009/10)**

	Division of General Practice	No. of items	Per pop'n* items prescribed (%)	\$ benefit	\$ per pop'n*
<b>Psycholeptics:</b>					
Antipsychotics	Murray Plains (2010 ERP = 64,995)	4,142	6.37%	474,552	\$7.30
	Goulburn Valley (2010 ERP = 106,690)	7,701	7.22%	1,011,688	\$9.48
	All Australian General Practices	na	4.77%	na	\$6.27
Anxiolytics	Murray Plains	5,668	8.72%	27,515	\$0.42
	Goulburn Valley	9,057	8.49%	47,455	\$0.44
	All Australian General Practices	na	7.10%	na	\$0.34
Hypnotics and sedatives	Murray Plains	5,000	7.69%	19,221	\$0.30
	Goulburn Valley	6,773	6.35%	26,840	\$0.25
	All Australian General Practices	na	5.35%	na	\$0.20
<b>Psychoanaleptics:</b>					
Antidepressants	Murray Plains	28,768	44.26%	694,521	\$10.69
	Goulburn Valley	51,593	48.36%	1,278,941	\$11.99
	All Australian General Practices	na	31.11%	na	\$7.36
Psychostimulants, agents used for ADHD & Nootropics	Murray Plains	33	0.05%	679	\$0.01
	Goulburn Valley	188	0.18%	4,805	\$0.05
	All Australian General Practices	na	0.22%	na	\$0.11
Psycholeptics & psychoanaleptics in combination	Murray Plains	0	0.00%	0	\$0
	Goulburn Valley	0	0.00%	0	\$0
	All Australian General Practices	na	0.00%	na	\$0
Anti Dementia drugs	Murray Plains	688	1.06%	99,802	\$1.54
	Goulburn Valley	999	0.94%	147,559	\$1.38
	All Australian General Practices	na	0.68%	na	\$0.98
Other Antidepressants	Murray Plains	0	0.00%	0	\$0
	Goulburn Valley	0	0.00%	0	\$0
	All Australian General Practices	na	0.00%	na	\$0

Medicare Australia Statistics 2011 \*based on 2009 ERP

**Important - PBS data notes:**

- Medicines which may be prescribed under the PBS and RPBS are listed in the Schedule of Pharmaceutical Benefits (the Yellow Book)
- Patient Contributions - General patients, who do not hold a concession card (General - Ordinary), pay a maximum contribution towards the cost of each PBS medicine. The maximum General patient contribution is specified in the Schedule of Pharmaceutical Benefits. The Government pays the remainder. Holders of a Department of Social Security or a Department of Veterans' Affairs treatment card may pay a contribution towards the cost of each PBS or RPBS medicine. The value of this contribution is specified in the Schedule of Pharmaceutical Benefits
- Only items contained in the Pharmaceutical Benefits Schedule appear in these statistics. Items supplied to General patients, costing less than the General patient contribution rate, do not receive a PBS benefit and are therefore not included.
- The reports only relate to the value (benefit) or volume (items) of PBS and RPBS items that have been processed by Medicare Australia.
- The figures refer only to paid items processed from claims presented by approved pharmacies.
- The figures do not include any adjustments made against pharmacists' claims, any manually paid claims or any benefits paid as a result of retrospective entitlement or refund of patient contributions.
- The figures do not include items provided to public patients in public hospitals
- The figures do not contain Section 100 items (highly specialised drugs available through hospital pharmacies for out-patients).



# Mental Health Client Figures

In 2014/15, compared to Victoria (11.9), Campaspe (13.8) had a slightly higher rate of mental health clients per population.

**Figure 222. Registered Mental Health Clients per Population (2014/15)**

Location	Rate*
Campaspe	13.8
<b>Victoria</b>	<b>11.9</b>

Department of Health and Human Services 2016, "2015 local government areas (LGA) profiles" November 2016, Victoria State Government  
#Per 1,000 persons

The following table sets out the number and proportion of residents, by LGA of residence, who are registered as clients with a mental health service in the Victorian public mental health client information management system.

In 2010/11, there were 463 mental health clients who were Campaspe residents, representing 1.2% of the 2010 estimated resident population. Compared to the Victorian total figure, Campaspe had a slightly higher proportion of population that were mental health clients, including adult, aged and child and adolescent clients.

**Figure 223. Mental Health Clients by LGA and Type of Service (2010/11)**

		Campaspe	Victoria
	<b>2010 est. population</b>	38,983	<b>5,545,932</b>
<b>ADULT</b>	No. Clients	340	<b>44,663</b>
	% of 2010 est. pop.	0.90%	<b>0.80%</b>
<b>AGED</b>	No. Clients	62	<b>7,961</b>
	% of 2010 est. pop.	0.20%	<b>0.10%</b>
<b>CAMHS*</b>	No. Clients	59	<b>7,835</b>
	% of 2010 est. pop.	0.20%	<b>0.10%</b>
<b>FORENSIC</b>	No. Clients	<5	<b>621</b>
	% of 2010 est. pop.	-	<b>0.00%</b>
<b>SPECIALIST</b>	No. Clients	0	<b>543</b>
	% of 2010 est. pop.	0.00%	<b>0.00%</b>
<b>TOTAL</b>	No. Clients	463	<b>61,623</b>
	% of 2010 est. pop.	1.20%	<b>1.10%</b>

Source: Case Files 2010 - 11, MH&DD, DoH

\* CAMHS = Child and adolescent mental health services

# Substance Abuse and Alcohol Consumption

## Alcohol

### *Alcohol Consumption Guidelines*

**National Health and Medical Research Council (NHMRC) guidelines to reduce health risks from alcohol consumption:**

NHMRC (2009) guidelines	
Guideline 1: Reducing the risk of alcohol-related harm over a lifetime	For healthy men and women, drinking no more than TWO standard drinks <sup>(a)</sup> on any day reduces the lifetime risk of harm from alcohol-related disease or injury.
Guideline 2: Reducing the risk of injury on a single occasion of drinking	For healthy men and women, drinking no more than FOUR standard drinks <sup>(a)</sup> on a single occasion reduces the risk of alcohol-related injury arising from that occasion.

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Modifiable risk factors contributing to chronic disease, State Government of Victoria, Melbourne (a) Quantities based on a standard drink containing 10 grams or 12.5 millilitres of alcohol

### **Risk of Alcohol-Related Injury on a Single Occasion Definition**

*'Risk of alcohol-related injury on a single occasion refers to the acute effects of excess alcohol consumption that can result in death or injury due to road traffic accidents, falls, drowning, assault, suicide and acute alcohol toxicity. The risk of alcohol-related injury increases with the amount of alcohol consumed on a single occasion.'*

### **Increased Lifetime Risk of Alcohol Related Harm Definition**

*'Regular, excessive consumption of alcohol over time places people at increased risk of chronic ill health and premature death, and episodes of heavy drinking may place the drinker (and others) at risk of injury or death. The consequences of heavy, regular use of alcohol may include cirrhosis of the liver, cognitive impairment, heart and blood disorders, ulcers, cancers and damage to the pancreas.'*

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Modifiable risk factors contributing to chronic disease, State Government of Victoria, Melbourne

In 2011, compared to the Victoria average, a similar rate of Campaspe population had purchased alcohol in the last seven days (36.1 vs 36.6 per 100), and the Campaspe population spent a similar or smaller amount on alcohol in the last seven days.

In 2014:

- More than 65% of the Campaspe adult population consumed alcohol at levels which had an increased lifetime risk of alcohol related harm, compared with 62.9% in regional Victoria and 59.2% in Victoria, and
- just over 49% of the Campaspe adult population consumed alcohol at levels which had an increased risk of yearly, monthly or weekly alcohol related harm on a single occasion, compared with 47.8% in regional Victoria and 42.5% in Victoria.

Compared to regional Victoria (28.4%) and Victoria (27.9%), Campaspe had a greater proportion (35.0%) of population that believe getting drunk every now and then is okay.

**Figure 224. Alcohol Purchasing (2011)**

Location	Purchased alcohol in the last seven days Rate per 100 persons*	Seven day \$ spend on packaged liquor (of those purchasing) Average \$ spend	Seven day \$ spend at a licensed premises (of those purchasing) Average \$ spend
Campaspe	36.1	\$44.7	\$33.6
<b>Victoria</b>	<b>36.6</b>	<b>\$44.0</b>	<b>\$42.0</b>

VicHealth Indicators Survey 2011 \*age-standardised data

**Figure 225. Percentage of Adult Population with Lifetime Risk of Alcohol Related Harm# (2014)**

Location	Abstainer / no longer drinks alcohol	Reduced lifetime risk	Increased lifetime risk
Campaspe	22.5	11.0	65.6 ●
Regional Victoria	18.9	16.1	62.9
<b>Victoria</b>	<b>20.8</b>	<b>18.3</b>	<b>59.2</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Modifiable risk factors contributing to chronic disease, State Government of Victoria, Melbourne. #Age standardised to the 2011 Victorian population. \*Based on the NHMRC 2009 guidelines. Estimates may not add to 100 per cent due to a proportion of 'don't know' or 'refused to say' responses, not reported here.

**Figure 226. Percentage of Adult Population at Risk of Alcohol Related Injury on a Single Occasion# (2014)**

Location	Abstainer / no longer drinks alcohol	Reduced risk	Increased risk: yearly, monthly or weekly
Campaspe	22.5	27.4	49.3 ●
Regional Victoria	18.9	32.4	47.8
<b>Victoria</b>	<b>20.8</b>	<b>35.8</b>	<b>42.5</b>

Department of Health and Human Services 2016, Victorian Population Health Survey 2014: Modifiable risk factors contributing to chronic disease, State Government of Victoria, Melbourne. #Age standardised to the 2011 Victorian population. \*Based on the NHMRC 2009 guidelines. Estimates may not add to 100 per cent due to a proportion of 'don't know' or 'refused to say' responses, not reported here.

**Figure 227. Percentage of Population who Believe Getting Drunk Every Now And Then is OK (2015)**

Location	Male	Female	Persons
Campaspe	45.2 ●	25.0	35.0% ●
Regional Victoria	na	na	28.4%
<b>Victoria</b>	<b>31.4</b>	<b>25.2</b>	<b>27.9%</b>

VicHealth Indicators Survey 2015 Selected findings; Victorian Health Promotion Foundation, 2016

## Alcohol Related Harm

Compared to Victoria, Campaspe PCP had:

- A lower rate\* of hospital separations for alcohol related harm (23.5 vs 47)
- A lower rate\* of emergency department presentations for alcohol related harm (9.8 vs 10.4)
- A much higher rate of ambulance attendances in the 18-24 years age group (71.8 vs 55.8)
- A much higher rate\* of assaults that occurred in 'high alcohol hours' (22.3 vs 13.1 overall), particularly in the 18-24 years age group (98.6 vs 28.9) and for males (32.1 vs 15.3)
- A much higher rate of alcohol related family violence incidents (26.8 vs 21.9 overall), particularly in the 18-24 years age group (58.1 vs 22.7) and for females (44.6 vs 32.9)
- A similar rate of alcohol related deaths (1.3 vs 1.5), and
- a lower rate of population (36.4) receiving episodes of care for alcohol treatment, compared to Victoria (45.4). The male rate was significantly higher than the female rate. Persons aged 25 - 39 years made up the greatest proportion of persons receiving episodes of care.

\* per 10,000 persons

**Figure 228. Rate\* of Alcohol Related Harm Hospital Separations (2012-13)**

Location	Total	15-24 years	Male	Female
Campaspe	23.5	18.3	32.3	14.7
<b>Victoria</b>	<b>47.0</b>	<b>22.0</b>	<b>59.0</b>	<b>35.1</b>

AODstats, Turning Point - Eastern Health, accessed January 2017 \*Rate per 10,000 population, 2012-13

**Figure 229. Rate\* of Alcohol Related Harm Emergency Department Presentations (2012-13)**

Location	Total	15-24 years	Male	Female
Campaspe	11.1	22.9	12.4	9.8
<b>Victoria</b>	<b>13.8</b>	<b>25.2</b>	<b>17.2</b>	<b>10.4</b>

AODstats, Turning Point - Eastern Health, accessed January 2017 \*Rate per 10,000 population, 2012-13

**Figure 230. ED Presentations for Alcohol/Drug Abuse and Alcohol/Drug Induced Mental Disorders by indigenous Status (2011/2-2013/14)**

Location	Total Population		Indigenous Population	
	no.	Rate	No.	Rate
Campaspe	187	168	27	848 ●
<b>Victoria</b>	<b>np</b>	<b>191</b>	<b>np</b>	<b>673</b>

Numbers provided by the Department of Health and Human Services, commissioned VAED public hospital data for the period 2011/12 to 2013/14. Rates prepared by author #average annual rate per 100,000 persons based on the 2013 estimated resident population sourced from ABS 3235.0 Population by Age and Sex, Regions of Australia, 30<sup>th</sup> June 2013 - released August 2014. Rates are not standardised

**Figure 231. Rate\* of Alcohol Related Harm Ambulance Attendances (2013-14)**

Location	Total	15-24 years	Male	Female
Campaspe	34.1	71.8 ●	43.2	25.0 ●
<b>Victoria</b>	<b>34.4</b>	<b>55.8</b>	<b>44.3</b>	<b>24.7</b>

AODstats, Turning Point - Eastern Health, accessed January 2017 \*Rate per 10,000 population, 2012-13

**Figure 232. Rate of Assaults That Occurred in High Alcohol Hours\*\* (2012-13)**

Location	Total	18-24 years	Male	Female
Campaspe	22.3 ●	98.6 ●	32.1 ●	12.5 ●
<b>Victoria</b>	<b>13.1</b>	<b>28.9</b>	<b>15.3</b>	<b>10.9</b>

AODstats, Turning Point - Eastern Health, accessed July 2016 \*Rate per 10,000 population, 2012-13 # High alcohol hour assaults (HAH) - Fridays or Saturdays between 8 pm and 6 am. Alcohol involvement was noted in 65 per cent of these incidents. Please refer to [http://aodstats.org.au/Documents/AODstats%20Methods\\_final%202014.10.02.pdf](http://aodstats.org.au/Documents/AODstats%20Methods_final%202014.10.02.pdf) for further information.

**Figure 233. Rate\* of Alcohol Related Family Violence Incidents (2012-13)**

Location	Total	18-24 years	Male	Female
Campaspe	26.8 ●	58.1 ●	9.2	44.6 ●
<b>Victoria</b>	<b>21.9</b>	<b>22.7</b>	<b>10.6</b>	<b>32.9</b>

AODstats, Turning Point - Eastern Health, accessed July 2016 \*Rate per 10,000 population, 2012-13 . Please refer to [http://aodstats.org.au/Documents/AODstats%20Methods\\_final%202014.10.02.pdf](http://aodstats.org.au/Documents/AODstats%20Methods_final%202014.10.02.pdf) for further information.

**Figure 234. Rate\* of Alcohol Related Deaths (2012)**

Location	Rate*
Campaspe	1.3
<b>Victoria</b>	<b>1.5</b>

AODstats, Turning Point - Eastern Health, accessed July 2016 \*Rate per 10,000 population, 2012-13

**Figure 235. Treatment Episodes of Care Rates\* for Alcohol, by Sex and Age (2013-14)**

Location	Total	Male	Female	0-14yrs	15-24yrs	25-39yrs	40-64yrs	65+ yrs
Campaspe	36.4	54.4	18.4	0	np	93.2 ●	45.2	np
<b>Victoria</b>	<b>45.4</b>	<b>59.6</b>	<b>31.3</b>	<b>3.3</b>	<b>53.9</b>	<b>71.0</b>	<b>64.4</b>	<b>9.5</b>

AODstats, Turning Point - Eastern Health, accessed January 2017 \*Rate per 10,000 population, 2012-13 np = not published in data source

## Drug Related Harm

### Illicit Drugs

Compared to Victoria, Campaspe PCP had:

- A lower rate\* of hospital separations for illicit drug related harm (9.5 vs 14.4)
- A lower rate\* of ambulance attendances for illicit drug related harm (8.1 vs 12.2), and
- A higher rate\* of episodes of care for illicit drug related treatment in population aged 15-24 years (169.7 vs 137.9) and 25 - 39 years (110.4 vs 103.0).

**Figure 236. Hospitalisation Rates for Illicit Drug-related Harm (2012/13)**

Location	Total	Male	Female	15-24yrs
Campaspe	9.5	11.9	7.1	18.3
<b>Victoria</b>	<b>14.4</b>	<b>16.5</b>	<b>12.3</b>	<b>20.0</b>

AODstats, Turning Point - Eastern Health, accessed January 2017 \*Rate per 10,000 population

**Figure 237. Ambulance Attendance Rates for Illicit Drug-related Harm (2013/14)**

Location	Total	Male	Female	0-14 yrs	15-24 yrs	25-39 yrs	40-64 yrs	65+ yrs
Campaspe	8.1	10.8	5.4	0	20.9	24.3	5.6	0
<b>Victoria</b>	<b>12.2</b>	<b>16.3</b>	<b>8.2</b>	<b>0.6</b>	<b>29.2</b>	<b>24.4</b>	<b>8.1</b>	<b>0.3</b>

AODstats, Turning Point - Eastern Health, accessed January 2017 \*Rate per 10,000 population

**Figure 238. Episodes of Care Rates for Illicit Drug-related Treatment (2013/14)**

Location	Total	Male	Female	0-14 yrs	15-24 yrs	25-39 yrs	40-64 yrs	65+ yrs
Campaspe	48.5	64.7	32.2	np	169.7 ●	110.4 ●	np	0
<b>Victoria</b>	<b>52.3</b>	<b>68.6</b>	<b>36.3</b>	<b>4.1</b>	<b>137.9</b>	<b>103.0</b>	<b>31.0</b>	<b>2.3</b>

AODstats, Turning Point - Eastern Health, accessed January 2017 \*Rate per 10,000 population np = not published in data source

## Pharmaceutical Drugs

Compared to Victoria, Campaspe PCP had:

- A higher rate\* of ED presentations per female population (18.5 vs 16.3) and per population aged 15-24 years (32.0 vs 28.3) for pharmaceutical drug related harm
- A higher rate\* of hospital separations per female population for pharmaceutical drug related harm (17.4 vs 15.2)
- A higher rate\* of ambulance attendances per population aged 15-24 years for pharmaceutical drug related harm (32.4 vs 29.4), and
- A substantially higher rate\* of episodes of care for pharmaceutical drug related treatment (37.0 vs 6.0), particularly for females (25.0 vs 5.9).

