South Australian Monitoring and Surveillance System (SAMSS)

The Health Status of People Living in the South Australian Health Regions
July 2002 – December 2003

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Population Research and Outcome Studies
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EXECUTIVE SUMMARY

The purpose of this report is to provide information on health and health-related issues for the health regions of South Australia. The information will assist forward planning by investigating issues identified by the regions and providing reliable population estimates.

The data used to explore these issues were obtained from the South Australian Monitoring and Surveillance System (SAMSS). SAMSS is a population health survey system that commenced in July 2002 and monitors, in a systematic way, the trends of diseases, health related problems, risk factors and other issues, over time. Interviews are undertaken every month in South Australia (approximately 600 people) using Computer Assisted Telephone Interviewing (CATI) technology.

This document presents information on the health status of the population in each of the South Australian Health Regions.

The following are the main statistically significant differences observed for the regions:

**Self-reported overall health status**

- Overall, 86.1% of respondents aged 5 years and over rated their overall health as excellent, very good, or good. There were no significant differences observed for the proportion of respondents in any of the age groups reporting excellent, very good or good health between the regions.

**Health service use**

- The South East (22.4%) and Central Northern Adelaide (34.8%) regions had a lower proportion of respondents visiting a General Practitioner (GP), while respondents living in the Northern and Far Western region (40.8%) were more likely to visit a General Practitioner.
- Eyre (5.7%) and the Mid North (4.9%) regions had a higher proportion of respondents reporting the use of a hospital accident and emergency department service and respondents living in the Mid North (4.7%) and the South East (4.4%) regions were more likely to use a hospital admission service.
The South East (9.7%) and Southern Adelaide (6.7%) region respondents were more likely to have visited a chiropractor during the past four weeks while respondents living in the Central Northern Adelaide region (5.1%) were less likely to have visited a chiropractor during the past four weeks.

Respondents living in the Central Northern Adelaide region (2.0%) were statistically significantly less likely to use the services of an alternative therapist while those living in the Southern Adelaide (3.0%) and Eyre (5.2%) regions were more likely to have used the services of an alternative therapist during the last four weeks.

Respondents living in the Hills Mallee (12.8%) and the Wakefield (10.8%) regions were more likely to utilise the services of a child health nurse or Child and Youth Health worker during the previous four weeks.

The proportion of children aged 5 to 15 years using dental services did not differ between the regions.

Respondents, aged 16 years and over, living in the Central Northern Adelaide (71.3%) and the Southern Adelaide (71.6%) regions were more likely to have visited the dentist within the past two years while respondents living in the Hills Mallee (60.9%), Mid North (56.5%), Riverland (59.6), South East (62.6%) and the Northern and Far Western (53.5%) regions were less likely to have visited a dentist in the past two years.

Co-morbidity, disability, injury

People, 16 years and over, living in the Northern and Far Western region (11.3%) had a higher prevalence of diagnosed diabetes.

A higher proportion of children, aged 2 to 15 years, living in the Northern and Far Western region (54.8%) reported current confirmed asthma while a lower proportion of children, aged 2 to 15 years, reported current confirmed asthma in the Central Northern Adelaide region (16.3%).

There were no statistically significant differences observed in the proportion of respondents reporting cardiovascular disease, arthritis or osteoporosis between the regions.
Health-related risk factors

- Respondents in the Northern and Far Western region (31.5%) were more likely to have ever been told that they have high blood pressure while those living in the Central Northern Adelaide region (19.2%) were less likely to have ever been told that they have high blood pressure.

- People living in the Mid North (11.8%) and Eyre (11.1%) regions had a higher prevalence of current high blood pressure.

- The Central Northern Adelaide region respondents were more likely to be classified as underweight (3.0%) or in the normal weight range (45.0%) while people within the Mid North region (47.2%) were more likely to be overweight and people within the Riverland (27.7%), South East (26.8%) and Northern and Far Western (26.1%) regions were more likely to be obese.

- People living in the Northern and Far Western region were more likely to be at risk of harm (risky to high risk) from alcohol in the short (19.2%) and term (37.9%) term.

- Children, aged 4 to 15 years living in the Hills Mallee (42.1%) and Riverland (47.4%) regions were more likely to eat the recommended serves of vegetables for their age group per day.

- Overall, 7.0% of respondents, aged 16 years, and over reported eating five or more serves of vegetables per day. Respondents living in the Hills Mallee (9.9%), Mid North (13.3%) and Northern and Far Western (10.9%) regions were more likely to report eating five or more serves of vegetables per day.

- The Northern and Far Western region (30.5%) had a higher proportion of respondents, 4 to 15 years, reporting eating one or less serves of fruit per day and the Eyre region (65.5%) had a higher proportion of respondents, 16 years and over, reporting eating one serve or less of fruit per day.

- Overall, 16.0% of respondents reported eating three or more serves of fruit per day with respondents living in the Central Northern Adelaide region (16.9%) more likely to report eating three or more serves of fruit per day.

- Overall, 50.1% of respondents, aged 20 to 64 years, reported undertaking sufficient physical activity. Respondents living in the Central Northern Adelaide region (51.5%) were more likely to undertake sufficient physical activity while those living in the Hills Mallee health region (40.8%) were less likely to undertake sufficient physical activity.
Mental health conditions

- Overall, 13.5% of respondents 16 years and over reported a current mental health condition with those living in the Riverland region (7.1%) less likely to report a current mental health condition.

- People living in the Central Northern Adelaide region (12.1%) were more likely to be experiencing psychological distress as defined by K10 and people living in the Wakefield region (7.5%) were less likely to be experiencing psychological distress as defined by K10.

- Respondents living in the Northern and Far Western region were more likely to report children, aged 2 to 15 years, having trouble with emotions, concentration, behaviour or getting on with people (27.8%) and having ever been treated for an emotional, mental health or behavioural problem (47.0%).

Social capital

- Respondents living in the Hills Mallee (95.4%), Wakefield (96.5%), Mid North (97.9%) and Eyre (95.4%) regions were more likely to have reported that their neighbourhood was safe, while respondents living in the Central Northern Adelaide region (86.2%) were less likely to report that their neighbourhood was a safe place to live.

- Overall, 79.8% of respondents reported that they felt people in their neighbourhood generally trusted each other. The Central Northern Adelaide (76.1%), Southern Adelaide (77.8%) and the Northern and Far Western (70.2%) regions were less likely to report neighbourhood trust.

- Respondents living in the Hills Mallee (99.4%) and the Wakefield (99.4%) regions were more likely to feel safe in their own home while those living in the Central Northern Adelaide region (96.3%) were less likely to report feeling safe in their own home.

Days lost or limited because of health

- Overall 16.7% of the respondents reported being unable to work or carry out normal duties for one or more days and 23.5% of the respondents reported being limited in their ability to work or carry out their normal duties for one or more days. There were no statistically significant differences observed between the regions for days lost or limited because of health.
CHAPTER 1: INTRODUCTION

The South Australian Generational Health Review\(^1\) (GHR) recommended the establishment of a regional health structure (Government of South Australia, 2003), which was adopted by the Government. The GHR concluded that through the regionalisation of health service governance and funding:

- services will be more effectively networked and able to provide greater continuity of care;
- investment in services and programs will better match community needs and priorities, and be more effective in addressing health inequalities; and
- a more appropriate balance will be achieved between services that aim to prevent and detect ill-health and those which aim to maintain and restore health.

The regions established by the Government are:

- Central Northern Adelaide
- Southern Adelaide
- Hills Mallee
- Wakefield
- Mid North
- Riverland
- South East
- Eyre
- Northern and Far Western

For planning and service delivery to be done at a regional level, data are required at the regional level. The purpose of this report is to provide information on health and health-related issues for the health regions of South Australia. The information will assist forward planning by investigating issues identified by the regions and providing reliable population estimates. While differences within each region were identified, caution should be exercised regarding comparisons of the regions with each other because of the different age-sex structure within each region. The health issues examined are important in their own right for each region and reflect the regions' unique demographic composition.
The data used to explore these issues were obtained from a large representation population health survey, South Australian Monitoring and Surveillance System (SAMSS). SAMSS is a population health survey that commenced in July 2002 and monitors, in a systematic way, the trends of diseases, health related problems, risk factors and other human services issues relevant to the Department of Health, over time. Interviews are undertaken every month in South Australia (approximately 600 people) using Computer Assisted Telephone Interviewing (CATI) technology. In this early stage of SAMSS development only cross-sectional information is provided. Subsequent reports assessing the health status of South Australians by health region will include time series and trends data.
CHAPTER 2: BACKGROUND AND METHODOLOGY

2.1 Background

2.1.1 Aims of SAMSS

The main objectives of SAMSS are to monitor, in a systematic way, the trends of diseases, health related problems, risk factors and other health service issues relevant to the South Australian Department of Health, over time.

The aim of this system is to address the needs of the whole of the Department and to monitor key risk factor and population trends in priority chronic disease areas so that programs and policies can respond to these changes. These data monitor state and national health priority areas and will contribute to the evaluation of the effectiveness of the Department of Health programs, interventions and strategic plans.

The system collects ongoing data at the population level on the priority health areas and main indicators pertinent to the Department of Health policies. The risk factors included in the system are those critical to national and state health priority areas. These data will ensure that appropriate, timely and valid population health information will be available to monitor health status, respond to population changes and support planning, implementation and evaluation of health services and programs. Trend and time series analyses will allow changes over time to be detected. SAMSS will address these needs on the whole South Australian population and interviews (or surrogate interviews) will be conducted with people of all ages.

Other objectives are to:

- Provide high quality, representative data;
- Characterise health problems or topics by time;
- Detect epidemics or changes in the topic occurrence;
- Identify high risk groups or risk factors associated with health problems or topics and suggest hypotheses for further investigation;
- Estimate the burden of health problems or topics;
- Evaluate health service initiatives, prevention and control programs including the effectiveness of these programs (directly or indirectly);
- Highlight gaps in information and services that affect South Australians’ general health and wellbeing;
- Disseminate findings to professionals and administrators within the Department of Health, and other health service professionals or organisations in South Australia and Australia;
- Project future health care needs;
- Set priorities for allocation of resources; and
- Strengthen the network for surveillance and monitoring of issues relevant to the Department of Health to improve information gathering and exchange.

