

## Fact sheet number 12: Australia

Social Health Atlas series

PHIDU

### Hospital admissions

#### Hospital admissions

*Volume 1: Australia, page 198-201*

- The average Standardised Admission Ratio (SAR) for both public acute and private hospitals for residents of the capital cities was 97. Hobart (102), Darwin (101) and Adelaide (101) had the highest, but near average, ratios and Canberra had the lowest (70 – 30% fewer admissions than expected from the Australian rates).
- Except for Tasmania, SARs were higher for residents of non-metropolitan areas than the capital cities. The highest ratios were in the non-metropolitan areas of the Northern Territory (123) and South Australia (118) and the lowest were in the non-metropolitan areas of Tasmania (92).
- SARs increase with increasing remoteness.
- SARs increase with decreasing socioeconomic status (*page 363*)

#### Public acute hospital admissions

*Volume 1: Australia, page 202-205*

- The average Standardised Admission Ratio (SAR) for public acute hospitals for residents of the capital cities was 92. Sydney (99) and Adelaide (93) had the highest ratios and Hobart had the lowest (79).
- SARs were higher in non-metropolitan areas than in the capital cities, reflecting the important role of public hospitals outside of the metropolitan areas where there are few private hospitals. The highest ratios were in the non-metropolitan areas of the Northern Territory (159) and South Australia (149) and the lowest were in the non-metropolitan areas of Tasmania (80).
- SARs increase with increasing remoteness.
- SARs increase with decreasing socioeconomic status (*page 363*)
- Areas in cities with high ratios for public acute hospitals were socioeconomically disadvantaged, as measured by the IRSD ( $r=-0.60$ ). They also have a higher proportion of
  - disability support pensioners ( $r=0.57$ )
  - female sole parent pensioners ( $r=0.53$ ) (*page 353-354*)

#### Private hospital admissions

*Volume 1: Australia, page 206-209*

- The average Standardised Admission Ratio (SAR) for private hospitals for residents of the capital cities was 108, reflecting the largely metropolitan location of private hospitals. Hobart (150) and Darwin (133) had the highest ratios and Canberra had the lowest (46).
- SARs were lower in non-metropolitan areas than in the capital cities. The lowest ratios were in the non-metropolitan areas of the Northern Territory (where there were no private hospitals, with an SAR of 39 – 61% fewer admissions than expected from the Australian rates), Western Australia (55) and South Australia (55) and the highest were in the non-metropolitan areas of Tasmania (118) and Queensland (113).
- SARs for private hospital admissions decrease with increasing remoteness.
- SARs for private hospital admissions decrease with decreasing socioeconomic status (*page 363*)
- Areas in cities with high SARs for private hospitals were of high socioeconomic status, as measured by the IRSD ( $r=0.66$ ). They also have a higher proportion of
  - high income families ( $r=0.53$ )
  - professionals ( $r=0.54$ )and fewer
  - female sole parent pensioners ( $r=0.51$ )
  - children in families on income support ( $r=-0.55$ )
  - people who left school aged 15 or less or did not go to school ( $r=-0.57$ ) (*page 353-354*)

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### Same day admissions

*Volume 1: Australia, page 202-205*

- The average Standardised Admission Ratio (SAR) for same day admissions for residents of the capital cities was 106. Melbourne (115), Sydney (09) and Brisbane (108) had the highest admissions ratios and Canberra had the lowest (62).
- SARs were lower in non-metropolitan areas than in the capital cities. The lowest ratios were in the non-metropolitan areas of the Northern Territory (58) and New South Wales (84) and the highest were in the non-metropolitan areas of Queensland (97).
- SARs decrease with increasing remoteness.

### Admissions for infectious and parasitic diseases

*Volume 1: Australia, page 222-225*

- The average Standardised Admission Ratio (SAR) for infectious and parasitic diseases in the capital cities was 92. Sydney (116), Adelaide (108) and Darwin (106) had the highest admissions ratios and Canberra had the lowest (66).
- SARs were higher in non-metropolitan areas than in the capital cities. The highest ratios were in the non-metropolitan areas of the Northern Territory (305), Western Australia (153) and Queensland (126) and the lowest were in the non-metropolitan areas of Tasmania (80).
- SARs increase substantially with increasing remoteness.
- SARs for infectious and parasitic diseases increase with decreasing socioeconomic status (*page 363*)

### Admissions for cancer

*Volume 1: Australia, page 224-227*

- The average Standardised Admission Ratio (SAR) for admissions for cancer for residents of the capital cities was 101. Brisbane (121), Darwin (106) and Adelaide (105) had the highest ratios and Hobart had the lowest (79).
- SARs for cancer have increased (relative to the Australian rates) from 1989 to 1995/96 in Darwin (98-106), Sydney (90-95) and Adelaide (104-105).
- Except in New South Wales and Tasmania, SARs were lower in non-metropolitan areas than in the capital cities. The highest ratios were in the non-metropolitan areas of Queensland (109) and South Australia (104) and the lowest were in the non-metropolitan areas of the Northern Territory (79).
- SARs decrease with increasing remoteness.

