

# **Rural, regional and remote health**

**A study on mortality (2nd edition)**

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# Abbreviations

ABS	Australian Bureau of Statistics
ACT	Australian Capital Territory
AIHW	Australian Institute of Health and Welfare
ARIA	Accessibility/Remoteness Index of Australia
ASGC	Australian Standard Geographical Classification
CHD	coronary heart disease
COPD	chronic obstructive pulmonary disease
GIS	geographic information systems
GISCA	National Key Centre for the Social Applications of GIS
GP	general practitioner
ICD-10	International Classification of Diseases, 10th revision
IHD	ischaemic heart disease
IPV	interpersonal violence
IR	Inner Regional
LTA	land transport accident
MC	Major Cities
MVA	motor vehicle accident
MVTA	motor vehicle traffic accident
NHMRC	National Health and Medical Research Council
NSW	New South Wales
NT	Northern Territory
OR	Outer Regional
Qld	Queensland
R	Remote
RHD	rheumatic heart disease
RRMA	Rural, Remote and Metropolitan Areas (Classification)
SA	South Australia
SEIFA	Socioeconomic Indexes for Areas
SLA	Statistical Local Area
SMR	standardised mortality ratio
Tas	Tasmania
Vic	Victoria
VR	Very Remote

WA	Western Australia
WHO	World Health Organization

## Symbols

–	nil or rounded to zero
..	not applicable
n.a.	not available
n.p.	not published in this report
n.e.c.	not elsewhere classified

# Summary

About 6.5 million people live outside Major Cities – about one-third of the Australian population.

## Key findings

- For the period 2002–04, death rates in regional areas were about 1.1 times higher than those in Major Cities. Death rates in Remote and Very Remote areas were also higher (about 1.2 and 1.7 times) than those in Major Cities.
- In 2002–04, the specific causes of elevated death rates outside Major Cities were coronary heart disease (19% of ‘excess’ deaths), other diseases of the circulatory system (18%), motor vehicle traffic accidents (9%) and chronic obstructive pulmonary disease (9%).
- A major contributor to elevated rates in remote areas is Indigenous Australian mortality, primarily because Indigenous Australians constitute a large proportion of remote area populations, and the death rate for Indigenous Australians generally is over three times higher than for non-Indigenous Australians in Major Cities.
- Death rates for older people, particularly living in remote areas, were generally lower than for their counterparts in Major Cities; this pattern was the opposite of that seen for younger people.
- While all of the causes of death described in this report are noteworthy, two broad causes stand out as being of particular importance: circulatory disease and injury. Circulatory disease is important because of the large number of ‘excess’ deaths involved, while injury is important because of the large number of ‘excess’ deaths and the young age of many of the people affected.

## Other findings

- When all causes of death are considered, the relative difference in mortality rates between Major Cities and regional and remote areas remained unchanged between the periods 1997–99 and 2002–04. With the exception of injury, this pattern was generally consistent across the broad categories of cause of death.
- Between 1992 and 2003, death rates tended to decline in all areas, typically with faster declines in the remote areas where rates tend to be higher.
- As would be expected, death rates within Remoteness Areas are not uniform. New work described in this report shows differences in the death rates of people living in coastal and inland parts of some of the Remoteness Areas outside Major Cities. For example, death rates of people in inland Inner Regional areas were 1.1 times rates for people in Major Cities, while death rates of people in coastal Inner Regional areas were similar to rates for people in Major Cities. Larger differences existed for the smaller populations in the inland and coastal parts of Remote areas.