**Figure 239. ED Presentation Rates for Pharmaceutical Drug-related Harm (2012/13)**

Location	Total	Male	Female	15-24yrs
Campaspe	13.0	7.6	18.5	32.0
<b>Victoria</b>	<b>12.6</b>	<b>8.8</b>	<b>16.3</b>	<b>28.3</b>

AODstats, Turning Point - Eastern Health, accessed January 2017 \*Rate per 10,000 population

**Figure 240. Hospitalisation Rates for Pharmaceutical Drug-related Harm (2012/13)**

Location	Total	Male	Female	15-24yrs
Campaspe	11.4	5.4	17.4	18.3
<b>Victoria</b>	<b>12.0</b>	<b>8.7</b>	<b>15.2</b>	<b>22.2</b>

AODstats, Turning Point - Eastern Health, accessed January 2017 \*Rate per 10,000 population

**Figure 241. Ambulance Attendance Rates for Pharmaceutical Drug-related Treatment (2013/14)**

Location	Total	Male	Female	0-14 yrs	15-24 yrs	25-39 yrs	40-64 yrs	65+ yrs
Campaspe	14.6	12.4	16.9	np	32.4	18.7	18.3	np
<b>Victoria</b>	<b>16.9</b>	<b>13.5</b>	<b>20.3</b>	<b>2.5</b>	<b>29.4</b>	<b>25.2</b>	<b>18.7</b>	<b>6.7</b>

AODstats, Turning Point - Eastern Health, accessed January 2017 \*Rate per 10,000 population np = not published in data source

**Figure 242. Episodes of Care Rates for Pharmaceutical Drug-related Treatment (2013/14)**

Location	Total	Male	Female	0-14 yrs	15-24 yrs	25-39 yrs	40-64 yrs	65+ yrs
Campaspe	37.0	11.0	25.0	0.0	0	27.0	np	np
<b>Victoria</b>	<b>6.0</b>	<b>6.1</b>	<b>5.9</b>	<b>0.2</b>	<b>4.5</b>	<b>13.6</b>	<b>7.1</b>	<b>0.7</b>

AODstats, Turning Point - Eastern Health, accessed January 2017 \*Rate per 10,000 population np = not published in data source

# Gambling Participation

## Characteristics of 'Problem Gamblers'

The Victorian Gambling Study, A Longitudinal Study of gambling and public health - Wave Two Findings (DoJ, 2011) found that a number of variables were found to be associated with the increased risk of 'transitioning' from a non-gambler/non-problem gambler to a low or moderate risk or problem gambler. These variables were:

- poor general health
- poor psychological health
- past year smoking
- group households (with non-relatives)
- one-parent families
- speaking a language other than English at home
- year 10 or lower education levels
- betting weekly or greater on horse, harness racing or greyhounds, and
- troubles with work, boss or superiors and an increase in the number of arguments with someone close.

The study also found that males are significantly more likely to be problem gamblers or moderate risk gamblers than females. For males, those aged 25-34 years have the highest prevalence of problem gambling, followed by those aged 50-64 years.

The 25-34 years age group also had the highest prevalence of problem gambling for females, along with the 35-49 year age group, then closely followed by females aged 60-64 years.

## Gaming Machine Expenditure

In 2015-16, compared to Victoria, Campaspe had a net electronic gaming machine (EGM) expenditure per person of \$294 and this figure was much lower than the regional Victoria (\$485) and Victoria (\$553) average. Note that figures are based on the location of the EGM and not the residence of the person using the EGM.

In 2015-16, Campaspe had 7.4 EGMs per 1,000 population and this figure was higher than the regional Victoria and Victoria averages (6.5 and 5.7 respectively).

**Figure 243. Net EGM Expenditure\* by LGA (2014-15 and 2015-16)**

Location	Total net EGM expenditure*		EGMs per 1,000 population		Net EGM expenditure per person	
	2014-15	2015-16	2014-15	2015-16	2014-15	2015-16
Campaspe	8,159,437	8,364,721	7.4 ●	7.4 ●	\$288	\$294
Regional Victoria	\$551,727,941	558,518,641	6.7	6.5	\$483	\$485
<b>Victoria</b>	<b>\$2,571,926,031</b>	<b>2,616,703,496</b>	<b>5.7</b>	<b>5.7</b>	<b>\$553</b>	<b>\$553</b>

Victorian Commission for Gambling and Liquor Regulation, 2016 # Based on location of EGM not place of residence. Some LGAs do not have any EGMs, however some residents may travel to other areas to use EGMs. \*The total amount lost by players



# Families, Children and Young People

## Families and Infant Welfare

### Birth Rate

In 2014, there were 428 births in the Campaspe PCP catchment and this figure was slightly higher than the number of births in 2011 (411). The total fertility rate has increased over the period by a small amount (2.3 versus 2.4). In 2011 and 2014, the Campaspe PCP catchment had a higher total fertility rate than the regional Victoria and Victorian average.

**Figure 244. Births and Total Fertility Rate (2014)**

Location	2011		2014	
	Births	Total fertility rate	Births	Total fertility rate
Campaspe	411	2.3	428	2.4
Regional Victoria	16,117	2.1	16,196	2.1
<b>Victoria</b>	<b>71,444</b>	<b>1.8</b>	<b>74,224</b>	<b>1.8</b>

*Social Health Atlas of Australia, Victoria, data by Local Government Area, May 2016 Release 2. Public Health Information Development Unit, May 2016. \* The total fertility rate (TFR) represents the average number of babies that a woman could expect to bear during her reproductive lifetime, assuming current age-specific fertility rates were experienced. The TFR measures the average number of children per woman, including those who have no children, rather than the average number of children per mother.*

### Low Birth Weight Babies

Low birth weight is an important indicator of a newborn's overall health. Between 2009 and 2011 (24 months), there was a greater proportion of low birth weight (<2,500 gms) babies born in Campaspe (7.8%) than the Victoria (6.6%) and regional Victoria (6.8%) average.

**Figure 245. Low Birth Weight Babies (2009-2011)**

Location	No.	Rate*
Campaspe	105	7.8 ●
Regional Victoria	3471	6.8
<b>Victoria</b>	<b>13863</b>	<b>6.6</b>

*Social Health Atlas of Australia, Victoria, data by Local Government Area, May 2016 Release 2. Public Health Information Development Unit, May 2016.*

## Maternal and Child Health (MCH) Centre Visits

In 2014/15, the Campaspe PCP region had lower participation rates than the Victorian average for all key age and stage visits.

**Figure 246. Maternal and Child Health Centres (M&CHC) - Key Stage Visit Participation % (2014/15)**

Location	Home Consult.	Weeks			Months			Years		
		2	4	8	4	8	12	18	2	3.5
Campaspe	100.2	91.6	89.9	89.9	92.9	81.0	79.4	63.9	67.5	62.1
Victoria	100.9	97.4	97.2	96.2	94.4	86.4	83.4	75.0	72.8	66.1

Maternal & Child Health Services Annual Reports, 2014/15, DEECD 2015

In 2014/15, compared to Victoria, Campaspe had a greater proportion of Maternal and Child Health Centre counselling sessions that were for: visual, auditory, communication, growth, accident and dental/oral reasons. The most common reasons for counselling were growth and development (each 22%), followed by communication and dental/oral (each 13%).

In 2014/15, compared to Victoria, Campaspe had a greater proportion of Maternal and Child Health Centre referrals that were for: visual, auditory, communication, dental/oral and protective notification. The most common reasons for referral were communication (25%), auditory (16%), and visual and development (each 13%).

**Figure 247. Reasons for Counselling - Child Health and Wellbeing (2014/15)**

Reason	Campaspe	Victoria
Visual	4%	2%
Auditory	6%	2%
Communication	13%	9%
DDH*	1%	4%
Congenital Anomaly	1%	1%
Growth	22%	19%
Development	22%	23%
Potentially Disabling Condition	2%	8%
Accident	10%	1%
Illness	2%	5%
Nutrition Altered	5%	18%
Dental/ Oral	13%	8%
<b>Total No.</b>	<b>2,705</b>	<b>128,909</b>
<b>Total %</b>	<b>100%</b>	<b>100%</b>

Maternal & Child Health Services Annual Reports, 2014/15, DEECD 2015 \* Developmental dysplasia of the hip

**Figure 248. Reasons for Referral - Child Health and Wellbeing (2014/15)**

Reason	Campaspe	Victoria
Visual	13%	6%
Auditory	16%	11%
Communication	25%	12%
DDH*	5%	18%
Congenital Anomaly	3%	2%
Growth	3%	6%
Development	13%	16%
Potentially Disabling	10%	13%
Accident	0%	0%
Illness	0%	4%
Nutrition Altered	2%	4%
Dental/ Oral	9%	6%
Protective Notification	2%	1%
<b>Total no.</b>	<b>263</b>	<b>55,814</b>
<b>Total %</b>	<b>100%</b>	<b>100%</b>

Maternal & Child Health Services Annual Reports, 2014/15, DEECD 2015 \* Developmental dysplasia of the hip

In 2014/15, compared to Victoria, Campaspe had a greater proportion of Maternal and Child Health Centre Mother or Family counselling that were for: emotional, domestic violence and family planning reasons. The most common reasons for counselling were emotional (53%), physical (22%), family planning (13%) then domestic violence (10%).

In 2014/15, compared to Victoria, Campaspe had a greater proportion of Maternal and Child Health Centre Mother or Family referrals that were for emotional or family planning reasons. The most common reasons for referral were emotional (69%) and physical (23%).

**Figure 249. Reasons for Counselling - Mother or Family (2014/15)**

Reason	Campaspe	Victoria
Emotional	53%	51%
Physical	22%	37%
Social Interaction Impaired	2%	6%
Domestic Violence	10%	2%
Family Planning	13%	4%
<b>Total</b>	<b>1,552</b>	<b>63,620</b>
<b>Total</b>	<b>100%</b>	<b>100%</b>

Maternal & Child Health Services Annual Reports, 2014/15, DEECD 2015

**Figure 250. Reasons for Referral - Mother or Family (2014/15)**

Reason	Campaspe	Victoria
Emotional	69%	46%
Physical	23%	36%
Social Interaction Impaired	3%	12%
Domestic Violence	3%	4%
Family Planning	3%	2%
<b>Total</b>	<b>35</b>	<b>12,898</b>
<b>Total</b>	<b>100%</b>	<b>100%</b>

Maternal & Child Health Services Annual Reports, 2014/15, DEECD 2015

## Family Stress

In June 2014, compared with Victoria (9.8%), Campaspe (11.3%) had a higher proportion of families with children that were welfare-dependent or other low income families. However, the Campaspe figure was slightly lower than the regional Victoria average (11.6%).

In 2015, Campaspe (13.4%) also had a much higher proportion of children whose parents report high levels of family stress compared to Victoria (9.9%).

**Figure 251. Low Income, Welfare-Dependent Families With Children (2014)**

Location	No.	Total families	%
Campaspe	1,110	9,854	11.3% ●
Regional Victoria	41,594	358,988	11.6%
<b>Victoria</b>	<b>138,028</b>	<b>1,414,574</b>	<b>9.8%</b>

*Social Health Atlas of Australia, Victorian Local Government Areas, December 2016 release, PHIDU 2016*

**Figure 252. Proportion of Children Whose Parents Report High Levels of Family Stress# (2015)**

Location	%*
Campaspe (S)	13.4% ●
<b>Victoria</b>	<b>9.9%</b>

*Victorian Child and Adolescent Monitoring System (VCAMS), accessed online February 2016 #Proportion of children at school entry whose parents report high levels of family stress in the past month \*Based on data from the School Entrant Health Questionnaire*

## Breastfeeding Rates

In 2014-15, compared to Victoria, Campaspe had a higher proportion of infants that were fully breastfed on discharge and at 2 weeks of age, but a lower proportion that were fully breastfed at 3 months and 6 months. Campaspe also had a much lower proportion of infants that were partially breastfed at 3 or 6 months.

**Figure 253. Proportion of Infants Fully Breastfed (2014-15)**

Location	On Discharge	% Fully Breastfed at:		
		2 weeks	3 Months	6 Months
Campaspe	82.6	72.2	46.6 ●	29.2 ●
<b>Victoria</b>	<b>72.8</b>	<b>66.1</b>	<b>51.4</b>	<b>34.0</b>

*Maternal & Child Health Services Annual Report, 2014/15 South Western Victoria Region and Victoria Statewide Report, DEECD 2015*

**Figure 254. Proportion of Infants Partially Breastfed (2014-15)**

Location	On Discharge	% Partially Breastfed at:		
		2 weeks	3 Months	6 Months
Campaspe	4.4 ●	5.5	3.0 ●	7.4 ●
<b>Victoria</b>	<b>17.0</b>	<b>18.1</b>	<b>13.1</b>	<b>15.6</b>

*Maternal & Child Health Services Annual Report, 2014/15 South Western Victoria Region and Victoria Statewide Report, DEECD 2015*

## Smoking During Pregnancy

Between 2009 and 2011, the proportion of pregnant Campaspe females that smoked during pregnancy (22.7%) was substantially higher than the regional Victoria (17.7%) and Victoria average (11.4%).

**Figure 255. Smoking During Pregnancy (2009-2011)**

Location	% of all pregnancies
Campaspe	22.7% ●
Regional Victoria	17.7%
<b>Victoria</b>	<b>11.4%</b>

*Social Health Atlas of Australia, Victoria, data by Local Government Area, May 2016 Release 2. Public Health Information Development Unit, May 2016.*

## Child Health

### Immunisation Participation

In 2014-15, compared to regional Victorian (91.8%) and Victoria (91.2%), Campaspe (90.7%) had a slightly lower proportion of children in the 12-<15 months that were fully immunised. Over the same period, compared to regional Victoria and Victoria, Campaspe had a higher proportion of children aged 24-<27 months and 60-<63 months that were fully immunised.

**Figure 256. Children Fully Immunised (2014-15)**

Location	12 - <15 months		24 - <27 months		60 - <63 months	
	No	%*	No	%*	No	%*
Campaspe	409	90.7% ●	431	92.5%	451	95.3%
Regional Victoria	16,427	91.8%	431	91.0%	17,924	93.5%
<b>Victoria</b>	<b>69,386</b>	<b>91.2%</b>	<b>68,893</b>	<b>89.6%</b>	<b>70,418</b>	<b>92.6%</b>

*Victorian Child and Adolescent Monitoring System (VCAMS), accessed online November 2016*

### Infant Deaths

Between 2009 and 2011, compared to Victoria (3.1) and regional Victoria (3.5), Campaspe (4.6) had a higher rate of infant deaths.

**Figure 257. Infant Death Rate\* (2009-2011)**

Location	No.	Rate*
Campaspe	10	4.6 ●
Regional Victoria	285	3.5
<b>Victoria</b>	<b>1,194</b>	<b>3.1</b>

*Social Health Atlas of Australia, Victoria, data by Local Government Area, May 2016 Release 2. Public Health Information Development Unit, May 2016.*

\* The data presented are of deaths that occurred before 12 months of age. \*Average annual infant death rate per 1,000.

## Hospital Admissions for Children

In 2008 – 09, the total hospital admission rate per 1,000 Campaspe children aged 0 – 8 years (257.2) was higher than the Victoria (231.2) and Loddon Mallee Region (234.3) averages.

The most common cause of hospitalisation for Campaspe children aged 0 – 8 years was chronic tonsillitis, followed by Dental caries unspecified. Compared to the Victorian average figures, Campaspe children had higher admission rates for: dental caries unspecified, acute bronchiolitis unspecified, routine and ritual circumcision, croup, chronic tonsillitis, acute URTI unspecified, pneumonia unspecified, and chronic mucoid otitis media.

**Figure 258. Hospital Separations for Children Aged 0 – 8 years# (2008 - 2009)**

ICD principal diagnosis	Campaspe		Loddon Mallee		Victoria
	No.	Rate	No.	Rate	Rate
Asthma unspecified	34	7.6	225	6.2	<b>7.9</b>
Oth pret infnt >=32 but <37 compl wk	31	6.9	265	7.3	<b>7.7</b>
Dental caries unspecified	38	8.5	370	10.2	<b>6.3</b>
Acute bronchiolitis unspecified	24	5.4	205	5.7	<b>3.6</b>
Feeding difficulties & mismanagement	np	Np	13	0.4	<b>1.0</b>
Neonatal jaundice unspecified	14	3.1	104	2.9	<b>3.4</b>
Routine and ritual circumcision	21	4.7	93	2.6	<b>2.0</b>
Viral infection unspecified	10	2.2	77	2.1	<b>2.3</b>
Acute obstructive laryngitis [croup]	11	2.5	73	2.0	<b>1.9</b>
Chronic tonsillitis	45	10.0	217	6.0	<b>4.2</b>
Acute URTI unspecified	15	3.3	118	3.3	<b>2.2</b>
Pneumonia unspecified	21	4.7	108	3.0	<b>1.7</b>
Chronic mucoid otitis media	19	4.2	76	2.1	<b>3.1</b>
Neonatal conjunctivitis & dacryocystitis	6	1.3	32	0.9	<b>1.5</b>
Nonsuppurative otitis media unspecified	8	1.8	138	3.8	<b>2.9</b>
<b>All hospital separations</b>	1,152	257.2	8,479	234.3	<b>231.2</b>

Note: The leading cause of hospital admissions was for 'Singleton born in hospital'. This was excluded from the above analysis.  
(a) The population estimate used to calculate the rate of separations during 2008 - 2009 was the preliminary 2008 ERP at 30 June.

## Ambulatory Care Sensitive Condition Hospital Admissions

In 2014/15, Campaspe children had a higher rate of hospital admissions for: dental conditions (5.6 vs 4.9 per 1,000), cellulitis (2.0 vs 1.2), and diabetes complications (0.8 vs 0.6).