### 2.1.2 Aim of report

This report aims to present key health and well-being indicators by Health Region. This report presents preliminary frequency data (from SAMSS for the period July 2002 to December 2003).

### 2.2 Methodology

#### 2.2.1 Questions

Issues included in the questionnaire were based on the Department of Health and national/state priority areas and indicators with the intention of gathering appropriate data on key indicators. Topics that are included in SAMSS were developed by the Population Research and Outcome Studies (PROS) Unit in consultation with key personnel within the Department of Health, including relevant experts. Questions relating to children were developed in consultation with the SAMSS Children’s Committee that consists of state experts on children issues.

A core set of questions is asked every month with additional questions asked in alternate months. These questions are based on previous work undertaken in Australian states and territories. Where possible, questions that had previously been included in other surveys, and are perceived to ascertain reliable and valid data, were used or modified.\(^2\)\(^3\)

2.2.2 Sample Selection

All households in South Australia with a telephone number listed in the Electronic White Pages (EWP) were eligible for selection in the sample. Each month, 860 South Australian residential telephone numbers were randomly selected from the Electronic White Pages.

2.2.3 Introductory letter

A letter introducing SAMSS was sent to the household of each selected telephone number. Within each household the person who had their birthday last was selected for interview. There was no replacement for non-contactable persons. The letter informed people of the purpose of the survey and indicated that they can expect a telephone call within the time frame of the survey. During July 2002 to December 2003, 85.2% of those who participated indicated that they had received a letter.

2.2.4 Data collection

Data was collected every month by a contracted agency and interviews were conducted in English.

2.2.5 CATI

The CATI III (Computer Assisted Telephone Interview) system was used to conduct the interviews. This system allows immediate entry of data from the interviewer’s questionnaire screen to the computer database. The main advantages of this system are the precise ordering and timing of call backs and correct sequencing of questions as specific answers are given. The CATI system enforces a range of checks on each response with most questions having a set of pre-determined response categories. In addition, CATI automatically rotates response categories, when required, to minimise bias. When open-ended responses are required, these are transcribed exactly by the interviewer.

2.2.6 Call backs

At least ten call backs were made to the telephone number selected at random from the Electronic White Pages to interview household members. Different times of the day or evening were scheduled for each call back. If a person was not able to be interviewed immediately the interview was re-scheduled for a time suitable to them. Where a refusal was encountered, another interviewer (at the discretion of the supervisor) called later, in an endeavour to obtain the interview(s). Replacement
interviews for persons who were not able to be contacted or interviewed were not permitted.

2.2.7 Validation

Of each interviewer’s work, 10% was selected at random for validation by the supervisor. The contracted agency is a member of Interviewer Quality Control Australia (IQCA).

2.2.8 Data Processing

After each occurrence of data collection, the raw data from the CATI system was imported into SPSS for analysis. Open-ended responses were saved in Excel format and the responses were either coded numerically and brought into the main SPSS database, or brought into SPSS as a string variable if necessary.

2.2.9 Weighting

The data presented in this report were weighted by age, sex, area (metro/rural) and probability of selection in the household to the most recent ABS census data. Probability of selection in the household was calculated on the number of adults in the household and the number of listings in the White Pages. Weighting was used to correct for the disproportionality of the sample with respect to the populations of interest. The weights reflect unequal sample inclusion probabilities and compensate for differential non-response. The data were weighted using the ABS data so that the health estimates calculated would be representative of the adult populations of those areas.

The weighting of the data results in occasional rounding effects for the numbers. In all instances the percentages should be the point of reference rather than the actual number of respondents as the percentages presented in this report have been processed on the figures pre-rounding.

2.2.10 Response Rates

The overall response rate of SAMSS for the 18 month period was 69.0%. Initially a sample of 15620 was drawn. Sample loss of 2169 occurred due to non-connected numbers (1655), non-residential numbers (304) and fax/modem connections (210).
Table 2.1: Response rate for period July 2002 to December 2003

<table>
<thead>
<tr>
<th></th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial eligible sample</td>
<td>13451</td>
<td></td>
</tr>
<tr>
<td>Refusals</td>
<td>1478</td>
<td>11.0</td>
</tr>
<tr>
<td>Non-contact after six attempts</td>
<td>1281</td>
<td>9.5</td>
</tr>
<tr>
<td>Foreign language</td>
<td>308</td>
<td>2.3</td>
</tr>
<tr>
<td>Incapacitated</td>
<td>461</td>
<td>3.4</td>
</tr>
<tr>
<td>Terminated</td>
<td>17</td>
<td>0.1</td>
</tr>
<tr>
<td>Respondent unavailable</td>
<td>595</td>
<td>4.4</td>
</tr>
<tr>
<td>Completed interviews</td>
<td>9311</td>
<td></td>
</tr>
</tbody>
</table>

Response rate % 69.0
Participation rate % 76.2

2.2.11 Average time

The average time for a person to complete the interview was 17 minutes.
CHAPTER 3: DEMOGRAPHIC PROFILE: SOUTH AUSTRALIAN HEALTH REGIONS

3.1 Description

The nine regions established by the Government are:

- Central Northern Adelaide;
- Southern Adelaide;
- Hills Mallee;
- Wakefield;
- Mid North;
- Riverland;
- South East;
- Eyre; and
- Northern and Far Western.

Table 3.1 shows the proportion of respondents by the South Australian health regions.

Table 3.1: Proportion of respondents by the South Australian Health Regions

<table>
<thead>
<tr>
<th>Region</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Metropolitan</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>6703</td>
<td>75.6</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>4446</td>
<td>48.0</td>
</tr>
<tr>
<td>SA Country</td>
<td></td>
<td>27.6</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>690</td>
<td>7.4</td>
</tr>
<tr>
<td>Wakefield</td>
<td>650</td>
<td>7.0</td>
</tr>
<tr>
<td>Mid North</td>
<td>173</td>
<td>1.9</td>
</tr>
<tr>
<td>Riverland</td>
<td>221</td>
<td>2.4</td>
</tr>
<tr>
<td>South East</td>
<td>414</td>
<td>4.5</td>
</tr>
<tr>
<td>Eyre</td>
<td>193</td>
<td>2.1</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>221</td>
<td>2.4</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>9265</td>
<td>100.0</td>
</tr>
</tbody>
</table>
3.2 Demographic profile by South Australian health region

The demographic profile of respondents is shown in Table 3.2 to Table 3.8 for the South Australian health regions (appropriately weighted to reflect population proportions).

Table 3.2: Demographic profile - sex, age, household size and structure

<table>
<thead>
<tr>
<th></th>
<th>Central Northern Adelaide</th>
<th></th>
<th>Southern Adelaide</th>
<th></th>
<th>SA Country</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td><strong>Sex</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>2159</td>
<td>48.6</td>
<td>1124</td>
<td>49.8</td>
<td>1301</td>
<td>50.8</td>
</tr>
<tr>
<td>Female</td>
<td>2287</td>
<td>51.4</td>
<td>1134</td>
<td>50.2</td>
<td>1261</td>
<td>49.2</td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0 to 4 years</td>
<td>278</td>
<td>6.2</td>
<td>121</td>
<td>5.3</td>
<td>167</td>
<td>6.5</td>
</tr>
<tr>
<td>5 to 14 years</td>
<td>562</td>
<td>12.7</td>
<td>275</td>
<td>12.2</td>
<td>396</td>
<td>15.5</td>
</tr>
<tr>
<td>15 to 24 years</td>
<td>594</td>
<td>13.4</td>
<td>327</td>
<td>14.5</td>
<td>281</td>
<td>11.0</td>
</tr>
<tr>
<td>25 to 34 years</td>
<td>654</td>
<td>14.7</td>
<td>302</td>
<td>13.4</td>
<td>317</td>
<td>12.4</td>
</tr>
<tr>
<td>35 to 44 years</td>
<td>684</td>
<td>15.4</td>
<td>327</td>
<td>14.5</td>
<td>405</td>
<td>15.8</td>
</tr>
<tr>
<td>45 to 54 years</td>
<td>614</td>
<td>13.8</td>
<td>338</td>
<td>15.0</td>
<td>364</td>
<td>14.2</td>
</tr>
<tr>
<td>55 to 65 years</td>
<td>416</td>
<td>9.4</td>
<td>229</td>
<td>10.1</td>
<td>276</td>
<td>10.8</td>
</tr>
<tr>
<td>65 years and over</td>
<td>643</td>
<td>14.5</td>
<td>339</td>
<td>15.0</td>
<td>356</td>
<td>13.9</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>4446</td>
<td>100.0</td>
<td>2258</td>
<td>100.0</td>
<td>2562</td>
<td>100.0</td>
</tr>
<tr>
<td><strong>Number of people 16 yrs and over</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>607</td>
<td>13.6</td>
<td>313</td>
<td>13.9</td>
<td>332</td>
<td>13.0</td>
</tr>
<tr>
<td>2</td>
<td>2560</td>
<td>57.6</td>
<td>1321</td>
<td>58.5</td>
<td>1629</td>
<td>63.6</td>
</tr>
<tr>
<td>3 or more</td>
<td>1279</td>
<td>28.8</td>
<td>624</td>
<td>27.6</td>
<td>601</td>
<td>23.4</td>
</tr>
<tr>
<td><strong>Children aged 0 to 15 yrs in household</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>None</td>
<td>2456</td>
<td>55.4</td>
<td>1209</td>
<td>53.5</td>
<td>1271</td>
<td>49.6</td>
</tr>
<tr>
<td>At least one</td>
<td>1977</td>
<td>44.6</td>
<td>1049</td>
<td>46.5</td>
<td>1291</td>
<td>50.4</td>
</tr>
<tr>
<td><strong>Family structure</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Couple with children</td>
<td>2230</td>
<td>50.3</td>
<td>1115</td>
<td>49.4</td>
<td>1349</td>
<td>52.7</td>
</tr>
<tr>
<td>Single with children</td>
<td>309</td>
<td>7.0</td>
<td>182</td>
<td>8.0</td>
<td>154</td>
<td>6.0</td>
</tr>
<tr>
<td>Single adult only</td>
<td>455</td>
<td>10.3</td>
<td>219</td>
<td>9.7</td>
<td>236</td>
<td>9.2</td>
</tr>
<tr>
<td>Couple only</td>
<td>952</td>
<td>21.5</td>
<td>522</td>
<td>23.1</td>
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<td>Adults (related)</td>
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</tr>
<tr>
<td>Adults (unrelated)</td>
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<td>62</td>
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<td>49</td>
<td>1.9</td>
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<td>Other</td>
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</table>