### Admissions for lung cancer

*Volume 1: Australia, page 230-233*

- The average Standardised Admission Ratio (SAR) for lung cancer for residents of the capital cities was 98. Brisbane (121), Darwin (121) and Adelaide (100) had the highest ratios and Canberra had the lowest (54).
- SARs were higher in non-metropolitan areas than the capital cities in New South Wales and South Australia. The highest ratios in the non-metropolitan areas were in the South Australia (135), Queensland (117) and the Northern Territory (116) and the lowest was in the non-metropolitan areas of Western Australia (91).
- SARs for lung cancer increase with increasing remoteness.
- SARs for lung cancer increase with decreasing socioeconomic status (*page 363*)

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### Admissions for psychosis

*Volume 1: Australia, page 238-241*

- The average Standardised Admission Ratio (SAR) for public acute hospitals for residents of the capital cities was 110. Brisbane (139) and Adelaide (139) had the highest ratios and Canberra had the lowest (64).
- SARs were lower in non-metropolitan areas than in the capital cities. The lowest ratios in the non-metropolitan areas were in Victoria (70) and the Northern Territory (74) and the highest was in the non-metropolitan areas of South Australia (118).
- SARs were highest in the Very Accessible and Very Remote areas under the Accessibility/Remoteness Index of Australia classification.

### Admissions for neurotic, personality or other mental disorders

*Volume 1: Australia, page 242-245*

- The average Standardised Admission Ratio (SAR) for neurotic, personality or other mental disorders for residents of the capital cities was 103. Sydney (140) and Brisbane (122) had the highest ratios and Canberra had the lowest (44).
- Except in Victoria, South Australia and Western Australia, SARs were lower in non-metropolitan areas than the capital cities. The lowest ratios in the non-metropolitan areas were in the Northern Territory (67) and Victoria (70) and the highest were in the non-metropolitan areas of South Australia (130).
- SARs increase with increasing remoteness.

### Admissions for circulatory system diseases

*Volume 1: Australia, page 246-249*

- The average Standardised Admission Ratio (SAR) for circulatory system diseases for residents of the capital cities was 95. Darwin (104) and Adelaide (102) had the highest ratios and Canberra had the lowest (80).
- Except in Tasmania, ratios were higher in non-metropolitan areas than in the capital cities. The highest ratios in the non-metropolitan areas were in New South Wales (116) and the Northern Territory (108) and the lowest were in the non-metropolitan areas of Tasmania (95).
- SARs for circulatory system diseases increase with increasing remoteness.
- SARs for circulatory system diseases increase with decreasing socioeconomic status. (*page 363*)
- Areas in cities with high SARs for circulatory system diseases were socioeconomically disadvantaged, as measured by the IRSD ( $r=-0.51$ ). They also have a higher proportion of hospital admissions for
  - Ischaemic Heart Disease ( $r=0.58$ )
  - bronchitis, emphysema and asthma ( $r=0.54$ )
  - accidents, poisoning and violence ( $r=0.50$ )
  - hysterectomy ( $r=0.60$ ) (*page 353-354*)
- Non-metropolitan areas also had a higher proportion of hospital admissions for
  - infectious diseases ( $r=0.58$ )
  - neurotic, personality and other mental disorders ( $r=0.55$ )
  - respiratory diseases in 0-4 year olds ( $r=0.56$ )
  - bronchitis, emphysema and asthma ( $r=0.61$ )
  - accidents, poisoning and violence ( $r=0.70$ ) (*pages 355-356*)

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### Admissions for Ischaemic Heart Disease

*Volume 1: Australia, page 248-251*

- The average Standardised Admission Ratio (SAR) for Ischaemic Heart Disease for residents of the capital cities was 96. Hobart (105) and Sydney (103) had the highest admissions ratios and Darwin had the lowest (87).
- Except in Tasmania and the Northern Territory, SARs were higher in non-metropolitan areas than the capital cities. The highest ratios in the non-metropolitan areas were in New South Wales (112) and Victoria (111) and the lowest were in the non-metropolitan areas of the Northern Territory (87).
- SARs for Ischaemic Heart Disease increase with increasing remoteness.
- SARs for Ischaemic Heart Disease increase with decreasing socioeconomic status (*page 363*)

### Admissions for respiratory system disease

*Volume 1: Australia, page 254-257*

- The average Standardised Admission Ratio (SAR) for respiratory system disease for residents of the capital cities was 91. Adelaide (114) and Darwin (102) had the highest ratios and Canberra had the lowest (67).
- SARs were higher in non-metropolitan areas than in the capital cities. The highest ratios in the non-metropolitan areas were in the Northern Territory (180) and South Australia (156) and the lowest was in the non-metropolitan areas of Tasmania (80).
- SARs for respiratory system diseases increase with increasing remoteness.
- SARs for respiratory system diseases increase with decreasing socioeconomic status (*page 363*)
- Areas in cities with high SARs for respiratory system disease also have high rates of hospital admissions for
  - circulatory system diseases ( $r=0.58$ )
  - bronchitis, emphysema and asthma ( $r=0.74$ )
  - accidents, poisoning and violence ( $r=0.60$ )
- Non-metropolitan areas also had a higher proportion of hospital admissions for
  - infectious and parasitic diseases ( $r=0.67$ )
  - neurotic, personality and other mental disorders ( $r=0.64$ )
  - circulatory system diseases ( $r=0.73$ )
  - bronchitis, emphysema and asthma ( $r=0.81$ )
  - accidents, poisoning and violence ( $r=0.74$ )