**Figure 259. Admission Rate For Most Common ACSCs - Children aged 0 - 14 Years (2014-15)**

ACSC	Campaspe		Regional Victoria	Victoria
	No.	Rate	Rate	Rate
Dental conditions	40	5.6 ●	6.5	<b>4.9</b>
Ear, nose & throat infections	24	3.6	4.3	<b>3.7</b>
Cellulitis	14	2.0 ●	1.0	<b>1.2</b>
Asthma	10	1.4	2.2	<b>2.5</b>
Convulsions and epilepsy	7	1.1	2.3	<b>2.0</b>
Diabetes complications	6	0.8 ●	0.7	<b>0.6</b>

Victorian Health Information Surveillance System, DHHS, accessed online January 2017 \*Standardised rate per 1,000 population, based on 2011 estimated resident population

## Hospitalisations for Accidental Injuries

Between 2011/12 and 2013/14, there were 325 hospitalisations for Campaspe children for injuries caused by accidents (unintentional harm). Compared to the Victoria (12%) and regional Victoria (13%) averages, a slightly greater proportion of all Campaspe (14%) accidental injury hospitalisations were for children aged 0 - 14 years.

**Figure 260. Hospitalisations For Accidental Injuries - 0 - 14 Years (2011-12 to 2013-14)**

Location	No.	Proportion of all
Campaspe (S)	325	14% ●
Regional Victoria	10,821	13%
<b>Victoria</b>	<b>37,153</b>	<b>12%</b>

Victorian Injury Surveillance Unit (VISU), Monash University Injury Research Institute, commissioned data 2015

## Child Abuse

In 2010-2011, Campaspe had a notably higher rate of: child abuse substantiations (9.6 vs 6.7), children who were the subject of care and protection orders (9.2 vs 5.4), and children in out of home care (6.8 vs 4.6) compared to state averages.

**Figure 261. Child Abuse Substantiations (2010 - 2011)**

Location	No.	Rate*
Campaspe	86	9.6 ●
<b>Victoria</b>	<b>8,107</b>	<b>6.7</b>

Victorian Child and Adolescent Monitoring System (VCAMS), accessed online November 2016 \*Rate per 1,000 children aged 0-17 years

**Figure 262. Children Who Are The Subject of Care and Protection Orders (2010)**

Location	No.	Rate*
Campaspe (S)	82	9.2 ●
<b>Victoria</b>	<b>6,515</b>	<b>5.4</b>

Victorian Child and Adolescent Monitoring System (VCAMS), accessed online November 2016 \*Rate per 1,000 children aged 0-17 years

**Figure 263. Children in Out of Home Care (2011)**

Location	No.	Rate*
Campaspe (S)	60	6.8 ●
<b>Victoria</b>	<b>5,678</b>	<b>4.6</b>

Victorian Child and Adolescent Monitoring System (VCAMS), accessed online November 2016 \*Rate per 1,000 children aged 0-17 years

# Child Development

## The Australian Early Development Census (AEDC)

The Australian Early Development Census (AEDC) helps to create a snapshot of early childhood development across Australia. Note that the AEDC replaces the Australian Early Development Index from the previous version of this profile. Completed by a teacher as a child enters their first year of school, the AEDC measures five areas of early childhood development (set out below) and :

- 1. Physical health and wellbeing:** Physical readiness for the school day, physical independence, gross and fine motor skills.
- 2. Social competence:** Overall social competence, responsibility and respect, approaches to learning, readiness to explore new things.
- 3. Emotional maturity:** Pro-social and helping behaviour, anxious, fearful and aggressive behaviour, hyperactivity and inattention.
- 4. Language and cognitive skills (school-based):** Basic literacy, interest in literacy/numeracy and memory, advanced literacy, basic numeracy.
- 5. Communication skills and general knowledge:** Storytelling ability, communication with adults and children.

In 2015, compared to Victorian averages, Campaspe had a higher proportion of children that were classified as developmentally vulnerable (below the 10th percentile) in each of the five domains. Compared to Victoria, a much higher proportion of children were classified as developmentally vulnerable in the social competence domain (14.5% vs 8.7%), physical health and wellbeing domain (11.8% vs 7.9%) and the emotional maturity domain (11.4% vs 8.0%).

Campaspe also had a higher proportion of children that were classified as developmentally at risk (between the 10th and 25th percentile) in the physical health and wellbeing, language and cognitive skills and communication skills and general knowledge domains, with the language and cognitive skills domain (12.3%) and the communication skills and general knowledge domain (18.5%) recording notably higher proportions than the state averages (8.9% and 13.6% respectively).

**Figure 264. Proportion of Children Developmentally At Risk or Vulnerable (2015)**

AEDC Domain	Developmentally at risk (between 10th and 25th percentile)		Developmentally vulnerable (below the 10th percentile)	
	Campaspe	Victoria	Campaspe	Victoria
Physical health & wellbeing	12.7 ●	11.2	11.8 ●	7.9
Social competence	13.4	14.1	14.5 ●	8.7
Emotional maturity	13.9	14.5	11.4 ●	8.0
Language & cognitive skills	12.3 ●	8.9	8.3 ●	6.3
Communication skills & general knowledge	18.5 ●	13.6	8.0 ●	7.6

Australian Early Development Census Community Profile for Campaspe Shire 2015, AEDC 2016



## School Participation and Experiences

### Kindergarten Participation

In 2015, compared to Victoria (98.1%), Campaspe (102.3%) had a higher rate of kindergarten participation. Participation rates are calculated by dividing the number of first year children enrolled in kindergarten into the previous year's estimated resident population of three-year old children. *Note: Due to in and out migration of children in the relevant age groups, the percentage figure for participation can sometimes exceed 100%. Cross border influences (children that live in NSW but attend kindergarten in Victoria) may also impact percentage figures.*

**Figure 265. Kindergarten Participation %**

Location	%
Campaspe	102.3%
<b>Victoria</b>	<b>98.1%</b>

Victorian Child and Adolescent Monitoring System (VCAMS), accessed via the VCAMS Portal online August 2016 at <http://www.education.vic.gov.au/about/research/Pages/vcamstableau.aspx>

### School Absence

In 2014, compared to state averages, Campaspe students from all Year levels except Years 6 and 12 had a higher average number of school absent days per year.

**Figure 266. Average No. of Annual Absent Days for Students at Campaspe Schools (2014)**

Year	Victorian average	Campaspe Schools
Prep	14.7	16.3 ●
Year 1	14.5	15.6 ●
Year 2	14.0	14.9 ●
Year 3	13.9	14.6 ●
Year 4	13.8	15.2 ●
Year 5	14.2	14.6 ●
Year 6	14.7	14.5

Victorian Child and Adolescent Monitoring System (VCAMS), accessed online November 2016 \*per full-time equivalent (FTE) student

### Bullying

In 2015, 17% of Year 5 and 6 students attending schools in Campaspe reported they had been bullied and this figure was higher than the regional Victoria (16%) and Victoria (15%) averages.

**Figure 267. Year 5 and 6 Students Who Report Being Bullied (2015)**

Location	No.	%*
Campaspe	114	17% ●
Regional Victoria	na	16%
<b>Victoria</b>	<b>11,977</b>	<b>15%</b>

Victorian Child and Adolescent Monitoring System (VCAMS), accessed online November 2016 \*Of those students in applicable School Years that completed the Student Attitudes School Survey

### *Feeling Connected to School*

In 2015, 85% of Years 5 and 6 students attending schools in Campaspe reported they felt connected to school and this was the same proportion as the regional Victoria and Victoria average.

**Figure 268. Year 5 and 6 Students Who Report Feeling Connected to School (2015)**

Location	%*
Campaspe (S)	85%
Regional Victoria	85%
<b>Victoria</b>	<b>85%</b>

*Victorian Child and Adolescent Monitoring System (VCAMS), accessed online November 2016 \*Of those students in applicable School Years that completed the Student Attitudes School Survey*

# Young People

## School Absence

In 2014, compared to the state average, students from all Year levels except Years 12 had a higher average number of school absent days per year. Year 9 Students had the highest number of absent days (24.8 per year), followed by Year 10 (21.2).

**Figure 269. Average No. of Annual Absent Days for Students at Campaspe Schools (2014)**

Year	Victorian average	Campaspe Schools*
Year 7	16.6	18.2 ●
Year 8	20.1	20.3 ●
Year 9	22.1	24.8 ●
Year 10	20.1	21.2 ●
Year 11	17.5	18.7 ●
Year 12	15.1	13.0

Victorian Child and Adolescent Monitoring System (VCAMS), accessed online November 2016 \*per full-time equivalent (FTE) student

## Numeracy and Literacy

In 2015, compared to regional Victoria (95.0%) and Victoria (95.6%) averages, a lower proportion of Year 9 students attending schools in the Campaspe PCP catchment (92.8%) met or exceeded numeracy benchmarks.

In the same period, compared to regional Victoria (91.5%) and Victoria (93.5%) averages, a lower proportion of Year 9 students attending schools in the Campaspe PCP catchment (87.0%) met or exceeded literacy benchmarks.

**Figure 270. Year 9 Students who Met or Exceeded the Benchmark For Numeracy (2015)**

Location	No. who reached benchmark	No. of students tested	Proportion who reached benchmark
Campaspe	438	472	92.8% ●
Regional Victoria	16,022	16,870	95.0%
<b>Victoria</b>	<b>59,385</b>	<b>62,046</b>	<b>95.6%</b>

Victorian Child and Adolescent Monitoring System (VCAMS), accessed online November 2016

**Figure 271. Year 9 Students who Met or Exceeded the Benchmark For Literacy (2015)**

Location	No. who reached benchmark	No. of students tested	Proportion who reached benchmark
Campaspe	415	477	87.0% ●
Regional Victoria	15,387	16,810	91.5%
<b>Victoria</b>	<b>57,708</b>	<b>62,078</b>	<b>93.5%</b>

Victorian Child and Adolescent Monitoring System (VCAMS), accessed online November 2016

## Bullying

In 2015, 23% of Year 7 to 9 students attending schools in Campaspe reported they had been bullied and this figure was higher than the regional Victoria (21%) and Victoria (18%) averages.

**Figure 272. Year 7 to 9 Students Who Report Being Bullied (2015)**

Location	%*
Campaspe (S)	23% ●
Regional Victoria	22%
<b>Victoria</b>	<b>18%</b>

Victorian Child and Adolescent Monitoring System (VCAMS), accessed online November 2016 \*Of those students in applicable School Years that completed the Student Attitudes School Survey

## Feeling Connected to School

In 2015, 63% of students in Years 7 to 9 at Campaspe schools reported they felt connected to school and this was a slightly higher proportion than the regional Victoria and Victoria average (both 62%).

**Figure 273. Year 7 to 9 Students Who Report Feeling Connected to School (2015)**

Location	%*
Campaspe (S)	63%
Regional Victoria	62%
<b>Victoria</b>	<b>62%</b>

Victorian Child and Adolescent Monitoring System (VCAMS), accessed online November 2016 \*Of those students in applicable School Years that completed the Student Attitudes School Survey

## Early School Leavers

Compared to the state average, students at schools located in the Campaspe PCP catchment that left school early\* were much more likely to be employed (31.2% vs 23.7%) or be undertaking an apprenticeship/traineeship (48.4% vs 28.2%), while they were much less likely to be studying a bachelor degree (0.0% vs 0.9%) or certificate/diploma (7.8% vs 25.8%), looking for work (7.8% vs 15.6%) or not be engaged in learning, employment or training (4.7% vs 5.5%).

The most common reasons given by early school leavers from Campaspe PCP schools for leaving school early were: 'work/career reasons', 'did not like school/teachers/not interested in going', and 'did not need school, enter or to finish for chosen pathway'. The proportion of early school leavers that provided these reasons was much higher than the state average.

\*Early school leavers are defined as students who had registered in but had left school without completing: VCE, IB, VCAL Senior or VCAL Intermediate. In general, early school leavers had been in Year 10, 11 or 12 when they left school.

**Figure 274. Post-school Destinations of Early School Leavers\* (2015)**

Location	Bachelor degree %	Certificates/ diplomas %	Apprentice/ trainee %	Employed %	Looking for work %	NILFET %
Campaspe	-	7.8	48.4	31.2	7.8	4.7
<b>Victoria</b>	<b>0.9</b>	<b>25.8</b>	<b>28.2</b>	<b>23.7</b>	<b>15.6</b>	<b>5.5</b>

The On Track Survey 2015, Department of Education and Training, Victoria State Government 2015 \*Early school leavers are defined as students who had registered in but had left school without completing: VCE, IB, VCAL Senior or VCAL Intermediate. In general, early school leavers had been in Year 10, 11 or 12 when they left school. Findings based on the early school leavers' data should be treated with caution due to the relatively low response rate

**Figure 275. Most Common Reasons Given by Early School Leavers for Leaving School (2015)**

Reason	Campaspe %	Victoria %
Asked to leave/expelled/got in trouble		2.7
Bullying/peer relationships problems		2.8
Did not like school/teachers/not interested in going	25.9	17.4
Did not want to repeat year level		0.6
Just did not go/lazy		0.2
Not coping well at school/failed/failing subjects/too hard	7.4	9.8
School not for me/not good environment/not learning	7.4	6.8
Did not need school, enter or to finish for chosen pathway	11.1	4.6
Finished/finished VCAL		1.5
Going off to do something else		0.2
Study elsewhere/TAFE/different course	5.6	4.2
Travel/went overseas/moved		1.3
Wanted a break/wanted to take time off/do something else		0.8
Work reasons/career reasons	33.3	22.8
Family/personal reasons	1.9	7.1
Financial reasons		0.7
Ill health	3.7	7.8
Other		2
Refused	3.7	6.9

*The On Track Survey 2015, Department of Education and Training, Victoria State Government 2015 \* early school leavers are defined as students who had registered their details with the VCAA by enrolling in an IB program or a VCE or VCAL unit, and who left school without completing one of the following certificates: VCE, IB, VCAL Senior or VCAL Intermediate. In general, early school leavers had been in Year 10, 11 or 12 when they left school. As such, the sample does not represent all early leavers from Victorian schools. Findings based on the early school leavers' data should be treated with caution due to the relatively low response rate*

## School Completers

Compared to the state average, students at schools in the Campaspe PCP catchment that had completed Year 12 or equivalent were much less likely to be studying for a bachelor degree six months after leaving school and were also less likely to be studying for a certificate/diploma and slightly less likely to be not engaged in learning, employment or training; while they were much more likely to be working and also more likely to be an apprentice/trainee.

The most common reason for not being engaged in study six months after completing Year 12 or equivalent, was that the person wanted to start working / earning money, followed by the person needing a break from study.

**Figure 276. Destinations of Year 12 or Equivalent Completers\* Six Months After Leaving School (2015)**

Location	Bachelor degree %	Certificates/ Diplomas %	Apprentice/ Trainee %	Employed %	Looking for work %	NILFET %
Campaspe	39.4	12.2	11.1	30.0	6.7	0.6
<b>Victoria</b>	<b>53.2</b>	<b>16.3</b>	<b>7.5</b>	<b>17.0</b>	<b>4.9</b>	<b>1.0</b>

The On Track Survey 2015, Department of Education and Training, Victoria State Government 2015 \*Students who consent to participate in the survey are contacted six months after leaving school. Participation in the survey is voluntary and school leavers may opt-out of completing the survey when contacted. Note - data is based on location of school and not residence of student.

**Figure 277. Reasons for Not Continuing Study After School: Year 12/equiv. Completers (2015)**

Reason	%
Wanted to start working / earning own money	91.2%
Just needed a break from study	70.6%
Never planned / intended to study	41.2%
Courses interested in not available locally	26.5%

The On Track Survey 2015, Department of Education and Training, Victoria State Government 2015 \*Students who consent to participate in the survey are contacted six months after leaving school. Participation in the survey is voluntary and school leavers may opt-out of completing the survey when contacted **Note:** Respondents may have agreed to more than one statement.

## Teenage Births

In 2012, Campaspe had a teenage birth rate (20.7) that was approximately double the Victorian average (10.4).

**Figure 278. Teenage# Births (2012)**

Location	No.	Rate*
Campaspe (S)	25	20.7 ●
<b>Victoria</b>	<b>1,798</b>	<b>10.4</b>

Victorian Child and Adolescent Monitoring System (VCAMS), accessed online November 2016 #Women aged less than 19 years \*Rate per 1,000 female estimated resident population aged 15-19 years

## Youth Allowance Recipients

Youth Allowance can assist young people aged 15 to 25 years who are studying, undertaking training or an Australian Apprenticeship, looking for work, or sick. In June 2016, compared to Victoria (2.5%), Campaspe had a much higher proportion (4.4%) of population aged 15 - 24 years that was receiving the Youth Allowance (other), and a much lower proportion that was receiving the Youth Allowance for students and apprentices (4.1% vs 9.1%). Please refer to Centrelink for further details regarding the somewhat complex eligibility criteria.

**Figure 279. Young people (15-24 yrs) Receiving the Youth Allowance (June 2016)**

Location	2015 ERP 15 - 24 yrs	Youth Allowance (student & apprentice)		Youth Allowance (other)	
		No.	%	No.	%
Campaspe	4,093	168	4.1%	182	4.4% ●
<b>Victoria</b>	<b>785,594</b>	<b>70,762</b>	<b>9.0%</b>	<b>19,403</b>	<b>2.5%</b>

DSS Payments by Local Government Area, Department of Social Services, January 2017. Accessed at data.gov.au October 2016 \*\* The Youth Allowance provides financial help for people aged 16 to 24 years who are studying full time, undertaking a full time Australian Apprenticeship, training, looking for work or who are sick.

## Youth Unemployment

In June 2014, compared to Victoria (3.4%) and regional Victoria (5.8%), Campaspe (6.3%) had a higher proportion of young people who were receiving an unemployment benefit.

**Figure 280. Young People\* Receiving An Unemployment Benefit (June 2014)**

Location	No.	% of population*
Campaspe	239	6.3 ●
Regional Victoria	8,913	5.8
<b>Victoria</b>	<b>23,884</b>	<b>3.4</b>

Social Health Atlas of Australia, Victorian Local Government Areas, December 2016 release, PHIDU 2016 \*Aged 16 - 24 years

In 2014, Campaspe had a notably higher proportion of females who were aged 12-13 years in 2011 who had received dose 3 of the HPV vaccine, compared to the regional Victoria and Victoria average.

**Figure 281. HPV Vaccine Coverage: Females aged 12-13 Years\* (2014)**

Location	No.*	%**
Campaspe (S)	441	89.7
Regional Victoria	14,665	79.2
<b>Victoria</b>	<b>49,891</b>	<b>78.3</b>

Social Health Atlas of Australia, Victorian Local Government Areas, May 2016 release, PHIDU 2016 \*No. of females aged 12-13 years at 30 June 2011 who received Dose 3 of the HPV vaccine. \*\* % of the 2011 female usual resident population aged 12 - 13 years who received Dose 3 of the HPV vaccine by 2014

In 2012, compared to the Victorian average (385), Campaspe young people (518) had a higher rate of sexually transmissible infections.