Note: The weighting of data can result in rounding discrepancies or totals not adding while greater variation in totals is due to non-response to question.
### Table 3.3: Demographic profile - Country of birth, language at home other than English, marital status, educational attainment and employment status

<table>
<thead>
<tr>
<th></th>
<th>Central Northern Adelaide</th>
<th></th>
<th>Southern Adelaide</th>
<th></th>
<th>SA Country</th>
<th></th>
</tr>
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<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
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<td><strong>Country of birth</strong></td>
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<td>152</td>
<td>5.9</td>
</tr>
<tr>
<td>Other Europe, The USSR &amp; the Baltic States</td>
<td>268</td>
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<td>109</td>
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<td>61</td>
<td>2.4</td>
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<td>80</td>
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<td>2240</td>
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<td>2558</td>
<td>100.0</td>
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<td><strong>Language spoken at home other than English, 2 yrs and over</strong></td>
<td></td>
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<td>99</td>
<td>4.0</td>
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<tr>
<td>No</td>
<td>3758</td>
<td>86.8</td>
<td>2045</td>
<td>92.7</td>
<td>2409</td>
<td>96.0</td>
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<td>2205</td>
<td>100.0</td>
<td>2509</td>
<td>100.0</td>
</tr>
<tr>
<td><strong>Marital status, 16 yrs and over</strong></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married, living with partner (defacto)</td>
<td>2158</td>
<td>60.7</td>
<td>1168</td>
<td>64.1</td>
<td>1382</td>
<td>70.1</td>
</tr>
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<td>Separated/divorced</td>
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<td>140</td>
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<td>120</td>
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<tr>
<td>Widowed</td>
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<td>120</td>
<td>6.6</td>
<td>119</td>
<td>6.1</td>
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<tr>
<td>Never married</td>
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<td>25.2</td>
<td>393</td>
<td>21.6</td>
<td>347</td>
<td>17.6</td>
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<td>100.0</td>
<td>2205</td>
<td>100.0</td>
<td>2509</td>
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<tr>
<td><strong>Educational attainment, 16 yrs and over</strong></td>
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<td></td>
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<tr>
<td>Never attended/not completed school</td>
<td>1320</td>
<td>37.2</td>
<td>641</td>
<td>35.3</td>
<td>1034</td>
<td>52.5</td>
</tr>
<tr>
<td>Completed high school (Yr 12, Form 6, HSC)</td>
<td>740</td>
<td>20.8</td>
<td>337</td>
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<td>315</td>
<td>16.0</td>
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<tr>
<td>TAFE/Trade certificate/diploma</td>
<td>682</td>
<td>19.2</td>
<td>442</td>
<td>24.3</td>
<td>407</td>
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</tr>
<tr>
<td>University, CAE or some other tertiary institute degree</td>
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<td>22.7</td>
<td>397</td>
<td>21.8</td>
<td>211</td>
<td>10.7</td>
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<tr>
<td><strong>Total</strong></td>
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<td>2205</td>
<td>100.0</td>
<td>2509</td>
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<td></td>
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<td></td>
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<td>Self employed</td>
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<td>188</td>
<td>10.3</td>
<td>415</td>
<td>21.1</td>
</tr>
<tr>
<td>Employed for wages, salary or payment in kind</td>
<td>1715</td>
<td>48.2</td>
<td>895</td>
<td>49.2</td>
<td>793</td>
<td>40.3</td>
</tr>
<tr>
<td>Unemployed</td>
<td>121</td>
<td>3.4</td>
<td>42</td>
<td>2.3</td>
<td>49</td>
<td>2.5</td>
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<tr>
<td>Engaged in home duties</td>
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<td>159</td>
<td>8.7</td>
<td>189</td>
<td>9.6</td>
</tr>
<tr>
<td>Student</td>
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<td>121</td>
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<td>89</td>
<td>4.5</td>
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<tr>
<td>Retired</td>
<td>680</td>
<td>19.1</td>
<td>369</td>
<td>20.3</td>
<td>380</td>
<td>19.3</td>
</tr>
<tr>
<td>Unable to work</td>
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<td>45</td>
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</tr>
<tr>
<td>Other</td>
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<td>3</td>
<td>0.1</td>
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<td>2255</td>
<td>100.0</td>
<td>2560</td>
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</tr>
</tbody>
</table>

Note: The weighting of data can result in rounding discrepancies or totals not adding while greater variation in totals is due to non-response to question.
### Table 3.4: Demographic profile - Dwelling status, family's money situation, household income

<table>
<thead>
<tr>
<th></th>
<th>Central Northern Adelaide</th>
<th>Southern Adelaide</th>
<th>SA Country</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td><strong>Dwelling status</strong></td>
<td></td>
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<td></td>
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<tr>
<td>Owned or being purchased</td>
<td>3627</td>
<td>81.6</td>
<td>1911</td>
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<tr>
<td>Rented from the Housing Trust</td>
<td>214</td>
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<td>77</td>
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<tr>
<td>Rented privately</td>
<td>536</td>
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<tr>
<td>Other</td>
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</tr>
<tr>
<td><strong>Family's money situation</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spending more money than getting</td>
<td>210</td>
<td>4.7</td>
<td>123</td>
</tr>
<tr>
<td>Have just enough money to get through</td>
<td>823</td>
<td>18.5</td>
<td>392</td>
</tr>
<tr>
<td>There's some money left over each week but just spend it</td>
<td>368</td>
<td>8.3</td>
<td>218</td>
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<tr>
<td>Can save a bit every now and then</td>
<td>2219</td>
<td>49.9</td>
<td>1129</td>
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<tr>
<td>Can save a lot</td>
<td>654</td>
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<td>318</td>
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<tr>
<td>Not stated</td>
<td>172</td>
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<td>78</td>
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<tr>
<td><strong>Gross annual household income</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Up to $20,000</td>
<td>843</td>
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<td>393</td>
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<td>$20,001 - $40,000</td>
<td>790</td>
<td>17.8</td>
<td>382</td>
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<tr>
<td>$40,001 - $60,000</td>
<td>749</td>
<td>16.8</td>
<td>445</td>
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<td>$60,001 - $80,000</td>
<td>643</td>
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<td>335</td>
</tr>
<tr>
<td>More than $80,000</td>
<td>828</td>
<td>18.6</td>
<td>407</td>
</tr>
<tr>
<td>Not stated</td>
<td>592</td>
<td>13.3</td>
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<td><strong>Total</strong></td>
<td>4446</td>
<td>100.0</td>
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Note: The weighting of data can result in rounding discrepancies or totals not adding while greater variation in totals is due to non-response to question.
Table 3.5: SA Country demographic profile - sex, age, household size and structure

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<tr>
<th></th>
<th>Hills Mallee</th>
<th>Wakefield</th>
<th>Mid North</th>
<th>Riverland</th>
<th>South East</th>
<th>Eyre</th>
<th>Northern &amp; Far Western</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td><strong>Sex</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Male</td>
<td>363</td>
<td>52.7</td>
<td>326</td>
<td>50.1</td>
<td>85</td>
<td>49.0</td>
<td>98</td>
</tr>
<tr>
<td>Female</td>
<td>326</td>
<td>47.3</td>
<td>324</td>
<td>49.9</td>
<td>89</td>
<td>51.0</td>
<td>122</td>
</tr>
<tr>
<td><strong>Age</strong></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0 to 4 years</td>
<td>42</td>
<td>6.1</td>
<td>58</td>
<td>8.9</td>
<td>11</td>
<td>6.5</td>
<td>11</td>
</tr>
<tr>
<td>5 to 14 years</td>
<td>106</td>
<td>15.4</td>
<td>97</td>
<td>14.9</td>
<td>21</td>
<td>12.1</td>
<td>41</td>
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<tr>
<td>15 to 24 years</td>
<td>87</td>
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<td>74</td>
<td>11.3</td>
<td>14</td>
<td>7.9</td>
<td>15</td>
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<tr>
<td>25 to 34 years</td>
<td>78</td>
<td>11.3</td>
<td>70</td>
<td>10.8</td>
<td>16</td>
<td>9.4</td>
<td>36</td>
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<tr>
<td>35 to 44 years</td>
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<td>14.0</td>
<td>112</td>
<td>17.2</td>
<td>31</td>
<td>17.8</td>
<td>40</td>
</tr>
<tr>
<td>45 to 54 years</td>
<td>110</td>
<td>15.9</td>
<td>86</td>
<td>13.2</td>
<td>23</td>
<td>13.2</td>
<td>28</td>
</tr>
<tr>
<td>55 to 65 years</td>
<td>78</td>
<td>11.3</td>
<td>61</td>
<td>9.4</td>
<td>25</td>
<td>14.3</td>
<td>25</td>
</tr>
<tr>
<td>65 years and over</td>
<td>92</td>
<td>13.4</td>
<td>93</td>
<td>14.2</td>
<td>33</td>
<td>18.8</td>
<td>24</td>
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<td><strong>Number of people 16 yrs and over</strong></td>
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<td></td>
<td></td>
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<td>1</td>
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<td>82</td>
<td>12.6</td>
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<td>118</td>
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<td>25.5</td>
<td>31</td>
<td>17.8</td>
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<td>95</td>
<td>54.9</td>
<td>95</td>
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<td>53.1</td>
<td>78</td>
<td>45.1</td>
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<td>650</td>
<td>100.0</td>
<td>173</td>
<td>100.0</td>
<td>221</td>
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</table>

Note: The weighting of data can result in rounding discrepancies or totals not adding while greater variation in totals is due to non-response to question
Table 3.6: SA Country demographic profile - Family structure, country of birth, language at home other than English