These areas also had a higher Total Fertility Rate ( $r=0.70$ ) (*pages 355-356*)

### Admissions for bronchitis, emphysema or asthma

*Volume 1: Australia, page 254-257*

- The average Standardised Admission Ratio (SAR) for bronchitis, emphysema or asthma for residents of the capital cities was 91. Adelaide (123) and Brisbane (105) had the highest ratios and Canberra had the lowest (60).
- Except in Tasmania, SARs were higher in non-metropolitan areas than in the capital cities. The highest ratios in the non-metropolitan areas were in South Australia (182) and New South Wales (121) and the lowest were in the non-metropolitan areas of Tasmania (62).
- SARs for bronchitis, emphysema or asthma increase with increasing remoteness.
- SARs for bronchitis, emphysema or asthma increase with decreasing socioeconomic status (*page 364*)
- Non-metropolitan areas with high SARs for bronchitis, emphysema or asthma also have high rates of hospital admissions for
  - infectious and parasitic diseases ( $r=0.61$ )
  - circulatory system diseases ( $r=0.61$ )
  - accidents, poisoning and violence ( $r=0.63$ )

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### Admissions for accidents, poisonings and violence

*Volume 1: Australia, page 254-257*

- The average Standardised Admission Ratio (SAR) for accidents, poisonings and violence for residents of the capital cities was 90. Hobart (112) and Darwin (111) had the highest admissions ratios and Canberra had the lowest (60).
- Except in Tasmania, SARs were higher in non-metropolitan areas than in the capital cities. The highest ratios in the non-metropolitan areas were in the Northern Territory (166), Queensland (147) and Western Australia (146) and the lowest were in the non-metropolitan areas of Tasmania (86).
- SARs for accidents, poisonings and violence increase with increasing remoteness.
- SARs for accidents, poisonings and violence increase with decreasing socioeconomic status (*page 364*)
- Areas in cities with high SARs for accidents, poisonings and violence also had high rates of admissions for
  - circulatory system diseases ( $r=0.50$ )
  - respiratory system diseases ( $r=0.60$ )
- Non- metropolitan areas also had high rates of admissions for
  - infectious and parasitic diseases ( $r=0.61$ )
  - neurotic, personality and other mental disorders ( $r=0.57$ )
  - circulatory system diseases ( $r=0.70$ )
  - respiratory system diseases ( $r=0.74$ )
  - respiratory system diseases in 0-4 year olds ( $r=0.62$ )
  - bronchitis, emphysema or asthma ( $r=0.63$ )

### Admissions for a surgical procedure (inc. same day admissions) *Volume 1: Australia, page 274-281*

- The average Standardised Admission Ratio (SAR) for a surgical procedure for residents of the capital cities was 100. Darwin (108), Hobart (107) and Adelaide (107) had the highest ratios and Canberra had the lowest (70).
- Except in New South Wales and Western Australia, SARs were lower in non-metropolitan areas than the capital cities. The lowest ratios in the non-metropolitan areas were in Tasmania (95) and the Northern Territory (95), and the highest were in the non-metropolitan areas of Victoria (104) and South Australia (104).
- The average SAR for a same day admissions for a surgical procedure for residents of the capital cities was 102. Sydney (104) had the highest ratio and Canberra had the lowest (64).
- SARs were lower in the non-metropolitan areas for same day admissions for a procedures than the capital cities. The lowest ratios in the non-metropolitan areas were in the Northern Territory (95) and the highest were in the non-metropolitan areas of Victoria (105).

### Endoscopies

*Volume 1: Australia, page 306-309*

- The average Standardised Admission Ratio (SAR) for endoscopies for residents of the capital cities was 104. Hobart (111) Melbourne (111) and Sydney (110) had the highest ratios and Canberra had the lowest (58).
- SARs were lower in non-metropolitan areas than the capital cities. The lowest ratios in the non-metropolitan areas were in South Australia (62) and the Northern Territory (66) and the highest were in the non-metropolitan areas of Victoria (104) and Queensland (101).
- SARs decrease with increasing remoteness.

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Also see fact sheet 1: Children **Respiratory disease in children 0-4**

Children **Tonsillectomy**

Children **Myringotomy**

Also see fact sheet 3: Women **Health service use - Hospitals**

Women **Health service use - General Practitioners**

Women **Breast cancer**

Women **Hysterectomy**

Also see fact sheet 4: Older people **Hip Replacements**

Older people **Lens insertion**