**Figure 282. Rate of Sexually Transmissible Infections in Adolescents (2012)**

Location	No.	Rate*
Campaspe	17	518 ●
<b>Victoria</b>	<b>1,569</b>	<b>385</b>

Victorian Child and Adolescent Monitoring System (VCAMS), accessed via the VCAMS Portal online August 2016 at <http://www.education.vic.gov.au/about/research/Pages/vcamstableau.aspx> \* Rate of infections in young people (per 100,000 aged 12 - 17 years)

## Crime and Young People

In 2014-15, the rate of crime offenders that were children or young people was much lower than the Victorian average (22.7 per 1,000) in Campaspe (13.1).

**Figure 283. Crime Where Offender Was a Child or Young Person (2014-15)**

Location	Number*	Rate#
Campaspe	114	13.1
<b>Victoria</b>	<b>29,025</b>	<b>22.7</b>

Victorian Child and Adolescent Monitoring System (VCAMS), accessed via the VCAMS Portal online August 2016 at <http://www.education.vic.gov.au/about/research/Pages/vcamstableau.aspx> \*Number of crimes where the offender was a child or young person aged 0-17 #Rate per 1,000 persons aged 0 - 17 years

In 2014-15, the rate of crime victims that were children or young people was slightly higher than the Victorian average (9.6 per 1,000) in Campaspe (10.9).

**Figure 284. Crime Where The Victim was a Child or Young Person (2014-15)**

Location	Number*	Rate#
Campaspe	95	10.9
<b>Victoria</b>	<b>12,306</b>	<b>9.6</b>

Victorian Child and Adolescent Monitoring System (VCAMS), accessed via the VCAMS Portal online August 2016 at <http://www.education.vic.gov.au/about/research/Pages/vcamstableau.aspx> \*Number of crimes where the offender was a child or young person aged 0-17 #Rate per 1,000 persons aged 0 - 17 years

## Alcohol and Drug Related Harm

In 2012-13, compared to Victoria, Campaspe had a much higher rate per 10,000 young people of alcohol related harm ambulance attendances (71.8 vs 55.8), assaults that occurred in high alcohol hours (98.6 vs 28.9), and alcohol related family violence incidents (58.1 vs 22.7).

Campaspe young people also had a higher rate of illicit drug treatment episodes of care (169.7 vs 137.9) and ambulance attendances for pharmaceutical drug related harm (32.4 vs 29.4).

**Figure 285. Alcohol and Drug Related Harm (2012-13 and 2013-14)**

Measure	Campaspe Rate*	Victoria Rate*
Alcohol related harm emergency department presentations	22.9	25.2
Alcohol related harm hospital separations	18.3	22.0
Alcohol related harm ambulance attendances	71.8 ●	55.8
Assaults that occurred in high alcohol hours	98.6 ●	28.9
Alcohol related family violence incidents	58.1 ●	22.7
Ambulance attendance rates for illicit drug-related harm	20.9	29.2
Episodes of care rates for illicit drug-related treatment	169.7 ●	137.9
Ambulance attendance rates for pharmaceutical drug related treatment	32.4 ●	29.4

AODstats, Turning Point - Eastern Health, accessed January 2017 \*Rate per 10,000 population np = not published in data source



## Hospitalisations

### Ambulatory Care Sensitive Condition Hospital Admissions

In 2014-15, compared to Victoria, Campaspe young people had a much higher admission rate for urinary tract infections (4.1 vs 1.7 per 1,000) and cellulitis (2.9 vs 1.5); and also had a higher rate of convulsions and epilepsy (1.9 vs 1.1), iron deficiency anaemia (1.9 vs 1.0), and diabetes complications (1.4 vs 1.1).

**Figure 286. Admission Rate for Most Common ACSCs - Persons Aged 15-24 Years (2014-15)**

ACSC	Campaspe		Regional Victoria	Victoria
	Number	Rate	Rate	Rate
Urinary tract infections, incl. pyelonephritis	15	4.1 ●	1.7	1.7
Cellulitis	13	2.9 ●	1.7	1.5
Dental conditions	10	2.1	2.1	2.3
Convulsions and epilepsy	7	1.9 ●	1.3	1.1
Iron deficiency anaemia	8	1.9 ●	1.0	1.0
Diabetes complications	5	1.4 ●	1.8	1.1
Ear, nose and throat infections	5	1.2	1.9	1.7

Victorian Health Information Surveillance System, DHHS, accessed online January 2017 \*Standardised rate per 1,000 population, based on 2011 estimated resident population \* Age standardised rate per 1,000

### Hospitalisations for Accidental Injuries

In 2011-12 to 2013-14, Campaspe young people made up 12% of all hospitalisations for accidental injuries and this proportion was the same as the state average.

Between 2012 and 2016 however, young people aged 0 to 17 years (11%) and aged 18 to 25 years (26%) made up a much greater proportion of hospitalisations for injuries from car accidents that occurred in Campaspe Shire compared to the state-wide average (6% and 21% respectively).

Between February 2009 and 2017, young people aged 18 to 20 years (21%) made up a much greater proportion of all fatalities that resulted from car accidents in Campaspe Shire, compared to the state-wide average (9%).

**Figure 287. Hospitalisations for Accidental Injuries - 15-24 Years (2011-12 to 2013-14)**

Location	No.	%*
Campaspe	277	12%
Regional Victoria	10,795	13%
<b>Victoria</b>	<b>36,932</b>	<b>12%</b>

Victorian Injury Surveillance Unit (VISU), Monash University Injury Research Institute, commissioned data 2015 \*Of all hospitalisations

**Figure 288. Hospitalisations for Car Accident Injuries - by Sex and Age (2012-16\*)**

Sex and Age	Campaspe	Victoria
Total number	160	24,519
0 to 17 years	11%	6%
18 to 25 years	26%	21%

Road Trauma Statistics for Serious Injuries, Transport Accident Commission (TAC), 1st February 2017 \* June 2012 - June 2016

**Figure 289. Deaths From Car Accident Injuries - by Sex and Age (2009-17\*)**

Sex and Age	Campaspe	Victoria
Total number	34	2,182
Female	24%	29%
Male	76%	71%
0 to 17 years	0%	2%
18 to 20 years	21%	9%

Road Trauma Statistics for Serious Injuries, Transport Accident Commission (TAC), 1st February 2017 \* 1st January 2009 - 1st January 2017

### Intentional Injuries

In 2011-12 to 2013-14, Campaspe young people made up 31% of all hospitalisations for assault, neglect and maltreatment injuries and this proportion was higher than the state average.

Over the same period, persons aged 15 to 19 years made up 9% of all affected family members in reported family incidents that occurred in Campaspe Shire, with persons aged 20 to 24 years accounting for a further 14%. Both figures were higher than Victoria averages.

Campaspe residents aged 15 to 24 years made up 27% of all Campaspe hospitalisations for intentional self harm injuries between 2011-12 and 2013-14.

**Figure 290. Hospital Separations for Assault and Neglect Injuries - 15-24 yrs (2011-12 to 2013-14)**

Location	No.	%
Campaspe	20	31%
<b>Victoria**</b>	<b>2,950</b>	<b>29%</b>

Victorian Injury Surveillance Unit (VISU), Monash University Injury Research Institute, commissioned data 2015

**Figure 291. Affected Family Members in Reported Family Incidents - 15-24 years (2013-15\*)**

Location	15 - 19 Years	20 - 24 Years
Campaspe No.	104	157
Campaspe %	9%	14%
<b>Victoria %</b>	<b>8%</b>	<b>12%</b>

Crime Statistics Agency 2016, commissioned data 2015 and 2016 \*July 2013 - June 2015 #Total excludes incidents where the age was recorded as unknown as numbers were too small to publish and affected capacity to calculate a total. Total % may not be 100% due to decimal point place

**Figure 292. Hospitalisations# for Intentional Self-Harm Injuries: 15 - 24 years (2011-12 to 2013-14)**

Location	No.	%
Campaspe	22	27%
<b>Victoria**</b>	<b>5,299</b>	<b>31%</b>

Victorian Injury Surveillance Unit (VISU), Monash University Injury Research Institute, commissioned data 2015 \* Average annual rate per 100,000 population based on the 2012 ERP

# Older Persons

## Older People Living Alone

In 2011, there were 1,673 people aged 65 years and over who lived alone in Campaspe Shire. Compared to the regional Victoria average (29.9%), Campaspe had a lower proportion (27.9%) of population aged 65 years and over that lived alone. Between 2006 and 2011, the proportion of Campaspe Shire residents aged 65 years and over that lived alone decreased.

**Figure 293. Proportion of People Aged 65 Years and Over Living Alone (2011)**

Year	Campaspe		Regional Victoria	Victoria
	No.	%	%	%
2006	1,542	29.5%	28.4%	<b>30.6%</b>
2011	1,673	27.9%	29.9%	<b>27.3%</b>

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS

## Income

In 2011, compared to regional Victoria, Campaspe residents aged 65 years and over were generally more likely to be earning between \$200 and \$599 per week and less likely to be earning more than \$600 per week. Campaspe residents were also less likely than the regional Victoria and Victoria average to be earning \$1 to \$199 per week. Data could not be compared to 2006 figures, due to change in income brackets.

**Figure 294. Gross Individual Income for Persons Aged 65 Years and Over (2011)**

Income	Campaspe		Regional Victoria	Victoria
	No.	%	%	%
Negative/Nil	201	2.8%	2.5%	<b>3.3%</b>
\$1-\$199	320	4.5%	4.6%	<b>5.1%</b>
\$200-\$299	1,748	24.7%	24.3%	<b>23.5%</b>
\$300-\$399	1,831	25.9%	25.8%	<b>23.6%</b>
\$400-\$599	1,267	17.9%	17.8%	<b>16.3%</b>
\$600-\$799	406	5.7%	6.6%	<b>6.6%</b>
\$800-\$999	171	2.4%	3.1%	<b>3.5%</b>
\$1,000-\$1,249	116	1.6%	1.9%	<b>2.4%</b>
\$1,250-\$1,499	47	0.7%	1.0%	<b>1.4%</b>
\$1,500-\$1,999	44	0.6%	0.8%	<b>1.3%</b>
\$2,000 or more	48	0.7%	1.0%	<b>1.8%</b>
Not stated	878	12.4%	10.7%	<b>11.1%</b>
Total	7,077	100%	100%	<b>100%</b>

2011 Census of Population and Housing, Basic Community Profiles, ABS

## HACC Clients

In 2014-15, Campaspe (605.3) had a significantly higher rate of residents aged 0 – 64 years, and 65 years and over (1,118.9), who were HACC clients compared to the Victorian averages (305.3 and 737.8 respectively).

*Note that, on 1 July 2015, the Commonwealth Home Support Program (CHSP) commenced, consolidating the Commonwealth Home and Community Care (HACC) Program, planned respite from the National Respite for Carers Program, the Day Therapy Centres Program and the Assistance with Care and Housing for the Aged Program. Data was not available for the CHSP at the time of writing.*

**Figure 295. HACC Service Clients (2014-15)**

Location	Aged 0-64 years	Aged 65 years and over
Campaspe	605.3 ●	1,118.9 ●
<b>Victoria</b>	<b>305.3</b>	<b>737.8</b>

Department of Health and Human Services 2016, "2015 local government areas (LGA) profiles" November 2016, Victoria State Government #per 100,000 persons # Data is based on the stated LGA of intended residence, not the actual LGA of residence after arrival.

**Figure 296. Selected Characteristics of HACC Service Clients (2012-13)**

Location	Campaspe	Regional Victoria	Victoria
Total HACC clients (number)	3,287	103,876	<b>285,610</b>
Total HACC clients (rate*)	67.6	61.8	<b>49.7</b>
Living alone % of total HACC clients	37.1	34.8	<b>34.6</b>
% of HACC clients with carer	20.1	24.1	<b>24.5</b>
Indigenous clients % of all HACC clients	2.5	1.5	<b>1.0</b>
Indigenous clients % of indigenous population	10.1	7.7	<b>7.4</b>
% of total HACC clients that are non-English speaking	1.0	2.6	<b>12.0</b>

Social Health Atlas of Australia, Local Government Areas, December 2016 release, PHIDU 2016 \*Age standardised rate per 1,000 persons

## Residential Aged Care

In 2015, there were 549 residential aged care places in Campaspe LGA.

*Note: As of 2015, only data on total residential aged care places is provided by the Commonwealth. This data is equivalent to the sum of high care and low care places included in previous versions of the LGA Profiles.*

**Figure 297. Residential Age Care Places\* (2015)**

Location	No.
Campaspe	549
<b>Victoria</b>	<b>51,131</b>

2015 LGA Profiles, Department of Health & Human Services Victoria, November 2016 \* Age standardised rate per 1,000 population. \*Number of Commonwealth government-subsidised residential aged care places

# Diversity

## Language Spoken at Home

In 2011, reflecting the high proportion of the region's residents who were born in Australia, Campaspe Shire also has a high proportion (93%) of residents who only speak English at home. This figure was higher than regional Victoria (90%) and Victoria (72%).

**Figure 298. Only Speaks English at Home (2006 and 2011)**

Location	Year	Number	Percentage of population
Campaspe	2006	33,591	92%
	2011	33,909	93%
Regional Victoria	2006	1,216,055	91%
	2011	1,217,023	90%
Victoria	2006	3,668,282	74%
	2011	3,874,863	72%

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS

In 2011, after English, the most common languages spoken at home were (in order): Italian, Filipino, German, Tagalog, Greek, Dutch, Mandarin, Arabic, Cantonese, French and Spanish. Compared to Victorian average figures, Campaspe had a lower proportion of population that spoke any of these languages at home.

**Figure 299. Top 12 Languages Spoken at Home (2011)**

Language	Campaspe		Victoria
	No.	%	
English only	33,909	93.3%	72.4%
Italian	277	0.75%	2.3%
Filipino	60	0.16%	0.3%
German	45	0.12%	0.4%
Tagalog	42	0.12%	0.3%
Greek	31	0.09%	2.2%
Dutch	29	0.08%	0.2%
Mandarin	27	0.07%	1.9%
Arabic	24	0.07%	1.3%
Cantonese	22	0.06%	1.4%
French	22	0.06%	0.3%
Spanish	20	0.05%	0.5%

2011 Census of Population and Housing, Basic Community Profiles, ABS

## Migrants

In 2014-15, compared to Victoria, Campaspe had a much lower rate of new settler arrivals and 0% of new settlers were humanitarian settlers.

**Figure 300. New Settler Arrivals and % That are Humanitarian Settlers (2014-15)**

Location#	Rate* of New Settler Arrivals	% Humanitarian Settlers
Campaspe	54.2	0.0%
<b>Victoria</b>	<b>682.5</b>	<b>9.3%</b>

Department of Health and Human Services 2016, "2015 local government areas (LGA) profiles" November 2016, Victoria State Government #per 100,000 persons # Data is based on the stated LGA of intended residence, not the actual LGA of residence after arrival.

Between 2007 and 2012, humanitarian migrants (refugees) made up a smaller proportion (2%) of Campaspe migrants than the Victorian average (9.0%). Campaspe had a higher proportion (42%) of migrants arrive on family visas, compared to Victoria (32%). Note that collection of data for the DIAC settlement database is not mandatory and figures provide a guideline only.

**Figure 301. Migrants by Main Migration Streams (2007 – 2012)**

Location	Humanitarian		Family		Skilled		Total	
Campaspe	3	2%	79	42%	106	56%	188	100%
<b>Victoria</b>	<b>20,331</b>	<b>9%</b>	<b>70,948</b>	<b>32%</b>	<b>130,814</b>	<b>59%</b>	<b>222,093</b>	<b>100%</b>

Department of Immigration and Citizenship – Commonwealth Government

## Refugees

Between 2007 and 2012, Campaspe had three migrants arrive on humanitarian visas. Of these, the largest proportion were migrants who were born in Iraq. Note that collection of data for the DIAC settlement database is not mandatory and figures provide a guideline only.

**Figure 302. Humanitarian Refugees Residing in Campaspe by Country of Birth (2007 – 2012)**

Country of birth	No.	
Iraq	2	
China People's Republic	1	
Total Arrivals	<b>3</b>	100%

Department of Immigration and Citizenship – Commonwealth Government

### Other notes and caveats:

Data represent permanent migrants who arrived in Australia on a permanent visa or were granted a permanent visa while in Australia (certain provisional visa holders are also included).

Reports generated through the SRF include migrants who arrived in Australia on a permanent visa (or were granted a permanent visa whilst in Australia) during the selected timeframe of the report and currently reside in the selected location of the report.

Locations of migrants in SRF reports may not be current due to limitations in the capture of residential information and may result in inaccurate counts of migrants in some geographical areas.

## Disability

The core activity need for assistance is where a person requires assistance with one or more core activities (self-care, mobility and communication) because of a disability, long term health condition (lasting six months or more) or old age. The core activity need for assistance data set was developed by the ABS as a measure of profound or severe disability.

In 2011, there were 2,155 Campaspe residents who had a core activity need for assistance. This figure represented 6% of the total population. Campaspe males and females were, overall, equally as likely to have a core activity need for assistance. Campaspe population aged 85 years and over was most likely (as a proportion of that total age group) to have a core activity need for assistance.

Compared to Victoria (5%), Campaspe had a higher proportion of total population (6%) that had a core activity need for assistance. Campaspe also had a higher proportion of males aged 15 to 19 years, 25 to 34 years, 45 to 64 years and 85 years and over who had a core activity need for assistance; while it had a higher proportion of females aged 15 to 34 years, 45 to 64 years and 85 years and over. It is interesting to note that Campaspe had a lower proportion of males and females (especially females) aged 65 to 84 years who had a core activity need for assistance.

Between 2006 and 2011 the proportion of Campaspe males and females with a core activity need for assistance increased by 1% overall. The greatest increases appeared to take place in the population aged less than 65 years.