<table>
<thead>
<tr>
<th></th>
<th>Hills Mallee</th>
<th>Wakefield</th>
<th>Mid North</th>
<th>Riverland</th>
<th>South East</th>
<th>Eyre</th>
<th>Northern &amp; Far Western</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td><strong>Family structure</strong></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Couple with children</td>
<td>373</td>
<td>54.1</td>
<td>354</td>
<td>54.5</td>
<td>77</td>
<td>44.6</td>
<td>123</td>
</tr>
<tr>
<td>Single with children</td>
<td>34</td>
<td>4.9</td>
<td>40</td>
<td>6.1</td>
<td>9</td>
<td>5.2</td>
<td>12</td>
</tr>
<tr>
<td>Single adult only</td>
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<td>55</td>
<td>8.4</td>
<td>18</td>
<td>10.1</td>
<td>22</td>
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<td>Couple only</td>
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<td>162</td>
<td>24.9</td>
<td>53</td>
<td>30.6</td>
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<tr>
<td>Adults (related)</td>
<td>47</td>
<td>6.8</td>
<td>25</td>
<td>3.8</td>
<td>13</td>
<td>7.6</td>
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<tr>
<td>Adults (unrelated)</td>
<td>10</td>
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<td>14</td>
<td>2.1</td>
<td>1</td>
<td>0.8</td>
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<td>Other</td>
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</tr>
<tr>
<td><strong>Total</strong></td>
<td>690</td>
<td>100.0</td>
<td>650</td>
<td>100.0</td>
<td>173</td>
<td>100.0</td>
<td>221</td>
</tr>
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<td><strong>Country of birth</strong></td>
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<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Australia</td>
<td>630</td>
<td>91.4</td>
<td>578</td>
<td>89.1</td>
<td>157</td>
<td>90.7</td>
<td>206</td>
</tr>
<tr>
<td>UK or Ireland</td>
<td>38</td>
<td>5.5</td>
<td>49</td>
<td>7.5</td>
<td>11</td>
<td>6.4</td>
<td>5</td>
</tr>
<tr>
<td>Other Europe, The USSR &amp; the Baltic States</td>
<td>14</td>
<td>2.1</td>
<td>15</td>
<td>2.3</td>
<td>5</td>
<td>2.9</td>
<td>8</td>
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<tr>
<td>Other</td>
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<td>7</td>
<td>1.1</td>
<td>-</td>
<td>-</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>689</td>
<td>100.0</td>
<td>648</td>
<td>100.0</td>
<td>173</td>
<td>100.0</td>
<td>220</td>
</tr>
<tr>
<td><strong>Language spoken at home other than English, 2 yrs and over</strong></td>
<td></td>
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<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Yes</td>
<td>22</td>
<td>3.2</td>
<td>27</td>
<td>4.3</td>
<td>3</td>
<td>2.0</td>
<td>21</td>
</tr>
<tr>
<td>No</td>
<td>660</td>
<td>96.8</td>
<td>601</td>
<td>95.7</td>
<td>169</td>
<td>98.0</td>
<td>196</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>682</td>
<td>100.0</td>
<td>628</td>
<td>100.0</td>
<td>172</td>
<td>100.0</td>
<td>216</td>
</tr>
</tbody>
</table>

Note: The weighting of data can result in rounding discrepancies or totals not adding while greater variation in totals is due to non-response to question.
<table>
<thead>
<tr>
<th></th>
<th>Hills Mallee</th>
<th>Wakefield</th>
<th>Mid North</th>
<th>Riverland</th>
<th>South East</th>
<th>Eyre</th>
<th>Northern &amp; Far Western</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td><strong>Dwelling status</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Owned or being purchased</td>
<td>595</td>
<td>86.3</td>
<td>570</td>
<td>87.7</td>
<td>153</td>
<td>88.5</td>
<td>187</td>
</tr>
<tr>
<td>Rented from the Housing Trust</td>
<td>12</td>
<td>1.7</td>
<td>11</td>
<td>1.7</td>
<td>8</td>
<td>4.5</td>
<td>10</td>
</tr>
<tr>
<td>Rented privately</td>
<td>76</td>
<td>11.0</td>
<td>57</td>
<td>8.8</td>
<td>12</td>
<td>6.6</td>
<td>19</td>
</tr>
<tr>
<td>Other</td>
<td>7</td>
<td>1.1</td>
<td>12</td>
<td>1.8</td>
<td>1</td>
<td>0.4</td>
<td>5</td>
</tr>
<tr>
<td><strong>Marital status, 16 yrs and over</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married, living with partner (defacto)</td>
<td>368</td>
<td>69.2</td>
<td>338</td>
<td>69.6</td>
<td>108</td>
<td>77.7</td>
<td>122</td>
</tr>
<tr>
<td>Separated/divorced</td>
<td>31</td>
<td>5.9</td>
<td>27</td>
<td>5.6</td>
<td>8</td>
<td>5.7</td>
<td>9</td>
</tr>
<tr>
<td>Widowed</td>
<td>29</td>
<td>5.5</td>
<td>25</td>
<td>5.2</td>
<td>10</td>
<td>7.4</td>
<td>12</td>
</tr>
<tr>
<td>Never married</td>
<td>103</td>
<td>19.3</td>
<td>94</td>
<td>19.4</td>
<td>13</td>
<td>9.1</td>
<td>22</td>
</tr>
<tr>
<td><strong>Educational attainment, 16 yrs and over</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Never attended/not completed school</td>
<td>343</td>
<td>50.4</td>
<td>299</td>
<td>47.6</td>
<td>97</td>
<td>56.4</td>
<td>129</td>
</tr>
<tr>
<td>Completed high school (Yr 12, Form 6, HSC)</td>
<td>116</td>
<td>17.1</td>
<td>117</td>
<td>18.6</td>
<td>31</td>
<td>18.2</td>
<td>24</td>
</tr>
<tr>
<td>TAFE/Trade certificate/diploma</td>
<td>135</td>
<td>19.9</td>
<td>127</td>
<td>20.2</td>
<td>30</td>
<td>17.7</td>
<td>46</td>
</tr>
<tr>
<td>University, CAE or some other tertiary institute degree</td>
<td>86</td>
<td>12.6</td>
<td>85</td>
<td>13.6</td>
<td>13</td>
<td>7.7</td>
<td>17</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>682</td>
<td>100.0</td>
<td>628</td>
<td>100.0</td>
<td>172</td>
<td>100.0</td>
<td>216</td>
</tr>
</tbody>
</table>

Note: The weighting of data can result in rounding discrepancies or totals not adding while greater variation in totals is due to non-response to question.
Table 3.8: SA Country demographic profile - Employment status, family's money situation, gross household income

<table>
<thead>
<tr>
<th></th>
<th>Hills Mallee</th>
<th>Wakefield</th>
<th>Mid North</th>
<th>Riverland</th>
<th>South East</th>
<th>Eyre</th>
<th>Northern &amp; Far Western</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td>Employment status</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self employed</td>
<td>149</td>
<td>21.8</td>
<td>156</td>
<td>24.8</td>
<td>30</td>
<td>17.4</td>
<td>57</td>
</tr>
<tr>
<td>Employed for wages, salary or payment in kind</td>
<td>294</td>
<td>43.1</td>
<td>226</td>
<td>36.0</td>
<td>60</td>
<td>34.9</td>
<td>94</td>
</tr>
<tr>
<td>Unemployed</td>
<td>25</td>
<td>3.6</td>
<td>14</td>
<td>2.2</td>
<td>1</td>
<td>0.8</td>
<td>2</td>
</tr>
<tr>
<td>Engaged in home duties</td>
<td>68</td>
<td>10.0</td>
<td>80</td>
<td>12.7</td>
<td>35</td>
<td>20.1</td>
<td>30</td>
</tr>
<tr>
<td>Student</td>
<td>30</td>
<td>4.4</td>
<td>34</td>
<td>5.5</td>
<td>4</td>
<td>2.5</td>
<td>4</td>
</tr>
<tr>
<td>Retired</td>
<td>98</td>
<td>14.4</td>
<td>105</td>
<td>16.8</td>
<td>34</td>
<td>20.0</td>
<td>24</td>
</tr>
<tr>
<td>Unable to work</td>
<td>17</td>
<td>2.5</td>
<td>13</td>
<td>2.0</td>
<td>7</td>
<td>4.3</td>
<td>5</td>
</tr>
<tr>
<td>Family money situation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spending more money than [I/we] get</td>
<td>47</td>
<td>6.9</td>
<td>36</td>
<td>5.6</td>
<td>10</td>
<td>5.7</td>
<td>3</td>
</tr>
<tr>
<td>Have just enough money to get through</td>
<td>140</td>
<td>20.4</td>
<td>99</td>
<td>15.2</td>
<td>36</td>
<td>20.8</td>
<td>47</td>
</tr>
<tr>
<td>There's some money left over each week but [I/we] just spend it</td>
<td>40</td>
<td>5.7</td>
<td>44</td>
<td>6.7</td>
<td>8</td>
<td>4.8</td>
<td>9</td>
</tr>
<tr>
<td>Can save a bit every now and then</td>
<td>346</td>
<td>50.2</td>
<td>364</td>
<td>56.0</td>
<td>93</td>
<td>53.8</td>
<td>122</td>
</tr>
<tr>
<td>Can save a lot</td>
<td>90</td>
<td>13.0</td>
<td>71</td>
<td>11.0</td>
<td>21</td>
<td>12.3</td>
<td>28</td>
</tr>
<tr>
<td>Don't know/refused</td>
<td>26</td>
<td>3.8</td>
<td>36</td>
<td>5.5</td>
<td>4</td>
<td>2.5</td>
<td>12</td>
</tr>
<tr>
<td>Gross annual household income</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Up to $20,000</td>
<td>126</td>
<td>18.3</td>
<td>111</td>
<td>17.1</td>
<td>51</td>
<td>29.3</td>
<td>34</td>
</tr>
<tr>
<td>$20,001 - $40,000</td>
<td>164</td>
<td>23.8</td>
<td>135</td>
<td>20.7</td>
<td>34</td>
<td>19.7</td>
<td>45</td>
</tr>
<tr>
<td>$40,001 - $60,000</td>
<td>133</td>
<td>19.3</td>
<td>131</td>
<td>20.2</td>
<td>33</td>
<td>18.9</td>
<td>37</td>
</tr>
<tr>
<td>$60,001 - $80,000</td>
<td>80</td>
<td>11.6</td>
<td>82</td>
<td>12.6</td>
<td>23</td>
<td>13.4</td>
<td>37</td>
</tr>
<tr>
<td>More than $80,000</td>
<td>87</td>
<td>12.7</td>
<td>104</td>
<td>16.0</td>
<td>18</td>
<td>10.2</td>
<td>41</td>
</tr>
<tr>
<td>Don't know/refused</td>
<td>98</td>
<td>14.3</td>
<td>87</td>
<td>13.4</td>
<td>15</td>
<td>8.5</td>
<td>27</td>
</tr>
<tr>
<td>Total</td>
<td>690</td>
<td>100.0</td>
<td>650</td>
<td>100.0</td>
<td>173</td>
<td>100.0</td>
<td>221</td>
</tr>
</tbody>
</table>

Note: The weighting of data can result in rounding discrepancies or totals not adding while greater variation in totals is due to non-response to question.
CHAPTER 4: OVERALL HEALTH STATUS

This section reports on the respondent’s overall health status ascertained by self-reported general health status.