Figure 303. Core Activity Need for Assistance (2006 and 2011)

Sex and Age	Campaspe				Victoria	
	2006 No.	% of total pop.	2011 No.	% of total pop.	2006 % of total pop.	2011 % of total pop.
<b>MALES</b>						
0-4 years	7	1%	17	1%	1%	1%
5-14 years	82	3%	98	4%	3%	4%
15-19 years	26	2%	59	4%	2%	2%
20-24 years	21	2%	16	2%	1%	2%
25-34 years	32	2%	50	3%	1%	1%
35-44 years	54	2%	46	2%	2%	2%
45-54 years	87	3%	110	4%	3%	3%
55-64 years	139	6%	169	7%	5%	5%
65-74 years	121	8%	176	9%	8%	9%
75-84 years	186	19%	159	15%	18%	19%
85 years and over	123	46%	150	45%	39%	40%
<b>Total</b>	<b>878</b>	<b>5%</b>	<b>1,050</b>	<b>6%</b>	<b>4%</b>	<b>4%</b>
<b>FEMALES</b>						
0-4 years	6	1%	7	1%	1%	1%
5-14 years	35	1%	39	2%	1%	2%
15-19 years	15	1%	32	3%	1%	1%
20-24 years	13	2%	21	2%	1%	1%
25-34 years	22	1%	38	2%	1%	1%
35-44 years	38	1%	37	2%	2%	2%
45-54 years	74	3%	99	4%	3%	3%
55-64 years	90	4%	144	6%	5%	5%
65-74 years	107	7%	134	7%	8%	9%
75-84 years	242	20%	246	19%	23%	24%
85 years and over	271	53%	308	54%	51%	52%
<b>Total</b>	<b>913</b>	<b>5%</b>	<b>1,105</b>	<b>6%</b>	<b>5%</b>	<b>5%</b>
<b>PERSONS</b>						
0-4 years	13	1%	24	1%	1%	1%
5-14 years	117	2%	137	3%	2%	3%
15-19 years	41	2%	91	4%	1%	2%
20-24 years	34	2%	37	2%	1%	1%
25-34 years	54	2%	88	3%	1%	1%
35-44 years	92	2%	83	2%	2%	2%
45-54 years	161	3%	209	4%	3%	3%
55-64 years	229	5%	313	6%	5%	5%
65-74 years	228	7%	310	8%	8%	9%
75-84 years	428	20%	405	17%	21%	22%
85 years and over	394	51%	458	50%	47%	48%
<b>Total</b>	<b>1,791</b>	<b>5%</b>	<b>2,155</b>	<b>6%</b>	<b>4%</b>	<b>5%</b>

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS



# Environment

## Violence in the Community

### Hospitalisations for Assault and Neglect Injuries

Over 2011-12 to 2013-14, there were 65 hospitalisations of Campaspe PCP residents for injuries caused by an assault or neglect. Males made up 69% of hospitalisations and this proportion was lower than the state average (76%). Almost one third of hospitalised persons were aged 15 - 24 year and this proportion was slightly higher than the state average of 29%.

**Figure 304. Hospital Separations for Assault and Neglect Injuries - by Sex (2011-12 to 2013-14)**

Location	Total No.	Male		Female	
		No.	%	No.	%
Campaspe	65	45	69%	20	31%
Victoria	10,123	7,716	76%	2,407	24%

Victorian Injury Surveillance Unit (VISU), Monash University Injury Research Institute, commissioned data 2015

**Figure 305. Hospital Separations for Assault and Neglect Injuries - by Age (2011-12 to 2013-14)**

Location	0-14 years		15-24 years		25-64 years		65+ years		Total No.
	No.	%	No.	%	No.	%	No.	%	
Campaspe	np	np	20	31%	41	63%	np	np	65
Victoria**	275	3%	2,950	29%	6,589	65%	309	3%	10,123

Victorian Injury Surveillance Unit (VISU), Monash University Injury Research Institute, commissioned data 2015

### Crimes Against the Person

In September 2016, compared to Victoria (1,308), Campaspe had a much higher rate (2,109) of crimes against the person. Rates of all offences, except robbery, were higher than the state average. The rate of sexual offences (632) was more than three times the Victoria average (208), and rates of assault and related offences and of stalking, harassment and threatening behaviour were also much higher than state averages. Between September 2015 and 2016, the total number of crimes against persons increased by 53.1% and this increase was approximately five times the Victorian increase (10.3%).

*Note that location descriptions are for where the crime took place and not the place of residence of the victim or offender.*

**Figure 306. Crimes Against The Person (2015-16\*)**

Offence	Campaspe		Victoria Rate#	Change 2015 - 2016	
	No.	Rate#		Campaspe	Victoria
Homicide & rel. offences	2	5	3	na	13.3%
Assault & rel. offences	347	954	720	18.0%	12.6%
Sexual offences	230	632	208	147.3%	2.4%
Abduction & rel. offences	12	33	14	300.0%	11.3%
Robbery	9	25	52	125.0%	21.5%
Blackmail and extortion	3	8	3	200.0%	-13.9%
Stalking, harassment & threatening behaviour	115	316	214	42.0%	5.1%
Dangerous & negl. acts endangering people	49	135	94	96.0%	20.5%
<b>Total</b>	<b>767</b>	<b>2,109</b>	<b>1,308</b>	<b>53.1%</b>	<b>10.3%</b>

Crime Statistics Agency, Victoria, 2016 #Rate per 100,000 ERP based on Victoria in Future 2015 figures. Note that CSA figures are subject to change over time. \*From September 2015 to September 2016

Between 2012 and 2015, compared to Victorian female averages, females made up a greater proportion of victims of homicide (67% vs 36%), assault (55% vs 48%), and sexual offences (82% vs 80%) that occurred in Campaspe.

Compared to Victorian averages, males made up a greater proportion of victims of stalking, harassment and threatening behaviour (40% vs 33%) offences that occurred in Campaspe.

Females made up a greater proportion of victims, compared to males, of all crimes against persons offences that occurred in Campaspe.

**Figure 307. Victims of Selected Crimes Against Persons, by Sex# (2012-15\*)**

Location	Homicide and related offences		Assault and related offences		Sexual Offences		Stalking, harassment and threatening behaviour	
	M	F	M	F	M	F	M	F
Campaspe %	np	67%	43%	55%	17%	82%	40%	55%
Campaspe no.	≤ 3	4	317	404	30	145	34	47
<b>Victoria Total</b>	<b>62%</b>	<b>36%</b>	<b>50%</b>	<b>48%</b>	<b>18%</b>	<b>80%</b>	<b>33%</b>	<b>64%</b>

Data commissioned from Crime Statistics Agency, Victoria, 2016. Note that CSA figures are subject to change over time. \*July 2012 to June 2015 # Note that unknown sex has been excluded so figures do not always add up to 100%

## Reported Family Incidents

In September 2016, the rate of family incidents in Campaspe (1,889) was notably higher than the state average (1,302). Between September 2015 and September 2016, the rate of family incidents in Campaspe increased by 25%, compared to a 7% increase across Victoria.

*Note that location descriptions are for where the reported family incident took place and not the place of residence of the affected family member or other party.*

**Figure 308. Rate of Family Incidents (September 2016)**

Location	Rate*	Change between September 2015 and September 2016
Campaspe	1,889 ●	25% ●
<b>Victoria</b>	<b>1,302</b>	<b>7%</b>

Crime Statistics Agency, Victoria, 2016 #Rate per 100,000 2014 ERP based on Victoria in Future 2015 figures. Note that CSA figures are subject to change over time.

## The Affected Family Member

From July 2013 to June 2015, in Campaspe:

- 81% of affected family members were female and 19% male. Compared to the state average (76%), Campaspe had a greater proportion of female affected family members
- 16% of affected family members were aged <20 years, compared to the state average of 13%, and 42% were aged 20 to 34 years, compared to the state average of 37%, and
- 37% of affected family members were the defacto partner of the other party and this proportion was notably higher than the state average (24%).

**Figure 309. Affected Family Members in Reported Family Incidents by Sex (2013-15\*)**

Location	Male		Female		Total# No.
	No.	%	No.	%	
Campaspe	216	19%	899	81%	1,115
<b>Victoria</b>	<b>33,040</b>	<b>24%</b>	<b>102,146</b>	<b>76%</b>	<b>135,186</b>

Crime Statistics Agency 2016, commissioned data 2015 and 2016 \*July 2013 - June 2015 #Total excludes incidents where the sex was recorded as unknown as numbers were too small to publish and affected capacity to calculate a total.

**Figure 310. Affected Family Members in Reported Family Incidents by Age (2013-15\*)**

Location	<15 Years	15 - 19 Years	20 - 24 Years	25 - 34 Years	35 - 44 Years	≥45 Years	Total#
Campaspe No.	78	104	157	308	242	217	1,106
Campaspe %	7%	9%	14%	28%	22%	20%	100%
<b>Victoria %</b>	<b>5%</b>	<b>8%</b>	<b>12%</b>	<b>25%</b>	<b>24%</b>	<b>25%</b>	<b>100%</b>

Crime Statistics Agency 2016, commissioned data 2015 and 2016 \*July 2013 - June 2015 #Total excludes incidents where the age was recorded as unknown as numbers were too small to publish and affected capacity to calculate a total. Total % may not be 100% due to decimal point place

**Figure 311. Affected Family Members in Reported Family Incidents by Relationship (2013-15\*)**

Location	Boyfriend	Child	Defacto	Divorced	Girlfriend	Married	Parent	Parent/Child	Total#
Campaspe	16	102	329	9	81	69	123	159	888
Campaspe %	2%	12%	37%	1%	9%	8%	14%	18%	100%
<b>Victoria %</b>	<b>3%</b>	<b>11%</b>	<b>24%</b>	<b>2%</b>	<b>11%</b>	<b>15%</b>	<b>16%</b>	<b>19%</b>	<b>100%</b>

Crime Statistics Agency 2016, commissioned data 2015 and 2016 \*July 2013 - June 2015 #Total excludes incidents where the relationship recorded as unknown as numbers were too small to publish and affected capacity to calculate a total. Total % may not be 100% due to decimal point place

### The Other Party

From July 2013 to June 2015, in Campaspe:

- Had a notably greater proportion of male other parties (81%) compared to the state average of 77%, and
- Had a notably larger proportion of other parties that were aged 24 years or less:
  - 12% were aged less than 20 years, compared to the Victorian average of 11%
  - 18% were aged 20 to 24 years, compared to the Victorian average of 13%
  - 57% were aged 25 to 44 years, which reflected the Victorian average of 56%, and
  - 13% were aged 45 years and over, compared to the Victorian average of 20%.

**Figure 312. Other Parties in Reported Family Incidents by Sex (2013-15\*)**

Location	Male		Female		Total#
	No.	%	No.	%	No.
Campaspe	892	81%	212	19%	1,104
<b>Victoria</b>	<b>104,317</b>	<b>77%</b>	<b>30,490</b>	<b>23%</b>	<b>134,807</b>

Crime Statistics Agency 2016, commissioned data 2015 and 2016 \*July 2013 - June 2015 #Total excludes incidents where the sex was recorded as unknown as numbers were too small to publish and affected capacity to calculate a total.

**Figure 313. Other Parties in Reported Family Incidents by Age (2013-15\*)**

Location	<20 Years	20 - 24 Years	25 - 34 Years	35 - 44 Years	≥45 Years	Total#
Campaspe No.	126	201	322	297	147	1,093
Campaspe %	12%	18%	30%	27%	13%	100%
<b>Victoria %</b>	<b>11%</b>	<b>13%</b>	<b>29%</b>	<b>27%</b>	<b>20%</b>	<b>100%</b>

Crime Statistics Agency 2016, commissioned data 2015 and 2016 \*July 2013 - June 2015 #Total excludes incidents where the age was recorded as unknown as numbers were too small to publish and affected capacity to calculate a total. Total % may not be 100% due to decimal point place

### Hospital Admissions

Between July 2011 and June 2014, there were 21 Campaspe residents hospitalised for intentional injuries caused by a family member or domestic partner. Of the hospitalised persons, 71% were female, compared to the Victorian average of 68%.

**Figure 314. Hospitalisations for Intentional Injuries Caused by Family Member/Domestic Partner (July 2011 to June 2014)**

Location	Male		Female		Total	
	No.	%	No.	%	No.	
Campaspe (S)	6	29%	15	71%	21	
<b>Victoria<sup>#</sup></b>	<b>616</b>	<b>32%</b>	<b>1,310</b>	<b>68%</b>	<b>1,926</b>	

Numbers commissioned from Victorian Injury Surveillance Unit (VISU), Monash University Injury Research Institute, in 2015. Rates prepared by author. Counts are very low and rates should be interpreted with caution.

# Accidental Injuries

## Hospitalisations for Accidental Injuries

Over the period 2011-12 to 2013-14, the rate of hospitalisations (2,058) for accidental injuries (including falls) per Campaspe population was higher than the Victoria (1,810) and regional Victoria (1,936) average. *Note that rates are not standardised.*

Of the hospitalised Campaspe residents:

- 56% were male and 44% were female, reflecting the state and regional Victoria pattern
- Children aged 0 to 14 years made up 14% of hospitalisations and this proportion was slightly higher than the regional Victoria (13%) and Victoria average (12%)
- Persons aged 65 years and older made up 39% of hospitalisations and this proportion was slightly higher than the regional Victoria and Victoria average (each 37%)
- 42.8% of injuries were caused by falls, 14.3% by transport, and 6.8% by being hit/struck/crushed, and
- Almost 21% of injuries occurred at home, 7.8% on a road/highway and 1.4% on a farm.

**Figure 315. Hospitalisations for Accidental Injuries - by Sex and Total rate (2011-12 to 2013-14)**

Location	Male		Female		Total		Rate*
	No.	%	No.	%	No.	%	
Campaspe	1,284	56%	998	44%	2,282	100%	2,058 ●
Regional Victoria	46,774	56%	36,980	44%	83,754	100%	1,936
<b>Victoria</b>	<b>166,597</b>	<b>55%</b>	<b>139,071</b>	<b>45%</b>	<b>305,668</b>	<b>100%</b>	<b>1,810</b>

Victorian Injury Surveillance Unit (VISU), Monash University Injury Research Institute, commissioned data 2015 \*Average annual rate per 100,000 2012 ERP NOTE: numbers provided by the VISU and rate prepared by the author of this document

**Figure 316. Hospitalisations for Accidental Injuries - by Age (2011-12 to 2013-14)**

Location	0 - 14 years	15 to 24 years	25 to 64 years	≥65 years	Total No.	%
Campaspe	14%	12%	34%	39%	2,282	100%
Regional Victoria	13%	13%	37%	37%	83,754	100%
<b>Victoria</b>	<b>12%</b>	<b>12%</b>	<b>39%</b>	<b>37%</b>	<b>305,668</b>	<b>100%</b>

Victorian Injury Surveillance Unit (VISU), Monash University Injury Research Institute, commissioned data 2015

**Figure 317. Hospitalisations for Accidental Injuries - by Cause (2011-12 to 2013-14)**

Location	Transport	Poisoning	Fall	Fires/ Burns/ Scalds	Natural/ Envi./ Animals	Hit/Struck/ Crush	Machinery
Campaspe	14.3%	1.8%	42.8%	1.7%	5.4%	6.8%	1.4%
Regional Victoria	12.8%	2.1%	43.0%	1.4%	4.1%	8.1%	1.4%
<b>Victoria</b>	<b>11.8%</b>	<b>2.1%</b>	<b>45.1%</b>	<b>1.1%</b>	<b>3.0%</b>	<b>8.2%</b>	<b>1.1%</b>

Victorian Injury Surveillance Unit (VISU), Monash University Injury Research Institute, commissioned data 2015

**Figure 318. Hospitalisations for Accidental Injuries - by Setting (2011-12 to 2013-14)**

Location	Home	Sports	Road/Street/ H'way	Residential Instit.	Working For Income	Health S'vce Area	Farm	Forest/Desert/ Countryside
Campaspe	20.9%	4.9%	7.8%	4.0%	6.1%	4.5%	1.4%	0.4%
Regional Victoria	24.8%	5.8%	7.9%	4.7%	6.7%	5.4%	1.0%	0.5%
<b>Victoria</b>	<b>23.8%</b>	<b>5.2%</b>	<b>9.2%</b>	<b>6.1%</b>	<b>6.5%</b>	<b>4.3%</b>	<b>0.4%</b>	<b>0.4%</b>

Victorian Injury Surveillance Unit (VISU), Monash University Injury Research Institute, commissioned data 2015

## Hospitalisations for Injuries Caused by Falls

Over the period 2011-12 to 2013-14, the rate of hospitalisations (880 per 100,000) for injuries caused by falls per Campaspe population was higher than the Victoria (817) average. *Note that figures are not standardised.*

Of the hospitalised Campaspe residents:

- 43.5% were male and 56.5% were female, reflecting the state and regional Victoria pattern
- Persons aged 65 years and over (62%) made up the greatest proportion of all hospitalisations and this proportion was higher than the state average (59%), and
- Children aged 0 to 14 years made up 14% of hospitalisations and this proportion was higher than the Victoria average (12%).

**Figure 319. Hospitalisations for Injuries Caused by Falls (2011-12 to 2013-14)**

Location	no.	Rate*
Campaspe	976	880 ●
<b>Victoria</b>	<b>137,976</b>	<b>817</b>

Victorian Injury Surveillance Unit (VISU), Monash University Injury Research Institute, commissioned data 2015 \*Average annual rate per 100,000 2012 ERP NOTE: numbers provided by the VISU and rate prepared by the author of this document

**Figure 320. Hospitalisations for Injuries Caused by Falls - by Sex (2011-12 to 2013-14)**

Location	Male		Female	
Campaspe	425	43.5%	551	56.5%
<b>Victoria</b>	<b>60,389</b>	<b>42.9%</b>	<b>80,497</b>	<b>57.1%</b>

Victorian Injury Surveillance Unit (VISU), Monash University Injury Research Institute, commissioned data 2015

**Figure 321. Hospitalisations for Injuries Caused by Falls - by Age (2011-12 to 2013-14)**

Location	0 - 14 years	15 to 24 years	25 to 64 years	≥65 years	Total# No.	%
Campaspe	14%	5%	20%	62%	976	100%
<b>Victoria</b>	<b>12%</b>	<b>5%</b>	<b>24%</b>	<b>59%</b>	<b>137,976</b>	<b>100%</b>

Victorian Injury Surveillance Unit (VISU), Monash University Injury Research Institute, commissioned data 2015 #Total may not add up to 100% due to decimal place rounding up

## Deaths from Injuries

### Avoidable Mortality

Between 2010 and 2014, Campaspe (20.0 per 100,000) had a much higher estimated rate of avoidable mortality caused by external causes<sup>#</sup> compared to Victoria (13.6) and a similar rate compared with regional Victoria (20.2). Within the PCP region, the Kyabram/Rochester/Rushworth PHA (23.9) had a notably higher estimated rate.

<sup>#</sup> Transport accidents, Accidental drowning and submersion; other accidental threats to breathing, Exposure to inanimate mechanical forces, Exposure to animate mechanical forces, Exposure to electric current, radiation and extreme ambient air temperature and pressure, Contact with heat and hot substances, Contact with venomous animals and plants, Exposure to forces of nature, Accidental poisoning by and exposure to noxious substances, Overexertion, travel and privation, Accidental exposure to other and unspecified factors, Assault, Event of undetermined intent, Legal interventions and operations of war, Drugs, medicaments and biological substances causing adverse effects in therapeutic use.

**Figure 322. Avoidable Deaths (ages 0 to 74 Years) from Selected External Causes (2010-14)**

Location	No.	Rate*
Echuca/ Lockington - Gunbower	13	15.9 ●
Kyabram/ Rochester/ Rushworth	20	23.9 ●
Campaspe (S)	33	20.0 ●
Regional Victoria	1,264	20.2
<b>Victoria</b>	<b>3,598</b>	<b>13.6</b>

Social Health Atlas of Australia, Population Health Areas and Local Government Areas, December 2016 release, PHIDU 2016 \*Average annual age standardised modelled estimate rate per 100,000 persons

### Premature Mortality

Between 2010 and 2014, Campaspe (31.0 per 100,000) had a much higher estimated rate of preventable mortality caused by external causes compared to Victoria (25.1) and a lower rate compared with regional Victoria (34.9). Within the PCP region, the Kyabram/Rochester/Rushworth PHA (35.2) had a notably higher estimated rate.

**Figure 323. Premature Deaths (ages 0 to 74 Years) from Selected External Causes (2010-14)**

Location	No.	Rate*
Echuca/ Lockington - Gunbower	22	26.6 ●
Kyabram/ Rochester/ Rushworth	30	35.2 ●
Campaspe (S)	52	31.0 ●
Regional Victoria	2,210	34.9
<b>Victoria</b>	<b>6,649</b>	<b>25.1</b>

Social Health Atlas of Australia, Population Health Areas and Local Government Areas, December 2016 release, PHIDU 2016 \*Average annual age standardised modelled estimate rate per 100,000 persons

## Road Accidents

### Hospitalisations

Over the period 2012 to 2016, 160 people were hospitalised for injuries from road accidents that occurred in Campaspe Shire. Males made up 59% of hospitalisations and this proportion was higher than the Victorian average (57%). Compared to Victoria (6% and 21% respectively) there was a much higher proportion of Campaspe hospitalisations in the 0 to 17 years and the 18 to 25 years age groups (11% and 26% respectively).

Drivers made up 49% of all persons hospitalised, and passengers accounted for 24%.

Saturday (26%) was the most common day for a car accident injury to occur in Campaspe, and this proportion was much higher than the Victorian average (16%).

12 noon - 6 pm (39%), followed by 6 am - 12 noon (29%), was the most common time of day for a car accident injury to occur and this pattern reflected Victorian averages.

**Figure 324. Hospitalisations for Car Accident Injuries - by Sex and Age (2012-16\*)**

Sex and age	Campaspe	Victoria
Total number	160	24,519
Female	41%	43%
Male	59%	57%
Unknown	0.6%	0.1%
0 to 17 years	11%	6%
18 to 25 years	26%	21%
26 to 39 years	19%	23%
40 to 59 years	22%	27%
60 years and over	23%	23%

Road Trauma Statistics for Serious Injuries, Transport Accident Commission (TAC), 1st February 2017 \* June 2012 - June 2016

**Figure 325. Hospitalisations for Car Accident Injuries - by Road User (2012-16\*)**

Road user	Campaspe	Victoria
Bicyclist	3%	6%
Driver	49%	46%
Motorcyclist	17%	17%
Passenger	24%	17%
Pedestrian	4%	11%
Unknown	3%	2%

Road Trauma Statistics for Serious Injuries, Transport Accident Commission (TAC), 1st February 2017 \* June 2012 - June 2016

**Figure 326. Hospitalisations for Car Accident Injuries - by day and time (2012-16\*)**

Day and time	Campaspe	Victoria
Monday	13%	13%
Tuesday	7%	13%
Wednesday	10%	14%
Thursday	14%	14%
Friday	15%	15%
Saturday	26%	16%
Sunday	16%	15%
00:00 to 05:59	5%	6%
06:00 to 11:59	29%	27%
12:00 to 17:59	39%	40%
18:00 to 23:59	18%	21%

Road Trauma Statistics for Serious Injuries, Transport Accident Commission (TAC), 1st February 2017 \* June 2012 - June 2016



## Deaths

Over the period 2009 to 2017, 34 people died as a result of a road accident that occurred in Campaspe Shire. Males made up 76% of these deaths and this figure was higher than the Victoria-wide male average (71%). Compared to the Victoria-wide average (9%), persons aged 18 to 20 years (21%) made up a substantially larger proportion of all car accident deaths that occurred in Campaspe.

Compared to the Victoria-wide average (48%), a much larger proportion of Campaspe fatalities were drivers (74%).

*Note: Data is not standardised and the age and sex structure of the local population is likely to influence data. Numbers are very small and should be interpreted with caution.*

**Figure 327. Deaths From Car Accident Injuries - by Sex and Age (2009-17\*)**

Sex and Age	Campaspe	Victoria
Total number	34	2,182
Female	24%	29%
Male	<b>76%</b>	71%
0 to 17 years	0%	2%
18 to 20 years	<b>21%</b>	9%
21 to 25 years	9%	11%
26 to 29 years	6%	8%
30 to 39 years	15%	14%
40 to 49 years	12%	13%
50 to 59 years	12%	12%
60 to 69 years	9%	10%
70 and over years	18%	17%

Road Trauma Statistics for Serious Injuries, Transport Accident Commission (TAC), 1st February 2017 \* 1st January 2009 - 1st January 2017

**Figure 328. Deaths from Car Accident Injuries - by Road User (2009-17\*)**

Road User	Campaspe	Victoria
Bicyclist	3%	3%
Driver	<b>74%</b>	48%
Motorcyclist	6%	15%
Passenger	15%	19%
Pedestrian	3%	15%

Road Trauma Statistics for Serious Injuries, Transport Accident Commission (TAC), 1st February 2017 \* 1st January 2009 - 1st January 2017

Between 2010 and 2014, Campaspe (9.7 per 100,000) had a much higher estimated rate of avoidable mortality (persons aged 0 - 74 years) from transport accidents compared to Victoria (5.1) and a similar rate compared with regional Victoria (9.5). Within the PCP region, the Kyabram/Rochester/ Rushworth PHA (13.2) had a notably higher estimated rate.

**Figure 329. Avoidable Deaths (ages 0 to 74 Years) From Transport Accidents (2010-14)**

Location	No.	Rate*
Echuca/ Lockington - Gunbower	5	6.2 ●
Kyabram/ Rochester/ Rushworth	11	13.2 ●
Campaspe (S)	16	9.7 ●
Regional Victoria	597	9.5
<b>Victoria</b>	<b>1,341</b>	<b>5.1</b>

Social Health Atlas of Australia, Population Health Areas and Local Government Areas, December 2016 release, PHIDU 2016 \*Average annual age standardised modelled estimate rate per 100,000 persons

## Workplace Accidents

Please note that LGA figures are based on the registered address of the employer and not the residence of the worker who has made the injury claim.

### WorkCover Injury Claims

Between 2008 and 2014, there were 1,132 workplace injury claims for businesses registered in the Campaspe PCP region.

The most common type of injuries were musculoskeletal system (36%), followed by traumatic joint/ligament and muscle/tendon injuries (17%), then wounds, lacerations and amputations (14%). Compared to the state average, Campaspe had a similar proportion of most injury types.

The most common mechanisms of injury were body stressing (43%), falls, slips and trips (18%), and being hit by a moving object (14%). Compared to the state average, Campaspe had a similar proportion of most mechanisms of injury.

The most common industry sectors for injuries were manufacturing (30%), health care and social services (16%), transport, postal and warehousing (9%), and agriculture, forestry and fishing (8%). Compared to Victoria, Campaspe had a much higher proportion of claims for injuries that occurred in the manufacturing sector (30% vs 19%) and the agriculture, forestry and fishing sector (8% vs 2%).

**Figure 330. Workplace Injury Claims - by Most Common Injury Types (2008-14)**

Injury type	Campaspe	Victoria
Burns	1%	1%
Circulatory system	0%	0%
Digestive system	2%	3%
Fractures	9%	8%
Intercranial injuries	2%	1%
Mental disorders	9%	10%
Musculoskeletal system	36%	38%
Nervous system and sense organs	6%	7%
Other injuries	3%	2%
Skin and subcutaneous tissue	1%	0%
Traumatic joint/ligament and	17%	15%
Wounds, lacerations and amputations	14%	13%
Total %	100%	100%
Total no.	1,132	172,303

WorkCover 5 yr of insured claims reported in fin. yrs within LGA by Industry, Affliction and Mechanism, WorkSafe Victoria, April 2014 Data accessed from [www.data.vic.gov.au](http://www.data.vic.gov.au)

**Figure 331. Workplace Injury Claims - by Mechanism (2008-14)**

Industry Sector	Campaspe	Victoria
01 Falls, slips and trips	18%	20%
02 Hitting object	5%	4%
03 Being hit by moving object	14%	13%
04 Sound and pressure	4%	6%
05 Body stressing	43%	41%
06 Heat, radiation and electricity	1%	1%
07 Chemicals and substances	1%	1%
09 Mental	9%	10%
10. Other	6%	5%
Total No.	100%	100%
Total No.	1,132	172,303

WorkCover 5 yr of insured claims reported in fin. yrs within LGA by Industry, Affliction and Mechanism, WorkSafe Victoria, April 2014 Data accessed from [www.data.vic.gov.au](http://www.data.vic.gov.au)

**Figure 332. Workplace Injury Claims - by Industry Sector (2008-14)**

Industry Sector	Campaspe	Victoria
A-Agriculture, Forestry and Fishing	8%	2%
B-Mining	0%	0%
C-Manufacturing	30%	19%
D-Electricity, Gas, Water & Waste Svcs	1%	1%
E-Construction	9%	12%
F-Wholesale Trade	2%	7%
G-Retail Trade	4%	5%
H-Accommodation and Food Services	3%	3%
I-Transport, Postal and Warehousing	9%	8%
J-Info. Media & Telecomms	0%	1%
K-Financial and Insurance Services	0%	1%
L-Rental, Hiring and Real Estate Services	0%	1%
M-Prof., Scientific and Technical Services	1%	3%
N-Administrative and Support Services	2%	3%
O-Public Administration and Safety	7%	7%
P-Education and Training	5%	6%
Q-Health Care and Social Assistance	16%	14%
R-Arts and Recreation Services	2%	3%
<b>Total %</b>	<b>%</b>	<b>%</b>
<b>Total No.</b>	<b>1,118</b>	<b>172,303</b>

WorkCover 5 yr of insured claims reported in fin. yrs within LGA by Industry, Affliction and Mechanism, WorkSafe Victoria, April 2014 Data accessed from [www.data.vic.gov.au](http://www.data.vic.gov.au)

### Workplace Deaths

Between 1994 and 2015, there were 12 workplace fatalities that occurred at businesses registered in Campaspe. All deaths were males. Across Victoria, 95% of fatalities that occurred between 1994 and 2015 were males.

Persons aged 45 - 54 years (42%) made up the largest proportion of fatalities and this figure was much higher than the Victoria average for the age group (23%).

Persons aged 25 - 34 years (33%) made up the next largest proportion and this figure was also much higher than the Victoria average for the age group (14%). 58% of fatalities occurred in the agriculture sector.

**Figure 333. Workplace Fatalities by Sex (1994-2015)**

Location	Males		Females		Total
	No.	%	No.	%	No.
Campaspe	12	100%	0	0%	12
<b>Victoria</b>	<b>599</b>	<b>95.4%</b>	<b>29</b>	<b>4.6%</b>	<b>628</b>

WorkCover 5 yr of insured claims reported in fin. yrs within LGA by Industry, Affliction and Mechanism, WorkSafe Victoria, April 2014 Data accessed from [www.data.vic.gov.au](http://www.data.vic.gov.au)

**Figure 334. Workplace Fatalities by Age Group (1994-2015)**

Age Group	Campaspe		Victoria
	No.	%	%
Less than 15 years	1	8%	3%
15 - 24 years			9%
25-34 years	4	33%	14%
35-44 years			17%
45-54 years	5	42%	23%
55 - 64 years	1	8%	17%
65 years and over	1	8%	14%
Unknown			2%
<b>Total</b>	12	100%	100%

WorkCover 5 yr of insured claims reported in fin. yrs within LGA by Industry, Affliction and Mechanism, WorkSafe Victoria, April 2014 Data accessed from [www.data.vic.gov.au](http://www.data.vic.gov.au)

**Figure 335. Workplace Fatalities by Industry (1994-2015)**

Industry	Campaspe	
	Total	%
Agriculture	7	58%
Manufacturing	2	17%
Trade	1	8%
n/a	1	8%
Recreation, Personal & Other Services	1	8%

WorkCover 5 yr of insured claims reported in fin. yrs within LGA by Industry, Affliction and Mechanism, WorkSafe Victoria, April 2014 Data accessed from [www.data.vic.gov.au](http://www.data.vic.gov.au)

## Other Crime

### Property and Deception Offences

In September 2016, compared to Victoria (5,477), Campaspe had a lower total rate (4,812) of property and deception offences. However, compared to Victoria (75 and 740 respectively), Campaspe had notably higher rates of arson (104) and property damage (938).

Between September 2015 and 2016, the rate of property and deception offences increased by 3.9% and this increase was much lower the Victorian increase (12.8%); while rates of arson and property damage increased by a notably greater proportion than state averages.

*Note that location descriptions are for where the crime took place and not the place of residence of the victim or offender.*

**Figure 336. Property and Deception Offences (2015-16\*)**

Offence	Campaspe		Victoria	% Change 2015 - 2016	
	No.	Rate#	Rate#	Campaspe	Victoria
Arson	38	104 ●	75	52.0% ●	32.0%
Property damage	341	938 ●	740	29.2% ●	3.5%
Burglary/break & enter	336	924 ●	913	-22.4%	13.7%
Theft	936	2,574	3,136	8.0%	17.4%
Deception	99	272	612	4.2% ●	0.8%
Bribery	0	0	0.4	na	-52.2%
<b>Total</b>	1,750	4,812	5,477	3.9%	12.8%

Crime Statistics Agency, Victoria, 2016 #Rate per 100,000 ERP based on Victoria in Future 2015 figures. Note that CSA figures are subject to change over time. \*From September 2015 to September 2016

## Drug Offences

In September 2016, compared to Victoria (498), Campaspe had a lower total rate (448) of drug offences. However, compared to Victoria (28), Campaspe had a slightly higher rate of cultivate or manufacture drug offences (36).

Between September 2015 and 2016, the rate of drug offences increased by 13.2% and this increase was almost eight times the Victorian increase (1.7%).

*Note that location descriptions are for where the crime took place and not the place of residence of the victim or offender.*

**Figure 337. Drug Offences (2015-16\*)**

Offence	Campaspe		Victoria Rate	% Change 2015 - 2016	
	No.	Rate		Campaspe	Victoria
Drug dealing & trafficking	25	69	83	-10.7%	<b>-6.1%</b>
Cultivate or manufacture drugs	13	36 ●	28	18.2% ●	<b>-7.9%</b>
Drug use & possession	125	344	400	19.0% ●	<b>5.4%</b>
Other drug offences	0	0	0	na	<b>-92.0%</b>
<b>Total</b>	163	448	498	13.2% ●	<b>1.7%</b>
2015 ERP	36,365		5,937,481		

Crime Statistics Agency, Victoria, 2016 #Rate per 100,000 ERP based on Victoria in Future 2015 figures. Note that CSA figures are subject to change over time. \*From September 2015 to September 2016

## Public Order and Security Offences

In September 2016, compared to Victoria (602), Campaspe had a higher total rate (874) of public order and security offences. The rate of weapons and explosive offences (429) was notably higher than the Victoria average (264).

Between September 2015 and 2016, the rate of public order and security offences increased by 22.8% and this increase was more than twenty times the Victorian figure (a 4.1% decrease).

*Note that location descriptions are for where the crime took place and not the place of residence of the victim or offender.*

**Figure 338. Public Order and Security Offences (2015-16\*)**

Offence	Campaspe		Victoria Rate	% Change 2015 - 2016	
	No.	Rate		Campaspe	Victoria
Weapons & explosives offences	156	429 ●	264	88.0% ●	1.7%
Disorderly & offensive conduct	139	382 ●	279	-13.1%	-12.3%
Public nuisance offences	23	63 ●	58	43.8% ●	21.8%
Public security offences	0	0	2	na	-49.2%
<b>Total</b>	318	874 ●	<b>602</b>	<b>22.8%</b>	<b>-4.1%</b>
2015 ERP	36,365		5,937,481		

Crime Statistics Agency, Victoria, 2016 #Rate per 100,000 ERP based on Victoria in Future 2015 figures. Note that CSA figures are subject to change over time. \*From September 2015 to September 2016

## Perception of Safety

In 2015, compared to Victoria (89.5%), a higher proportion of Campaspe residents (94.2%) reported they feel safe walking alone during the day. However, compared to Victoria (55.1%) and regional Victoria (58.2%), a lower proportion of Campaspe residents (54.7%) reported they feel safe walking alone during at night. Campaspe females were significantly less likely than males to report they feel safe walking alone at night.

**Figure 339. Feel Safe (%) Walking Alone (2015)**

Location	During day	At night
Campaspe	94.2	54.7 ●
Regional Victoria	94.2	58.2
<b>Victoria</b>	<b>89.5</b>	<b>55.1</b>

*VicHealth Indicators Survey 2015 Selected findings; Victorian Health Promotion Foundation, 2016*

**Figure 340. Feel Safe (%) Walking Alone - by Sex (2015)**

Location	During day		At night	
	M	F	M	F
Campaspe	97.6	90.8	72.4 ●	37.3 ●
<b>Victoria</b>	<b>95.4</b>	<b>89.7</b>	<b>74.5</b>	<b>37.8</b>

*VicHealth Indicators Survey 2015 Selected findings; Victorian Health Promotion Foundation, 2016*

## Community Facilities and Attitudes

In 2011-12, compared to Victoria, a greater proportion of Campaspe residents reported that: their local community support groups were good or very good, they were able to access community resources, and that they were prepared to intervene in a situation of domestic violence.