Respondents aged five years and over (n=8700) were asked to rate their overall health status on a scale from excellent to poor\(^1\). Overall, 86.1% (95% CI 85.4 – 86.7; n=7492) of the respondents reported their overall health status as excellent, very good or good. The proportion of respondents who rated their health as excellent, very good and good is shown in Table 4.1 by health region.

There were no statistically significant differences observed between the health regions for overall health status.

Table 4.1: Respondents who reported excellent, very good or good overall health status by health region, 5 years and over

<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>3595</td>
<td>86.3</td>
<td>(85.2 – 87.3)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>1845</td>
<td>86.3</td>
<td>(84.8 – 87.8)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>566</td>
<td>87.3</td>
<td>(84.5 – 89.8)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>506</td>
<td>85.4</td>
<td>(82.3 – 88.2)</td>
</tr>
<tr>
<td>Mid North</td>
<td>128</td>
<td>78.6</td>
<td>(71.8 – 84.8)</td>
</tr>
<tr>
<td>Riverland</td>
<td>186</td>
<td>88.5</td>
<td>(83.3 – 92.4)</td>
</tr>
<tr>
<td>South East</td>
<td>328</td>
<td>85.5</td>
<td>(81.4 – 88.7)</td>
</tr>
<tr>
<td>Eyre</td>
<td>164</td>
<td>87.1</td>
<td>(81.4 – 91.5)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>176</td>
<td>83.2</td>
<td>(77.1 – 87.7)</td>
</tr>
<tr>
<td><strong>Overall</strong></td>
<td>7492</td>
<td>86.1</td>
<td>(85.4 – 86.7)</td>
</tr>
</tbody>
</table>

\(^\d+\) Statistically significantly higher or lower (p <0.05) than the other categories combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.

Overall, 95.6% (95% CI 94.3 – 96.6; n=1294) of respondents aged 5 to 15 years who reported their health as excellent, very good or good as shown in Table 4.2 by health region. There were no statistically significant differences observed between the health regions for overall health status in the 5 to 15 year age group.

---

\(^1\) Surrogate interviews were conducted for respondents aged 15 years or less.
Table 4.2: Respondents who reported excellent, very good or good overall health status by health region, 5 to 15 years

<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>593</td>
<td>96.7</td>
<td>(95.0 – 98.0)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>301</td>
<td>95.3</td>
<td>(92.1 – 97.2)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>109</td>
<td>93.9</td>
<td>(87.5 – 97.3)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>100</td>
<td>93.5</td>
<td>(86.5 – 97.1)</td>
</tr>
<tr>
<td>Mid North</td>
<td>23</td>
<td>95.2</td>
<td>(76.9 – 99.8)</td>
</tr>
<tr>
<td>Riverland</td>
<td>44</td>
<td>100.0</td>
<td>(90.0 – 100.0)</td>
</tr>
<tr>
<td>South East</td>
<td>59</td>
<td>95.7</td>
<td>(87.6 – 99.4)</td>
</tr>
<tr>
<td>Eyre</td>
<td>34</td>
<td>93.2</td>
<td>(80.0 – 99.0)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>33</td>
<td>87.1</td>
<td>(71.1 – 95.1)</td>
</tr>
<tr>
<td><strong>Overall</strong></td>
<td>1294</td>
<td>95.6</td>
<td>(94.3 – 96.6)</td>
</tr>
</tbody>
</table>

†↓ Statistically significantly higher or lower (p <0.05) than the other categories.
Note: The weighting of data can result in rounding discrepancies or totals not adding.

The proportion of respondents aged 16 years and over (n=7346) whose overall health status was excellent, very good or good is shown in Table 4.3 by health region. There were no statistically significant differences observed between the health regions for overall health status in the 16 years and over age group.

Table 4.3: Respondents who reported excellent, very good or good overall health status by health region, 16 years and over

<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>3002</td>
<td>84.5</td>
<td>(83.2 – 85.6)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>1543</td>
<td>84.8</td>
<td>(83.0 – 86.4)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>457</td>
<td>85.9</td>
<td>(82.6 – 88.7)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>406</td>
<td>83.7</td>
<td>(80.1 – 86.9)</td>
</tr>
<tr>
<td>Mid North</td>
<td>105</td>
<td>75.8</td>
<td>(68.0 – 82.9)</td>
</tr>
<tr>
<td>Riverland</td>
<td>142</td>
<td>85.5</td>
<td>(79.1 – 90.3)</td>
</tr>
<tr>
<td>South East</td>
<td>269</td>
<td>83.5</td>
<td>(78.9 – 87.3)</td>
</tr>
<tr>
<td>Eyre</td>
<td>130</td>
<td>85.7</td>
<td>(79.3 – 90.0)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>144</td>
<td>82.3</td>
<td>(76.3 – 88.1)</td>
</tr>
<tr>
<td><strong>Overall</strong></td>
<td>6198</td>
<td>84.4</td>
<td>(83.5 – 85.2)</td>
</tr>
</tbody>
</table>

↑↓ Statistically significantly higher or lower (p <0.05) than the other categories combined.
Note: The weighting of data can result in rounding discrepancies or totals not adding.
CHAPTER 5: HEALTH SERVICES UTILISATION

This section reports on the respondent’s use of health care services. The use of health care services was investigated by asking all respondents (n=9265), except where listed below, questions on the number of times in the last four weeks the respondent had used specific health services.

Health care services included:

- general practitioner;
- hospital admission;
- hospital accident and emergency department;
- hospital clinic;
- specialist doctor, not in a hospital;
- district nurse or other community nurse;
- optometrist;
- physiotherapist;
- chiropractor;
- alternative therapist;
- mental health professionals, 16 years and over, (n=7346);
- dental services, 5 years and over (n=8700), and;
- child health nurse, 0 to 15 years (n=1919);

The proportion of respondents reporting the use of these services is shown in Table 5.1 to Table 5.3 by health regions.

The following statistically significant differences were observed:

- Overall, 33.4% (95% CI 32.4 – 35.4; n=3093) of the respondents reported going to a General Practitioner (GP) in the last four weeks. Respondents living in the South East region (22.4%) were statistically significantly less likely to visit a GP, while respondents living in the Central Northern Adelaide (34.8%) and Northern and Far Western (40.8%) regions were statistically significantly more likely to visit a GP.

- Overall, 2.5% (95% CI 2.2 – 2.9; n=236) of the respondents reported going to a hospital accident and emergency department. Respondents living in the Mid North (4.9%) and Eyre (5.7%) regions were statistically significantly more likely to use this service.
• Overall, 2.0% (95% CI 1.8 – 2.3; n=189) of respondents reported using a hospital admission service. Respondents living in the Mid North (4.7%) and South East (4.4%) regions were statistically significantly more likely to use this service.

• Overall, 7.6% (95% CI 7.1 – 8.1; n=703) of the respondents reported using the services of a specialist doctor (not in a hospital). Respondents living in the Riverland (3.9%) and the Hills Mallee (5.5%) regions were statistically significantly less likely to use these services while respondents living in the Central Northern Adelaide region (8.3%) were statistically significantly more likely to use these services.

• Overall, 1.3% (95% CI 1.0 – 1.5; n=117) of the respondents reported using the services of a district nurse or other community nurse. Respondents living in the Southern Adelaide region (0.8%) were statistically significantly less likely to use this service while respondents living in the South East (2.5%) and Wakefield (2.8%) regions were statistically significantly more likely to use this service.

• Overall, 5.8% (95% CI 5.4 – 6.3; n=541) of the respondents reported using the services of a chiropractor during the past four weeks. Respondents living in the Central Northern Adelaide region (5.1%) were statistically significantly less likely to visit a chiropractor while respondents living in the Southern Adelaide (6.7%) and South East (9.7%) regions were statistically significantly more likely to visit a chiropractor.

• Overall, 6.4% (95% CI 5.4 – 7.6; n=123) of the respondents reported utilising a child health nurse/Child and Youth Health worker in the last four weeks. Respondents living in the Hills Mallee (12.8%) and the Wakefield (10.8%) regions were statistically significantly more likely to utilise the services of a child health nurse, Child and Youth Health worker.

• Overall, 2.4% (95% CI 2.1 – 2.7; n=219) of the respondents reported going to an alternative therapist. Respondents living in the Central Northern Adelaide region (2.0%) were statistically significantly less likely to use these services while respondents living in the Southern Adelaide (3.0%) and Eyre (5.2%) regions were statistically significantly more likely to use these services.

NB. Further data were collected on use of occupational therapists, speech therapists, audiologists, school counsellors, child mental health services, youth workers and social workers however, there were insufficient numbers for analysis and were subsequently excluded.
### Table 5.1: Utilisation of health services by health region, all ages

<table>
<thead>
<tr>
<th>Health Region</th>
<th>General Practitioner</th>
<th>Hospital: A&amp;E Dept</th>
<th>Hospital: Admission</th>
<th>Hospital: Clinic</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>(95% CI)</td>
<td>n</td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>1549</td>
<td>34.8 (33.4 - 36.3)</td>
<td>↑</td>
<td>103</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>746</td>
<td>33.1 (31.1 - 35.0)</td>
<td></td>
<td>55</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>214</td>
<td>31.0 (27.6 - 34.6)</td>
<td></td>
<td>12</td>
</tr>
<tr>
<td>Wakefield</td>
<td>197</td>
<td>30.3 (26.8 - 34.0)</td>
<td></td>
<td>14</td>
</tr>
<tr>
<td>Mid North</td>
<td>63</td>
<td>36.2 (29.3 - 44.1)</td>
<td>↑↑</td>
<td>9</td>
</tr>
<tr>
<td>Riverland</td>
<td>68</td>
<td>30.7 (24.8 - 37.4)</td>
<td></td>
<td>8</td>
</tr>
<tr>
<td>South East</td>
<td>93</td>
<td>22.4 (18.6 - 26.9)</td>
<td>↓</td>
<td>17</td>
</tr>
<tr>
<td>Eyre</td>
<td>74</td>
<td>38.1 (31.5 - 45.6)</td>
<td></td>
<td>11</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>90</td>
<td>40.8 (34.2 - 47.5)</td>
<td>↑↑</td>
<td>7</td>
</tr>
<tr>
<td>Overall</td>
<td>3093</td>
<td>33.4 (32.4 - 34.4)</td>
<td></td>
<td>236</td>
</tr>
</tbody>
</table>

↑↑ Statistically significantly higher or lower (p <0.05) than the other categories combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.

# Insufficient numbers for statistical tests

### Table 5.2: Utilisation of health services by health region, all ages

<table>
<thead>
<tr>
<th>Category</th>
<th>Specialist doctor - not in a hospital</th>
<th>Optometrist</th>
<th>District nurse or other community nurse</th>
<th>Chiropractor</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>(95% CI)</td>
<td>n</td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>371</td>
<td>8.3 (7.6 - 9.2)</td>
<td>↑</td>
<td>180</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>188</td>
<td>8.3 (7.2 - 9.6)</td>
<td></td>
<td>92</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>38</td>
<td>5.5 (4.0 - 7.6)</td>
<td>↓</td>
<td>21</td>
</tr>
<tr>
<td>Wakefield</td>
<td>37</td>
<td>5.7 (4.1 - 7.8)</td>
<td>↓</td>
<td>16</td>
</tr>
<tr>
<td>Mid North</td>
<td>11</td>
<td>6.2 (3.4 - 11.4)</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>Riverland</td>
<td>9</td>
<td>3.9 (2.0 - 7.8)</td>
<td>↓</td>
<td>4</td>
</tr>
<tr>
<td>South East</td>
<td>22</td>
<td>5.4 (3.4 - 8.1)</td>
<td></td>
<td>12</td>
</tr>
<tr>
<td>Eyre</td>
<td>13</td>
<td>6.6 (3.8 - 11.5)</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>15</td>
<td>6.6 (4.0 - 11.2)</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>Overall</td>
<td>703</td>
<td>7.6 (7.1 - 8.2)</td>
<td></td>
<td>337</td>
</tr>
</tbody>
</table>

↑↑ Statistically significantly higher or lower (p <0.05) than the other categories combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.

# Insufficient numbers for statistical tests
Table 5.3: Utilisation of psychologist/psychiatrist, alternative therapist or child health nurse /child & youth health worker or physiotherapist services by health region

<table>
<thead>
<tr>
<th>Health Region</th>
<th>Psychologist/psychiatrist (16 years and over)</th>
<th>Alternative therapist (all ages)</th>
<th>Child health nurse /Child &amp; youth health worker services (0 to 15 years)</th>
<th>Physiotherapist</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>(95% CI)</td>
<td>n</td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>70</td>
<td>2.0</td>
<td>(1.5 - 2.5)</td>
<td>89</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>42</td>
<td>2.3</td>
<td>(1.7 - 3.1)</td>
<td>67</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>3</td>
<td>0.6</td>
<td>-</td>
<td>#</td>
</tr>
<tr>
<td>Wakefield</td>
<td>4</td>
<td>0.7</td>
<td>-</td>
<td>#</td>
</tr>
<tr>
<td>Mid North</td>
<td>2</td>
<td>1.3</td>
<td>-</td>
<td>#</td>
</tr>
<tr>
<td>Riverland</td>
<td>3</td>
<td>2.0</td>
<td>-</td>
<td>#</td>
</tr>
<tr>
<td>South East</td>
<td>3</td>
<td>0.8</td>
<td>-</td>
<td>#</td>
</tr>
<tr>
<td>Eyre</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>#</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>2</td>
<td>1.1</td>
<td>-</td>
<td>#</td>
</tr>
<tr>
<td>Overall</td>
<td>128</td>
<td>1.7</td>
<td>(1.5 - 2.1)</td>
<td>219</td>
</tr>
</tbody>
</table>

Statistically significantly higher or lower (p <0.05) than the other categories combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.

# Insufficient numbers for statistical tests.
Table 5.4 and Table 5.5 show the utilisation of dental services by health region. There were no statistically significant differences observed between the health regions for respondents 5 to 15 years of age.

### Table 5.4: Utilisation of dental services by health region, 5 to 15 years

<table>
<thead>
<tr>
<th>Health Region</th>
<th>&lt;2 years ago</th>
<th>2 or more years ago</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>% (95% CI)</td>
<td>n</td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>582</td>
<td>94.9 (92.8 - 96.5)</td>
<td>13</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>295</td>
<td>93.2 (89.9 - 95.7)</td>
<td>13</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>110</td>
<td>95.3 (88.6 - 97.9)</td>
<td>4</td>
</tr>
<tr>
<td>Wakefield</td>
<td>104</td>
<td>97.9 (91.4 - 99.3)</td>
<td>-</td>
</tr>
<tr>
<td>Mid North</td>
<td>24</td>
<td>100.0 (82.8 - 100.0)</td>
<td>-</td>
</tr>
<tr>
<td>Riverland</td>
<td>42</td>
<td>96.5 (83.3 - 92.2)</td>
<td>1</td>
</tr>
<tr>
<td>South East</td>
<td>61</td>
<td>98.5 (92.6 - 100.0)</td>
<td>1</td>
</tr>
<tr>
<td>Eyre</td>
<td>35</td>
<td>96.3 (83.8 - 99.9)</td>
<td>-</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>35</td>
<td>92.8 (77.5 - 97.9)</td>
<td>1</td>
</tr>
<tr>
<td><strong>Overall</strong></td>
<td>1288</td>
<td>95.1 (93.8 - 96.2)</td>
<td>33</td>
</tr>
</tbody>
</table>

* Insufficient numbers for statistical tests.

Note: The weighting of data can result in rounding discrepancies or totals not adding.

The following statistically significant differences were observed between health regions for respondents aged 16 years and over using dental services:

- Overall, 69.0% (95% CI 68.0 – 70.1; n=5071) of respondents, aged 16 years and over, reported that they had been to the dentist in the past two years. Respondents living in the Central Northern Adelaide (71.3%) and the Southern Adelaide (71.6%) regions were statistically significantly more likely to have visited the dentist in the past two years while respondents living in the Hills Mallee (60.9%), Mid North (56.5%), Riverland (59.65), South East (62.6%) and the Northern and Far Western (53.5%) regions were statistically significantly less likely to have visited a dentist in the past two years.

- Overall, 22.1% (95% CI 21.2 – 23.1; n=1627) of respondents aged 16 years and over reported that they had last been to the dentist two or more years ago. Respondents living in the Central Northern Adelaide (20.8%) and Wakefield (18.5%) regions were statistically significantly less likely to have last visited the dentist two or more years ago. Hills Mallee (29.8%) and the Northern and Far Western (33.3%) regions were statistically significantly more likely to have last visited the dentist two or more years ago.
Overall, 8.7% (95% CI 8.1 - 9.4; n=638) of respondents aged 16 years and over reported that they have dentures or false teeth. Respondents living in the Central Northern Adelaide region (7.8%) were statistically significantly less likely to have dentures or false teeth while respondents living in the Mid North (16.7%), South East (11.8%) and Northern and Far Western (13.2%) regions were statistically significantly more likely to have dentures or false teeth.

Table 5.5: Utilisation of dental services by health region, 16 years and over

<table>
<thead>
<tr>
<th>Health Region</th>
<th>&lt;2 years ago</th>
<th>2 or more years ago</th>
<th>Dentures/ false teeth</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>% (95% CI)</td>
<td>n</td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>2534</td>
<td>71.3 (69.8 - 72.8)</td>
<td>739</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>1305</td>
<td>71.6 (69.5 - 73.7)</td>
<td>376</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>324</td>
<td>60.9 (56.6 - 65.0)</td>
<td>159</td>
</tr>
<tr>
<td>Wakefield</td>
<td>342</td>
<td>70.5 (66.2 - 74.5)</td>
<td>90</td>
</tr>
<tr>
<td>Mid North</td>
<td>78</td>
<td>56.5 (47.8 - 64.8)</td>
<td>36</td>
</tr>
<tr>
<td>Riverland</td>
<td>99</td>
<td>59.6 (51.7 - 67.1)</td>
<td>47</td>
</tr>
<tr>
<td>South East</td>
<td>202</td>
<td>62.6 (57.2 - 68.0)</td>
<td>82</td>
</tr>
<tr>
<td>Eyre</td>
<td>94</td>
<td>62.0 (54.0 - 70.0)</td>
<td>41</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>93</td>
<td>53.5 (45.8 - 61.0)</td>
<td>58</td>
</tr>
<tr>
<td>Overall</td>
<td>5071</td>
<td>69.0 (68.0 - 70.1)</td>
<td>1627</td>
</tr>
</tbody>
</table>

↑↓ Statistically significantly higher or lower (p <0.05) than the other categories combined.
# Insufficient data for statistical analysis.
Note: The weighting of data can result in rounding discrepancies or totals not adding.
CHAPTER 6: CO-MORBIDITY, INJURY, DISABILITY

This section reports on the prevalence of diabetes; current confirmed asthma; other respiratory problems (bronchitis, emphysema, chronic lung disease); cardio-vascular disease; arthritis; and osteoporosis. This section also reports on the prevalence of disability (i.e. the limitation on activities due to impairment or health problem), as well as the prevalence of injury from falls in the last 12 months.