However, a lower proportion than the state average reported that: they supported the smoking ban in outside dining areas, that their neighbourhood was a pleasant place, or that they believe multiculturalism makes life in their area better.

**Figure 341. Community Facilities and Attitudes (2011-12)**

Indicator	Campaspe	Regional Victoria	Victoria
Rates local community support groups good or very good	72.3	66.8	<b>61.2</b>
Rates neighborhood as a pleasant environment	78.9 ●	82.9	<b>80.5</b>
Able to access community resources	86.0	88.1	<b>84.9</b>
Prepared to intervene in a situation of domestic violence	94.5	-	<b>92.9</b>
Persons (%) who support smoking ban in outside dining areas	66.7 ●	-	<b>69.8</b>
Agree that multiculturalism makes life in their area better	32.7 ●	414.6	<b>50.9</b>

*Department of Health and Human Services 2014, Victorian Population Health Survey 2011-12 Survey findings, State Government of Victoria. #Age standardised to 2011 Victorian population. and VicHealth Indicators Survey 2011, VicHealth 2012 \*age-standardised rate per 100 persons*

# Transport

## People who Live Near Public Transport

In 2015, compared to the Victoria average (73.9%), a substantially lower proportion of Campaspe residents (23.2%) lived near public transport (within 400 metres of a bus/tram stop and/or within 800 metres of a train station).

**Figure 342. Proportion of Population that Lives Near Public Transport\* (2013 and 2015)**

Location	2013	2015
Campaspe	23.1% ●	23.2% ●
Regional Victoria	44.3%	na
<b>Victoria</b>	<b>74.2%</b>	<b>73.9%</b>

2013 and 2015 LGA Profiles Data, Department of Health & Human Services Victoria, December 2014 and November 2016 \* The percentage of the population that lives within 400 metres of a bus and/or tram stop and/or within 800 metres of a train station.

## Transport Limitations

The VicHealth Indicators Survey 2011 results indicate that Campaspe (30.4%) had a higher proportion of residents who stated they had experienced transport limitations in the last 12 months compared to regional Victoria (25.0%) and Victoria (23.7%)

**Figure 343. Experienced Transport Limitations in Last 12 Months (2011)**

Campaspe	Regional Victoria	Victoria
30.4 ●	25.0	<b>23.7</b>

Community Indicators Victoria 2011 Note that this data was provided free of charge.

## Commuting

The table below indicates that, compared to regional Victoria, Campaspe Shire workers were:

- Less likely to drive their car or be a car passenger to get to their place of work
- Less likely to travel by bus or train to get to their place of work
- More likely to walk or cycle as their only means of travelling to their place of work
- More likely drive a truck to get to their place of work
- More likely to travel by motorbike or scooter to their place of work, and
- More likely to work from home.

**Figure 344. Selected Journey to Work Details (2011)**

Location	Bus	Train	Walked only	Bicycle	Car - driver	Car - passenger	Truck	Motorbike / Scooter	Worked from home	Total* Number
Campaspe No.	49	20	863	186	10,057	802	193	132	1,335	15,940
Campaspe %	0.3%	0.1%	5.4%	1.2%	63.1%	5.0%	1.2%	0.8%	8.4%	100%
Regional Victoria %	0.7%	1.3%	4.5%	0.9%	64.9%	5.5%	1.0%	0.5%	6.3%	100%
<b>Victoria %</b>	<b>2.0%</b>	<b>7.9%</b>	<b>3.3%</b>	<b>1.2%</b>	<b>62.5%</b>	<b>4.9%</b>	<b>0.8%</b>	<b>0.4%</b>	<b>4.3%</b>	<b>100%</b>

2011 Census of Population and Housing, Basic Community Profiles, ABS 2012 \* Employed persons 15yrs and over who went to work on the day of the census

In 2011, 78% of Campaspe working residents worked within Campaspe Shire, while a further 7.7% worked in Greater Shepparton and 1.6% worked in Greater Bendigo.

**Figure 345. Where Campaspe Residents Work# (2011)**

Most Common LGAs	No.	% of all workers
Campaspe (S)	11,241	78.0
Greater Shepparton (C)	1,110	7.7
Greater Bendigo (C)	232	1.6
Gannawarra (S)	91	0.6
Moirā (S)	39	0.3
Melbourne (C)	35	0.2
Loddon (S)	22	0.2

2011 Census of Population and Housing, Basic Community Profiles, ABS 2012 #excludes undefined and other

**Figure 346. Characteristics of Workers who Live and Work in Campaspe (2011)**

Sex and Age	No.	%
Male	5,649	50.4
Female	5,566	49.6
0-9 years	0	0.0
10-19 years	778	6.9
20-29 years	1,539	13.7
30-39 years	1,929	17.2
40-49 years	2,791	24.9
50-59 years	2,734	24.4
60-69 years	1,199	10.7
70-79 years	206	1.8
80-89 years	39	0.3
90-99 years	0	0.0
100 years and over	0	0.0
Total	11,215	100.0

2011 Census of Population and Housing, Basic Community Profiles, ABS 2012

### Cars Per Household

In 2011, compared to the Victorian average, Campaspe Shire had a lower proportion of dwellings with no motor vehicles or one motor vehicle and a higher proportion of dwellings that had two or more motor vehicles, compared to the Victorian average.

**Figure 347. Vehicles per Dwelling (2006 and 2011)**

No. of vehicles	Campaspe				Victoria	
	2006		2011		2006	2011
	No.	%	No.	%	%	%
None	880	7%	845	6%	<b>9%</b>	8%
1 motor vehicle	4,230	31%	4,386	32%	<b>34%</b>	35%
2 motor vehicles	5,238	39%	5,190	38%	<b>37%</b>	37%
3 motor vehicles	1,728	13%	1,879	14%	<b>11%</b>	11%
4 or more motor vehicles	869	7%	997	7%	<b>5%</b>	6%
Not specified	525	4%	500	4%	<b>4%</b>	3%
Total	13470	100%	<b>13,797</b>	100%	<b>100%</b>	100%

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS



# Housing

## Household Sizes

In 2011, Campaspe had a larger average household size (the average number of people living in a dwelling) than the regional Victoria average and the same average household size as the Victorian average. Between 2006 and 2011, the Campaspe average household size increased, compared to a decrease in the regional Victoria average.

**Figure 348. Average Household Size (2006 and 2011)**

Location	2006	2011
Campaspe	2.5	2.6
Regional Victoria	2.5	2.4
Victoria	2.6	<b>2.6</b>

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS

In 2011, all towns of the Campaspe PCP region, except Torrumberry, had a smaller average household size compared to the Victorian average (2.6). Rushworth and Stanhope (both 2.1) had the equal smallest average household size, while Torrumberry had the largest (2.7).

**Figure 349. Average Household Size (2006 and 2011)**

Location	Size		Location	Size	
	2006	2011		2006	2011
Rushworth	2.2	<b>2.1</b>	Toolleen	2.4	<b>2.2</b>
Gunbower	2.2	<b>2.2</b>	Colbinabbin*	2.4	<b>2.5</b>
Kyabram	2.3	<b>2.3</b>	Tongala	2.5	<b>2.4</b>
Stanhope	2.3	<b>2.1</b>	Torrumberry*	2.6	2.7
Rochester	2.4	<b>2.3</b>	Girgarre*	2.6	<b>2.5</b>
Echuca	2.4	<b>2.4</b>	Corop*	2.6	<b>2.5</b>
Lockington	2.4	<b>2.3</b>			

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS 2012 \*Data for these locations is based on a State Suburb boundary (ABS) and this takes in a wide region around the town. Many State Suburb boundaries have changed considerably between 2006 and 2011. Therefore comparisons between 2006 and 2011 figures should be made with caution.

## Property Values

In 2011, compared to the regional Victoria median, Campaspe Shire and its key towns all had a lower median house price. Within Campaspe, Echuca had the highest median house price and Rushworth had the lowest. Note that median figures were only available for the larger towns in the LGA. Between 2006 and 2011, median house prices declined in Echuca and Tongala and increased by a small amount in Kyabram and Rochester. The median house price in Rushworth, increased by a large proportion but these figures are based on preliminary sale figures for 2011 and may not be reliable. Across Campaspe, the median house price only increased by 2.3% between 2006 and 2011 and this increase was significantly less than the regional Victoria average.

**Figure 350. Median House Prices by Town (2006 to 2011)**

Location	2006	2007	2008	2009	2010	2011*	2006 – 11 % change
Echuca	253,000	260,000	260,000	260,000	262,000	251,500	-0.6%
Kyabram	194,000	195,000	210,000	195,000	207,500	195,000	0.5%
Rochester	180,000	180,000	184,000	181,000	155,000	190,000	5.6%
Rushworth	141,500	152,000	151,500	155,000	145,500	187,000	32.2%
Tongala	153,000	174,000	181,000	157,000	157,000	125,000	-18.3%
Campaspe	215,000	212,500	220,000	213,500	220,000	220,000	2.3%
Reg. Victoria	<b>222,000</b>	<b>230,493</b>	<b>235,000</b>	<b>243,000</b>	<b>270,000</b>	<b>275,000</b>	<b>23.9%</b>

A Guide to Property Values - Department of Sustainability and Environment- 2011 # preliminary figures based on small number of sales

## Social Housing

In 2011, compared to regional Victoria (17%) and Victoria (12%), Campaspe had a higher proportion (20%) of rented dwellings that were owned by state government housing authorities or housing co-operatives, community or church groups and this figure decreased between 2006 and 2011.

**Figure 351. Number of Private Dwellings Being Rented by Landlord Type (2006 and 2011)**

		State Government housing authority	Housing co-op, cmnty or church group	Total	% of all renting households
Campaspe	2006	621	76	698	22%
	2011	582	93	675	20%
Regional Victoria	2006	18,487	2747	21,234	19%
	2011	17,980	3,144	21,124	17%
<b>Victoria</b>	<b>2006</b>	<b>54,522</b>	<b>7467</b>	<b>61,989</b>	<b>14%</b>
	<b>2011</b>	<b>54,766</b>	<b>8,835</b>	<b>63,601</b>	<b>12%</b>

2006 and 2011 Census of Population and Housing, Basic Community Profiles, ABS

## Rent Assistance Payment

Rent Assistance is a payment that helps people pay their rent. It can provide extra assistance for people who have a low income and who rent accommodation, generally in the private rental market. In June 2014, compared to regional Victoria (18.7%), there was a lower proportion of Campaspe households (17.2%) in dwellings that received Rent Assistance, while there was a slightly higher proportion than the state average.

**Figure 352. Households Receiving Rent Assistance (June 2014)**

Location	Households in dwellings receiving rent assistance	% households in total dwellings receiving rent assis
Campaspe	2,374	17.2% ●
Regional Victoria	96,368	18.7%
<b>Victoria</b>	<b>319,262</b>	<b>16.4%</b>

Social Health Atlas of Australia, Victorian Local Government Areas, May 2016 release, PHIDU 2016

## Median Rent

In the December 2011 quarter, compared to the regional Victoria and Victoria average, Campaspe had a lower median rent for one or two bedroom flats as well as for two or three bedroom houses. Within the Loddon Mallee region, Campaspe median rents were typically less than Greater Bendigo, Macedon Ranges, Mildura and Mount Alexander and were generally higher than Buloke, Gannawarra and Loddon.

**Figure 353. Median rents for Loddon Mallee LGAs (December 2011)**

Location	1 bedroom flat	2 bedroom flat	2 bedroom house	3 bedroom house
Buloke	\$100	-	\$140	\$175
Campaspe	\$123	\$180	\$183	\$230
Central Goldfields	\$123	\$185	\$200	\$215
Gannawarra	\$140	\$148	\$150	\$165
Greater Bendigo	\$155	\$230	\$248	\$280
Loddon	\$95	-	\$158	\$175
Macedon Ranges	\$200	\$250	\$270	\$328
Mildura RC	\$139	\$180	\$200	\$240
Mount Alexander	-	\$250	\$280	\$275
Swan Hill RC	\$125	\$205	\$165	\$230
Regional Victoria	\$150	\$210	\$220	\$270
<b>Victoria</b>	<b>\$290</b>	<b>\$330</b>	<b>\$300</b>	<b>\$320</b>

Office of Housing Rental Report December 2011

## Affordable Lettings

In September 2016, 61% of new lettings in Campaspe were classified as affordable, compared to 60% in regional Victoria and 18% in Victoria. The proportion of lettings classified as affordable has decreased notably compared to the September 2011 figure (77%).

The smallest proportion of affordable lettings was seen for four or more bedroom dwellings (48%), followed by two bedroom dwellings (60%). Compared to regional Victoria (64%), Campaspe had a notably smaller proportion (48%) of four or more bedroom lettings that were classified as affordable.

**Figure 354. Affordable Lettings\* (September 2011 and 2016)**

Location	Year	Total	
		No.	%
Campaspe	2011	186	77%
	2016	120	61%
Regional Victoria	2011	5,581	57%
	2016	6,513	60%
Victoria	2011	9,145	21%
	2016	9,891	18%

*The Rental Report September 2016, Department of Human Services, Victoria* \*Affordable new lettings based on Residential Tenancies Bond Authority data. The affordability benchmark used is that no more than 30 per cent of gross income is spent on rent.

**Figure 355. Affordable Lettings\* by Number of Bedrooms (September 2011 and 2016)**

Location	Year	1 Bedroom		2 Bedrooms		3 Bedrooms		4+ Bedrooms	
		No.	%	No.	%	No.	%	No.	%
Campaspe	2011	5	50%	53	66%	101	84%	27	87%
	2016	6	67%	40	60%	64	65%	10	48%
Regional Victoria	2011	222	35.5%	1,398	50%	3,139	62%	822	62%
	2016	143	24%	1,635	54%	3,594	65%	1,141	64%
Victoria	2011	249	4.0%	1,667	12%	4,989	28%	2,240	40%
	2016	170	2%	1,930	10%	5,173	26%	2,618	37%

*The Rental Report September 2016, Department of Human Services, Victoria* \*Affordable new lettings based on Residential Tenancies Bond Authority data. The affordability benchmark used is that no more than 30 per cent of gross income is spent on rent.

## Mortgage Stress

In 2011, compared to regional Victoria and Victoria, all Campaspe PCP region SLAs had a higher proportion of households experiencing mortgage stress. Within the region, Campaspe - Rochester SLA, followed by Campaspe - Kyabram SLA, had the highest proportion of households with mortgage stress. Between 2006 and 2011, the proportion of households with mortgage stress increased in all Campaspe PCP region SLAs.

**Figure 356. Low Income Households With Mortgage Stress\* (2006 and 2011)**

SLA	Households with mortgage stress*		% of all mortgaged private dwelling with mortgage stress*	
	2006	2011	2006	2011
Campaspe - Echuca	124	178	8.4	11.7
Campaspe - Kyabram	161	196	10.8	12.4
Campaspe -	114	133	11.2	13.5
Campaspe - South	53	54	11.5	11.9
Regional Victoria	15,925	20,727	9.5	11.4
<b>Victoria</b>	<b>58,238</b>	<b>80,053</b>	<b>9.2</b>	<b>11.4</b>

Public Health Information Development Unit – 2011 and 2013 \* Calculated using unpublished ABS data from 2006 and 2011, based on households in bottom 40% of income distribution (with less than 80% of median income) that are spending more than 30% of income on mortgage repayments.

## Rental Stress

In 2011, compared to regional Victoria and Victoria, Campaspe - Echuca SLA had a higher proportion of households experiencing rental stress. Within the region, Campaspe - Echuca SLA, followed by Campaspe - Kyabram SLA, had the highest proportion of households with rental stress. Between 2006 and 2011, the proportion of Campaspe households with rental stress decreased in Campaspe - Echuca SLA and Campaspe - Kyabram SLA; while it increased in Campaspe - Rochester SLA and Campaspe - South SLA.

**Figure 357. Low Income Households With Rental Stress\* (2006 and 2011)**

SLA	Households with rental stress*		% of all rented private dwelling with rental stress*	
	2006	2011	2006	2011
Campaspe - Echuca	449	437	30.6	27.0
Campaspe - Kyabram	267	267	27.2	24.8
Campaspe -	89	89	16.8	17.7
Campaspe - South	45	53	19.4	23.7
Regional Victoria	31,151	35,507	26.8	26.8
<b>Victoria</b>	<b>109,633</b>	<b>132,124</b>	<b>24.5</b>	<b>25.1</b>

Public Health Information Development Unit – 2011 and 2013 \* Calculated using unpublished ABS data from 2006 and 2011, based on households in bottom 40% of income distribution (with less than 80% of median income) that are spending more than 30% of income on rent.

## Homelessness

In 2011, there were an estimated 47 homeless persons living in Campaspe SA3 region and a further 51 who were living in other crowded dwellings and 39 who were marginally housed in caravan parks. Compared to the regional Victoria average, Campaspe had a slightly higher rate per 10,000 of persons who were staying temporarily with other households (6.8 vs 6.6); living in other crowded dwellings (13.8 vs 12.6); or who were marginally housed in caravan parks (10.6 vs 10.1).

At the SA2 level, Echuca (32) had the greatest number of persons estimated to be homeless.

**Figure 358. Estimated Homelessness (2011)**

Homelessness group:	Campaspe SA3		Regional Victoria	
	No.	Rate*	No.	Rate*
Persons in improvised dwellings, tents or sleeping out	0	0.0	401	2.8
Persons in supported accomm. for homeless	16	4.3	1,848	13.0
Persons staying temporarily with other households	25	6.8 ●	938	6.6
Persons staying in boarding houses	np	np	220	1.5
Persons in other temporary lodging	0	0.0	7	0.0
Persons living in 'severely' crowded dwellings	np	np	213	1.5
<b>All homeless persons</b>	<b>47</b>	<b>12.7</b>	<b>4,835</b>	<b>33.9</b>
Persons living in other crowded dwellings	51	13.8 ●	1,802	12.6
Persons in other improvised dwellings	np	np	427	3.0
Persons marginally housed in caravan parks	39	10.6 ●	1,437	10.1
2011 Estimated Resident Population (ERP)	36,915		1,426,851	

Census of Population and Housing: 'Estimating homelessness', 2011. ABS December 2013 \*Rate per 10,000 persons based on the 2011 ERP for the SA3 as at March 2016

**Figure 359. Estimated Homeless Persons by SA2 (2011)**

SA2	No
Echuca	32
Kyabram	4
Lockington - Gunbower	0
Rochester	7
Rushworth	7

Census of Population and Housing: Estimating homelessness, 2011. ABS December 2013

## Transitional Housing Clients

The Loddon Mallee Client Referral System (LOMA CRS) was used by regional housing and support agencies to find transitional housing vacancies, make on-line applications and to register a detailed demand for transitional housing even when there was no vacancy. It has recently been replaced by the Victorian Resource Register. The tables below set out the final year of data collated by the LOMA CRS.

*Note: Totals in the following tables do not completely reflect the number of people actually needing transitional housing. Workers do not always register demand as they are aware that there are no vacancies in their areas. In addition not all agencies submit data consistently.*

### Vacant Transitional Housing Versus Demand

Between July 2009 and June 2010, Campaspe had a total of five vacant transitional housing properties and none of these were one or four bedroom properties. However, Campaspe had a total of 76 households seeking transitional properties, with the highest demand for one bedroom properties.

**Figure 360. Vacant Transitional Housing Properties (July 2009 to June 2010)**

Property Location	1 bedroom	2 bedroom	3 bedroom	4 bedroom	Total
Echuca		3	2		5
Total Loddon Mallee	2	18	21		43

*The Housing Crunch Vol 9, 2010 Loddon Mallee Accommodation Network*

**Figure 361. Size of Housing Required (July 2009 to June 2010)**

	1 bedroom	2 bedroom	3 bedroom	4 bedroom	Total
Campaspe	28	21	24	3	76
Total Loddon Mallee	249	177	137	21	584

*The Housing Crunch Vol 9, 2010 Loddon Mallee Accommodation Network*

### Demand by Gender

Between July 2009 and June 2010, there was a total of 76 people seeking transitional housing in Campaspe Shire and 69% of these were females. This was a slightly higher proportion than the Loddon Mallee region average.

**Figure 362. Demand for Transitional Housing by Gender (July 2009 to June 2010)**

	Female	Male	% Female
Campaspe	53	23	69%
Loddon Mallee Region	399	185	68%

*The Housing Crunch Vol 9, 2010 Loddon Mallee Accommodation Network*

### ***Demand by Age***

Between July 2009 and June 2010, the 25 – 34 years age group made up the greatest proportion of people seeing transitional housing. The 15 – 24 years age group had the second highest proportion.

**Figure 363. Demand for Transitional Housing by Age (July 2009 to June 2010)**

Location	15-24		25-34		35-44		45-54		55-64		Total
	No.	%	No.	%	No.	%	No.	%	No.	%	
Campaspe	17	22.4%	34	44.7%	12	15.8%	11	14.5%	2	2.6%	76
Loddon Mallee Region	216	37.0%	167	28.6%	123	21.1%	58	9.9%	20	3.4%	584

*The Housing Crunch Vol 9, 2010 Loddon Mallee Accommodation Network*

### ***Other Population Characteristics***

Across the Loddon Mallee region, of the 584 people requiring transitional housing, for which a target group was recorded:

- 25% were experiencing or escaping domestic violence;
- 22% were youth, and of these 55% were young women who were pregnant or parenting at least one child; and
- 9% were Indigenous.

Note that these figures represent the primary category listed only.

*The Housing Crunch Vol 9, 2010 Loddon Mallee Accommodation Network*

# Appendices

Appendix 1. Data Sources

Appendix 2. Maps



## Appendix 1. Data Sources

Data item	When to update	Source
Ambulatory Care Sensitive Conditions (ACSC)	Annual	<a href="http://www.dhs.vic.gov.au">www.dhs.vic.gov.au</a>
Avoidable mortality	2 - 3 Years	<a href="http://phidu.torrens.edu.au/">http://phidu.torrens.edu.au/</a>
Premature mortality	2 - 3 Years	<a href="http://phidu.torrens.edu.au/">http://phidu.torrens.edu.au/</a>
Benefit recipients	Annual – as requested	<a href="http://www.centrelink.gov.au">www.centrelink.gov.au</a>
Breasts cancer screening	Annual - data must be ordered, or When the next VPHS with LGA breakdown is completed – check each 2 years	<a href="http://www.breastscreen.org.au">www.breastscreen.org.au</a> <a href="http://www.health.vic.gov.au">www.health.vic.gov.au</a>
Cancers – new cases and deaths	Annual (commissioned)	<a href="http://www.cancervic.org.au">www.cancervic.org.au</a>
Cervical cancer screening	Annual	<a href="http://www.vccr.org">www.vccr.org</a>
Child injury data	As required (commissioned and fee applies)	<a href="http://www.monash.edu.au/muarc/">www.monash.edu.au/muarc/</a>
Chronic disease risk factors	From the Australian Health Survey data - check annually but only updated every 2 - 3 years  From the VPHS - updated every 2 - 3 years	<a href="http://phidu.torrens.edu.au/">http://phidu.torrens.edu.au/</a>  <a href="https://www2.health.vic.gov.au/">https://www2.health.vic.gov.au/</a>
Community Strength Indicators	VPHS and VicHealth indicators Survey every 3 years	<a href="https://www2.health.vic.gov.au/">https://www2.health.vic.gov.au/</a> <a href="https://www.vichealth.vic.gov.au/">https://www.vichealth.vic.gov.au/</a>
Crime rates	Annual Detailed data was commissioned (age and sex breakdown)	<a href="https://www.crimestatistics.vic.gov.au/">https://www.crimestatistics.vic.gov.au/</a>
Family Incidents	Annual Detailed data was commissioned (age and sex breakdown)	<a href="https://www.crimestatistics.vic.gov.au/">https://www.crimestatistics.vic.gov.au/</a>
Demographic characteristics	every 4 years preliminary results for 2016 due mid 2017	<a href="http://www.abs.gov.au">www.abs.gov.au</a>
Farm injury/accident data	As required - fee applies	<a href="http://www.monash.edu.au/muarc/">www.monash.edu.au/muarc/</a>
Food Security	VPHS - every 3 years	<a href="https://www2.health.vic.gov.au/">https://www2.health.vic.gov.au/</a>
Gambling expenditure	Annual	<a href="http://www.vcgr.vic.gov.au">www.vcgr.vic.gov.au</a>
GP availability	Annual - every 2 years	<a href="https://www2.health.vic.gov.au/">https://www2.health.vic.gov.au/</a>
GP Services	Annual - every 2 years	<a href="https://www2.health.vic.gov.au/">https://www2.health.vic.gov.au/</a>
Health screening and checks (various)	VPHS - every 3 years	<a href="http://www.health.vic.gov.au">www.health.vic.gov.au</a>
Hospital admissions	As required – data was commissioned (can take 6 or months to be provided by DHHS)	<a href="https://www2.health.vic.gov.au/">https://www2.health.vic.gov.au/</a>
Housing stress (mortgage & rental)	every 4 years (based on census data usually)	<a href="http://phidu.torrens.edu.au/">http://phidu.torrens.edu.au/</a>

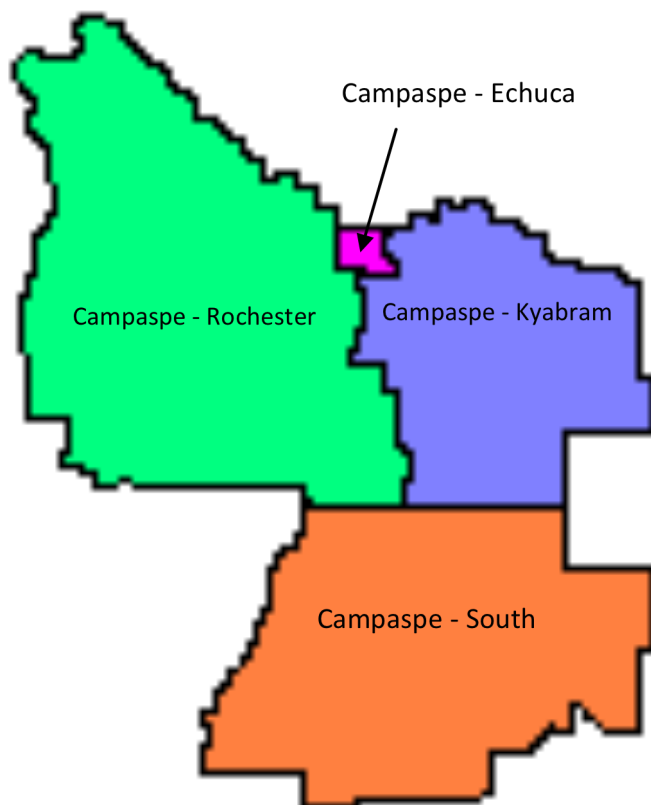
Immunisation figures	Annually	<a href="http://phidu.torrens.edu.au/">http://phidu.torrens.edu.au/</a> or <a href="http://www.education.vic.gov.au">www.education.vic.gov.au</a>
Infectious diseases	Info is updated fortnightly	<a href="https://www2.health.vic.gov.au/">https://www2.health.vic.gov.au/</a>
Life expectancy at birth		<a href="http://www.health.vic.gov.au/healthstatus/le.htm">www.health.vic.gov.au/healthstatus/le.htm</a>
Maternal & child health centre visits	Annual	<a href="http://www.education.vic.gov.au/ecsmanagement/matchildhealth/annualdata/default.htm">www.education.vic.gov.au/ecsmanagement/matchildhealth/annualdata/default.htm</a>
MBS Items	Annual	<a href="http://www.publichealth.org.au">www.publichealth.org.au</a> or <a href="http://www.medicareaustralia.gov.au/about/stats/index.jsp">www.medicareaustralia.gov.au/about/stats/index.jsp</a>
Medicare consultation statistics	Check annually	<a href="http://www.medicareaustralia.gov.au/about/stats/index.jsp">www.medicareaustralia.gov.au/about/stats/index.jsp</a>
Migrants	Annual	<a href="http://www.immi.gov.au">www.immi.gov.au</a>
Neonatal and low birth weight	Annual - on request from Perinatal Unit at Dept of Health Or VCAMs	<a href="https://www2.health.vic.gov.au/">https://www2.health.vic.gov.au/</a>  <a href="http://www.education.vic.gov.au">www.education.vic.gov.au</a>
Off farm income	Annual - available online	<a href="http://www.abare.gov.au">www.abare.gov.au</a>
PBS items	Annual	<a href="http://www.medicareaustralia.gov.au/about/stats/index.jsp">www.medicareaustralia.gov.au/about/stats/index.jsp</a>
Population forecast	check website for regular updates -	<a href="http://www.planning.vic.gov.au">www.planning.vic.gov.au</a>
Post year 12 destinations	2011	<a href="http://www.education.vic.gov.au">www.education.vic.gov.au</a>
Property values	Annual (fee applies)	<a href="http://www.dse.vic.gov.au">www.dse.vic.gov.au</a>
Public Housing waiting lists	Quarterly	<a href="http://www.dhs.vic.gov.au">www.dhs.vic.gov.au</a>
Rental affordability	Quarterly	<a href="http://www.dhs.vic.gov.au">www.dhs.vic.gov.au</a>
Road accidents	Annual	<a href="http://www.tacsafety.com.au">www.tacsafety.com.au</a>
School absent days	VCAMs	<a href="http://www.education.vic.gov.au">www.education.vic.gov.au</a>
School retention rates	Quarterly	<a href="http://www.education.vic.gov.au">www.education.vic.gov.au</a>
SEIFA	2011	<a href="http://www.abs.gov.au">www.abs.gov.au</a>
Alcohol and Drug related harm	Annual	<a href="http://www.turningpoint.org.au">www.turningpoint.org.au</a>
Teenage births	Annual	<a href="http://www.education.vic.gov.au">www.education.vic.gov.au</a>
Transitional Housing Clients	Annual – data request went direct to Melbourne office of OoH. Otherwise, agencies may assist on individ basis.	na
Unemployment figures	Quarterly	<a href="http://www.employment.gov.au">www.employment.gov.au</a>
Workplace accidents	Annual – data must be requested	<a href="http://www.workcover.vic.gov.au">www.workcover.vic.gov.au</a>

## Appendix 2. Maps

### Statistical Local Areas (SLA)

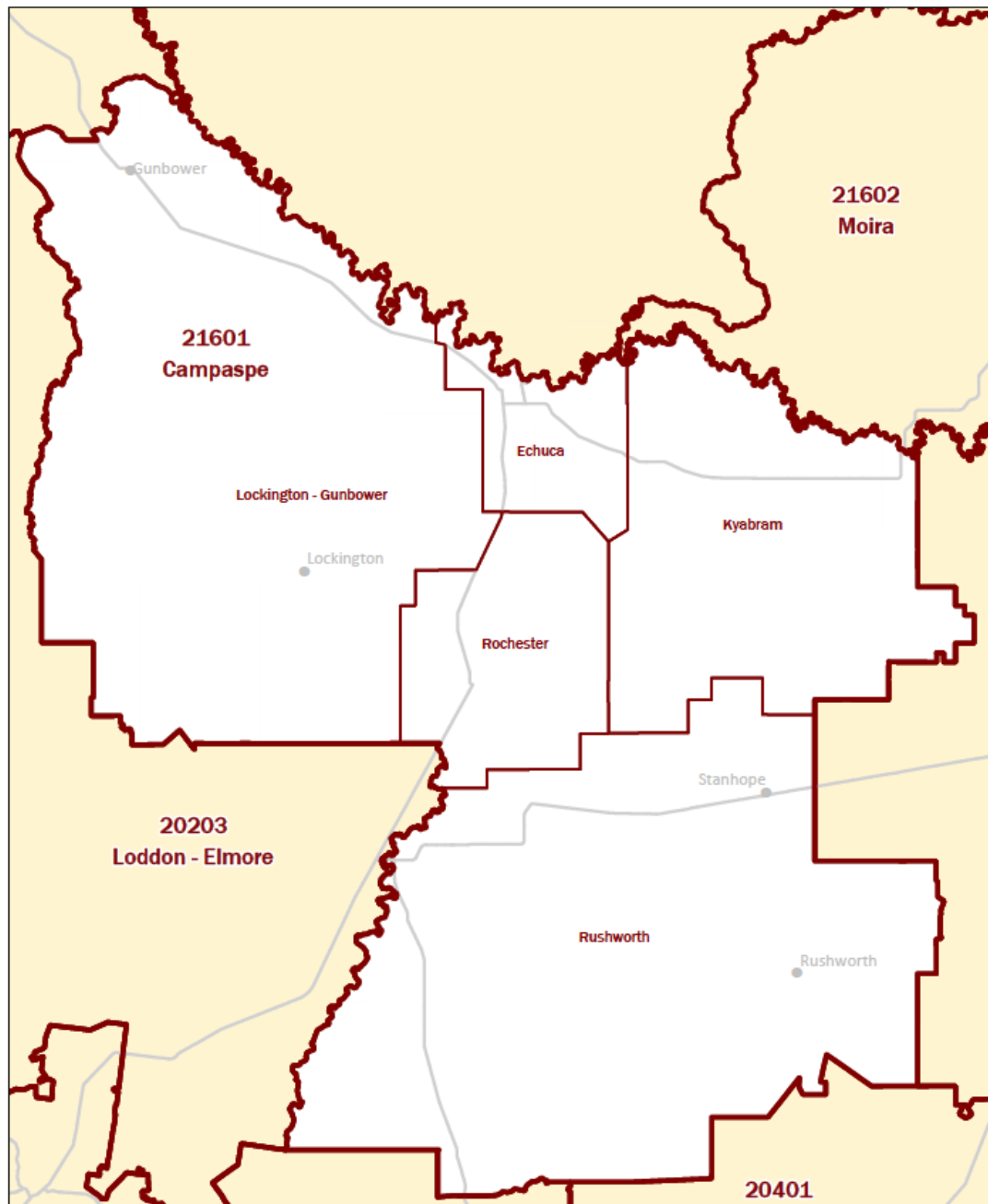
The Australian Bureau of Statistics and some other agencies provide information at the Statistical Local Area level. A Local Government Area (LGA) is typically made up of one or more SLA. The Campaspe PCP region is made up of one Local Government Area: Campaspe Shire and this is made up of four SLAs: Campaspe – Echuca; Campaspe – Rochester; Campaspe – Kyabram and Campaspe – South. Please refer to map below for boundaries.

**Figure 364. Campaspe Shire Statistical Local Areas**



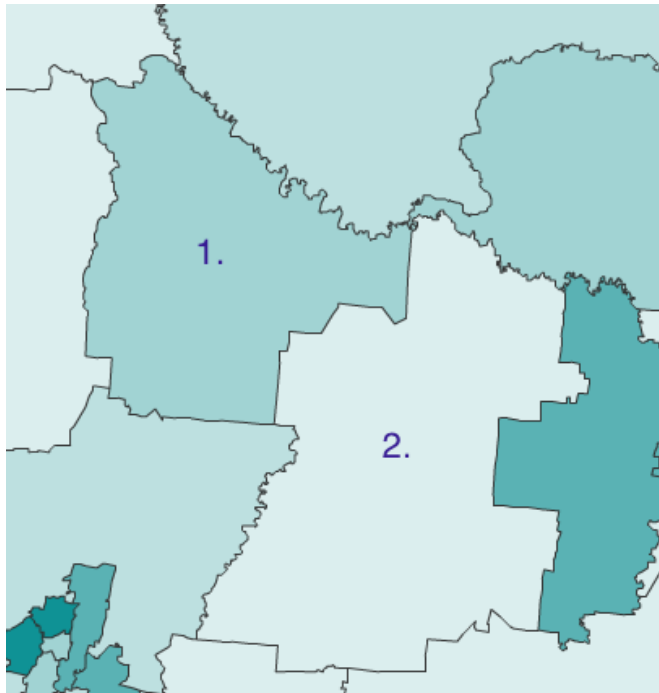
## Statistical Areas Level 3 and 2 (SA3 and SA2)

Showing Campaspe SA3 in total (total white area) and the SA2 regions within it.



## Population Health Area (PHA)

1. Echuca / Lockington - Gunbower
2. Kyabram / Rochester - Rushworth



## Victoria in Future Small Area (VIFSA)

162. Echuca Town
163. Kyabram District
164. Rochester District
165. Rushworth District