6.1 Diabetes

Respondents aged 16 years and over (n=7346) were asked if they had ever been told by a doctor that they had diabetes. Overall, 5.6% (95% CI 5.1 – 6.2; n=415) of the respondents reported having been told by a doctor that they had diabetes. The proportion of respondents who reported that they have been told by a doctor that they had diabetes is shown in Table 6.1 by health region.

The Southern Adelaide region (4.7%) had a statistically significantly lower prevalence of diagnosed diabetes while the Northern and Far Western region (11.3%) had a statistically significantly higher prevalence of diagnosed diabetes.

Table 6.1: Prevalence of diabetes by health region, 16 years and over

<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>203</td>
<td>5.7</td>
<td>(5.0 – 6.5)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>85</td>
<td>4.7</td>
<td>(3.8 – 5.8)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>27</td>
<td>5.1</td>
<td>(3.4 – 7.2)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>30</td>
<td>6.2</td>
<td>(4.2 – 8.7)</td>
</tr>
<tr>
<td>Mid North</td>
<td>13</td>
<td>9.2</td>
<td>(5.3 – 15.9)</td>
</tr>
<tr>
<td>Riverland</td>
<td>7</td>
<td>4.3</td>
<td>(1.9 – 8.8)</td>
</tr>
<tr>
<td>South East</td>
<td>19</td>
<td>5.8</td>
<td>(3.7 – 9.2)</td>
</tr>
<tr>
<td>Eyre</td>
<td>11</td>
<td>7.0</td>
<td>(3.9 – 13.0)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>20</td>
<td>11.3</td>
<td>(7.3 – 17.4)</td>
</tr>
<tr>
<td>Overall</td>
<td>415</td>
<td>5.6</td>
<td>(5.1 – 6.2)</td>
</tr>
</tbody>
</table>

↑↓ - Statistically significantly higher or lower (p <0.05) than the other categories combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.
6.2 Current Confirmed Asthma

Information was collected, on people aged two years and over (n=9045), as to whether they had ever been told by a doctor that they had asthma, and had experienced symptoms (wheeze, shortness of breath or chest tightness) of asthma in the last 12 months, or had taken treatment for asthma in the last 12 months. Overall, 18.8% (95% CI 17.0 - 20.8; n=320) of the respondents aged 2 to 15 years reported having current confirmed asthma, and 13.8% (95% CI 13.0 – 14.6; n=1013) of the respondents aged 16 years and over reported having current confirmed asthma.

The Central Northern Adelaide region (16.3%) had a statistically significantly lower proportion of current confirmed asthma while the Northern and Far Western region (54.8%) had a statistically significantly higher proportion of current confirmed asthma in the two to 15 year age group.

### Table 6.2: Prevalence of Current Asthma by Health Region

<table>
<thead>
<tr>
<th></th>
<th>2 to 15 years</th>
<th>16 years and over</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>127</td>
<td>16.3</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>80</td>
<td>20.9</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>32</td>
<td>21.5</td>
</tr>
<tr>
<td>Wakefield</td>
<td>28</td>
<td>19.4</td>
</tr>
<tr>
<td>Mid North</td>
<td>2</td>
<td>5.9</td>
</tr>
<tr>
<td>Riverland</td>
<td>9</td>
<td>17.8</td>
</tr>
<tr>
<td>South East</td>
<td>14</td>
<td>17.9</td>
</tr>
<tr>
<td>Eyre</td>
<td>4</td>
<td>9.8</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>24</td>
<td>54.8</td>
</tr>
<tr>
<td>Overall</td>
<td>320</td>
<td>18.8</td>
</tr>
</tbody>
</table>

† † Statistically significantly (p <0.05) higher or lower than expected numbers based on the adjusted standardised residuals of >1.96 or <1.96.
Note: The weighting of data can result in rounding discrepancies or totals not adding.
# Insufficient numbers for statistical analysis.
6.3 Respiratory Problems

Respondents aged 16 years and over (n=7346) were asked if they had ever been told by a doctor that they have any other respiratory problems such as bronchitis, emphysema, or chronic lung disease that had lasted six months or more. Overall, 5.0% (95% CI 4.5 – 5.6; n=369) of the respondents reported having been told they have other respiratory problems lasting six months or more and 3.0% (95% CI 2.7 – 3.5; n=223) reported currently having at least one of these respiratory problems. The proportion of respondents who reported that they have or have ever had other respiratory problems is shown in Table 6.3 by health region.

There were no statistically significant differences in the proportion of respondents reporting respiratory problems between the health regions.

Table 6.3: Prevalence of other respiratory problems (bronchitis, emphysema, chronic lung disease) with a duration of six months or more by health region, 16 years and over

<table>
<thead>
<tr>
<th>Health Region</th>
<th>Ever had other respiratory problems</th>
<th>Current other respiratory problems</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>184</td>
<td>5.2</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>103</td>
<td>5.6</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>26</td>
<td>4.9</td>
</tr>
<tr>
<td>Wakefield</td>
<td>18</td>
<td>3.7</td>
</tr>
<tr>
<td>Mid North</td>
<td>11</td>
<td>7.6</td>
</tr>
<tr>
<td>Riverland</td>
<td>4</td>
<td>2.6</td>
</tr>
<tr>
<td>South East</td>
<td>13</td>
<td>4.0</td>
</tr>
<tr>
<td>Eyre</td>
<td>6</td>
<td>4.1</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>4</td>
<td>2.3</td>
</tr>
<tr>
<td>Overall</td>
<td>369</td>
<td>5.0</td>
</tr>
</tbody>
</table>

↑↓ Statistically significantly higher or lower (p <0.05) than the other categories combined.
Note: The weighting of data can result in rounding discrepancies or totals not adding.
# Insufficient numbers for statistical analysis.
6.4 Cardio-Vascular Disease

Respondents aged 16 years and over (n=7346) were asked if they had ever been told by a doctor that they have had any cardio-vascular problems such as heart attack, angina, heart disease or stroke. Overall, 7.7% (95% CI 7.1 – 8.3; n= 566) of the respondents reported having been told that they have had some form of cardio-vascular disease. The proportion of respondents who reported having cardio-vascular disease is shown in Table 6.4 by health regions.

There were no statistically significant differences observed in the proportion of respondents reporting cardiovascular disease between the health regions.

### Table 6.4: Prevalence of cardio-vascular disease by health region, 16 years and over

<table>
<thead>
<tr>
<th>Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>265</td>
<td>7.5</td>
<td>(6.6 – 8.4)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>157</td>
<td>8.6</td>
<td>(7.4 – 10.0)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>38</td>
<td>7.0</td>
<td>(5.2 – 9.8)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>37</td>
<td>7.7</td>
<td>(5.5 – 10.5)</td>
</tr>
<tr>
<td>Mid North</td>
<td>12</td>
<td>8.6</td>
<td>(4.8 – 15.0)</td>
</tr>
<tr>
<td>Riverland</td>
<td>8</td>
<td>4.7</td>
<td>(1.5 – 8.1)</td>
</tr>
<tr>
<td>South East</td>
<td>22</td>
<td>7.0</td>
<td>(4.4 – 10.3)</td>
</tr>
<tr>
<td>Eyre</td>
<td>13</td>
<td>8.4</td>
<td>(4.9 – 15.6)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>15</td>
<td>8.5</td>
<td>(5.1 – 14.1)</td>
</tr>
<tr>
<td>Overall</td>
<td>566</td>
<td>7.7</td>
<td>(7.1 – 8.3)</td>
</tr>
</tbody>
</table>

†↓ Statistically significantly higher or lower (p <0.05) than the other categories combined.
Note: The weighting of data can result in rounding discrepancies or totals not adding.
6.5 Arthritis

Respondents aged 16 years and over (n=7346) were asked if they had ever been told by a doctor that they had arthritis, including osteoarthritis, rheumatoid arthritis, juvenile rheumatoid arthritis (JRA), or any other type of arthritis. Overall, 21.5% (95% CI 20.5 – 22.4; n=1576) of respondents reported having been told that they have arthritis. The proportion of respondents who said that they had been told they had arthritis is shown in Table 6.5 by health region.

There were no statistically significant differences observed in the proportion of respondents reporting arthritis between the health regions.

Table 6.5: Prevalence of arthritis by health region, 16 years and over

<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>741</td>
<td>20.8</td>
<td>(19.5 – 22.2)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>393</td>
<td>21.6</td>
<td>(19.7 – 23.6)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>113</td>
<td>21.2</td>
<td>(19.8 – 25.0)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>117</td>
<td>24.1</td>
<td>(20.4 – 28.2)</td>
</tr>
<tr>
<td>Mid North</td>
<td>40</td>
<td>28.6</td>
<td>(21.6 – 37.3)</td>
</tr>
<tr>
<td>Riverland</td>
<td>35</td>
<td>21.1</td>
<td>(15.1 – 28.1)</td>
</tr>
<tr>
<td>South East</td>
<td>62</td>
<td>19.2</td>
<td>(15.2 – 24.1)</td>
</tr>
<tr>
<td>Eyre</td>
<td>34</td>
<td>22.2</td>
<td>(16.3 – 30.2)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>43</td>
<td>24.5</td>
<td>(18.6 – 31.9)</td>
</tr>
<tr>
<td>Overall</td>
<td>1576</td>
<td>21.5</td>
<td>(20.5 – 22.4)</td>
</tr>
</tbody>
</table>

Note: The weighting of data can result in rounding discrepancies or totals not adding.
6.6 Osteoporosis

Respondents aged 16 years and over (n=7346) were asked if they had ever been told by a doctor that they had osteoporosis. Overall, 3.5% (95% CI 3.1 – 4.0; n=259) of respondents reported having been told that they have osteoporosis. The proportion of respondents who said that they had been told they had osteoporosis is shown in Table 6.6 by health region.

There were no statistically significant differences observed in the proportion of respondents reporting osteoporosis between the health regions.

Table 6.6: Prevalence of osteoporosis by health region, 16 years and over

<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>135</td>
<td>3.8</td>
<td>(2.9 – 4.2)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>57</td>
<td>3.1</td>
<td>(2.4 – 4.1)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>18</td>
<td>3.5</td>
<td>(2.1 – 5.4)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>21</td>
<td>4.4</td>
<td>(2.8 – 6.7)</td>
</tr>
<tr>
<td>Mid North</td>
<td>4</td>
<td>3.0</td>
<td>#</td>
</tr>
<tr>
<td>Riverland</td>
<td>6</td>
<td>3.8</td>
<td>(1.5 – 8.1)</td>
</tr>
<tr>
<td>South East</td>
<td>9</td>
<td>2.8</td>
<td>(1.4 – 5.4)</td>
</tr>
<tr>
<td>Eyre</td>
<td>4</td>
<td>2.6</td>
<td>#</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>3</td>
<td>1.9</td>
<td>#</td>
</tr>
<tr>
<td>Overall</td>
<td>259</td>
<td>3.5</td>
<td>(3.1 – 4.0)</td>
</tr>
</tbody>
</table>

Note: The weighting of data can result in rounding discrepancies or totals not adding.
# Insufficient numbers for statistical tests.
6.7 Disability

Respondents aged 16 years and over (n=7346) were asked if they are limited in any way in any activities because of any impairment or health problem. Overall, 20.2% (95% CI 19.3 – 21.2; n=1487) of respondents reported having some kind of disability. The proportion of respondents who reported some kind of disability is shown in Table 6.7 by health region.

No statistically significant differences were observed for the prevalence of disability between health regions.

Table 6.7: Prevalence of disability (limitation in activities due to impairment or health problem) by health region, 16 years and over

<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>710</td>
<td>20.0</td>
<td>(18.7 – 21.3)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>386</td>
<td>21.2</td>
<td>(19.4 – 23.2)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>107</td>
<td>20.2</td>
<td>(16.8 – 23.8)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>89</td>
<td>18.4</td>
<td>(15.0 – 22.1)</td>
</tr>
<tr>
<td>Mid North</td>
<td>32</td>
<td>23.1</td>
<td>(16.6 – 31.3)</td>
</tr>
<tr>
<td>Riverland</td>
<td>28</td>
<td>16.8</td>
<td>(11.7 – 23.6)</td>
</tr>
<tr>
<td>South East</td>
<td>65</td>
<td>20.3</td>
<td>(16.0 – 25.1)</td>
</tr>
<tr>
<td>Eyre</td>
<td>32</td>
<td>21.4</td>
<td>(15.1 – 28.7)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>38</td>
<td>21.8</td>
<td>(16.1 – 28.9)</td>
</tr>
<tr>
<td>Overall</td>
<td>1487</td>
<td>20.2</td>
<td>(19.3 – 21.2)</td>
</tr>
</tbody>
</table>

Note: The weighting of data can result in rounding discrepancies or totals not adding.
6.8 Injury

Respondents aged 65 years and over (n=1338) were asked how many falls (including slips, trips and falls to the ground) they had in the past year. Overall, 34.8% (95% CI 32.2 – 37.3; n=465) of respondents reported falling at least once in the past year. The proportion of respondents who said they fell at least once is shown in Table 6.8 by health region.

There were no statistically significant differences in the proportion of respondents reporting falls between the health regions.

Table 6.8: Prevalence of injury (falls) in the past 12 months by health region, 65 years and over

<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>227</td>
<td>35.3</td>
<td>(31.6 – 39.2)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>131</td>
<td>38.8</td>
<td>(33.2 – 44.1)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>31</td>
<td>33.1</td>
<td>(24.4 – 44.4)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>29</td>
<td>30.8</td>
<td>(22.2 – 41.7)</td>
</tr>
<tr>
<td>Mid North</td>
<td>10</td>
<td>31.8</td>
<td>(16.2 – 48.9)</td>
</tr>
<tr>
<td>Riverland</td>
<td>5</td>
<td>19.4</td>
<td>(7.1 – 42.2)</td>
</tr>
<tr>
<td>South East</td>
<td>15</td>
<td>27.9</td>
<td>(16.5 – 41.6)</td>
</tr>
<tr>
<td>Eyre</td>
<td>7</td>
<td>28.0</td>
<td>(12.4 – 48.1)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>10</td>
<td>28.9</td>
<td>(15.1 – 47.5)</td>
</tr>
<tr>
<td>Overall</td>
<td>465</td>
<td>34.8</td>
<td>(32.2 – 37.3)</td>
</tr>
</tbody>
</table>

Note: The weighting of data can result in rounding discrepancies or totals not adding.
6.9 Multiple chronic conditions

Multiple health conditions were derived by the accumulation of the seven health conditions listed. These included diabetes, current asthma, other respiratory condition, cardiovascular disease, arthritis, osteoporosis and a self-reported mental health condition.

Overall, 53.6% (n=3935) of respondents aged 16 years and over reported that they had no chronic conditions, 30.5% (n=2241) had one chronic condition, 11.3% (n=828) had two chronic conditions, and 4.7% (n=342) had three to seven chronic conditions. The proportion of respondents, 16 years and over, with chronic conditions is shown in Table 6.9, by health regions.

There were no statistically significant differences observed in the proportion of multiple chronic conditions between the health regions.

Table 6.9: Prevalence of multiple chronic conditions by health region, 16 years and over

<table>
<thead>
<tr>
<th>Health Region</th>
<th>No chronic conditions</th>
<th>1-2 chronic conditions</th>
<th>3 - 7 chronic conditions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>% (95% CI)</td>
<td>n</td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>1899</td>
<td>53.4 (51.8 - 55.1)</td>
<td>1480</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>958</td>
<td>52.6 (50.3 - 54.9)</td>
<td>787</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>296</td>
<td>55.7 (51.3 - 59.9)</td>
<td>214</td>
</tr>
<tr>
<td>Wakefield</td>
<td>261</td>
<td>53.7 (49.3 - 58.3)</td>
<td>198</td>
</tr>
<tr>
<td>Mid North</td>
<td>67</td>
<td>48.5 (40.0 - 57.2)</td>
<td>58</td>
</tr>
<tr>
<td>Riverland</td>
<td>101</td>
<td>60.8 (52.9 - 68.2)</td>
<td>59</td>
</tr>
<tr>
<td>South East</td>
<td>181</td>
<td>56.2 (50.6 - 61.7)</td>
<td>132</td>
</tr>
<tr>
<td>Eyre</td>
<td>80</td>
<td>53.0 (44.7 - 61.1)</td>
<td>64</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>92</td>
<td>52.5 (45.2 - 60.4)</td>
<td>78</td>
</tr>
<tr>
<td>Total</td>
<td>3935</td>
<td>53.6 (52.4 - 54.7)</td>
<td>3069</td>
</tr>
</tbody>
</table>

Note: The weighting of data can result in rounding discrepancies or totals not adding.
CHAPTER 7: HEALTH RELATED RISK FACTORS

This section of the report covers the following health related risk factors:

- High blood pressure;
- High cholesterol;
- Body mass index (BMI) – underweight, normal, overweight and obese;
- Smoking;
- Alcohol;
- Sunburn;
- Nutrition; and
- Physical activity.

7.1 High Blood Pressure

Respondents aged 20 to 64 years (n=5497) were asked a series of questions relating to high blood pressure. Overall, 21.0% (95% CI 19.9 – 22.1, n=1153) of the respondents reported ever having high blood pressure. The proportion of respondents who reported ever having high blood pressure is shown in Table 7.1 by health region and proportion of respondents who currently have high blood pressure is shown in Table 7.2.

Respondents in the Central Northern Adelaide region (19.2%) were statistically significantly less likely to have ever been told that they have high blood pressure while respondents living in the Northern and Far Western region (31.5%) were statistically significantly more likely to have ever been told that they have high blood pressure.

Table 7.1: Prevalence of 'ever having' high blood pressure by health region, 20 to 64 years

<table>
<thead>
<tr>
<th>Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>514</td>
<td>19.2</td>
<td>(17.8 – 20.8)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>284</td>
<td>20.9</td>
<td>(18.8 – 23.2)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>97</td>
<td>24.5</td>
<td>(20.3 – 29.0)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>79</td>
<td>22.7</td>
<td>(18.4 – 27.5)</td>
</tr>
<tr>
<td>Mid North</td>
<td>24</td>
<td>23.6</td>
<td>(16.1 – 33.5)</td>
</tr>
<tr>
<td>Riverland</td>
<td>29</td>
<td>20.9</td>
<td>(14.7 – 28.9)</td>
</tr>
<tr>
<td>South East</td>
<td>59</td>
<td>24.4</td>
<td>(19.0 – 30.1)</td>
</tr>
<tr>
<td>Eyre</td>
<td>27</td>
<td>23.6</td>
<td>(16.6 – 33.0)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>40</td>
<td>31.5</td>
<td>(23.5 – 40.1)</td>
</tr>
<tr>
<td>Overall</td>
<td>1153</td>
<td>21.0</td>
<td>(19.9 – 22.1)</td>
</tr>
</tbody>
</table>

↑↓ Statistically significantly higher or lower (p <0.05) than the other categories combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.
Overall, 6.6% (95% CI 6.0 – 7.3, n=365) reported currently having high blood pressure. The proportion of respondents who reported current high blood pressure is shown in Table 7.2.

Respondents living in the Mid North region (11.8%) had a statistically significantly higher prevalence of current high blood pressure.

Table 7.2: Prevalence of current high blood pressure by health region, 20 to 64 years

<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>168</td>
<td>6.3</td>
<td>(5.4 – 7.3)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>84</td>
<td>6.2</td>
<td>(5.0 – 7.6)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>31</td>
<td>7.8</td>
<td>(5.4 – 11.0)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>23</td>
<td>6.5</td>
<td>(4.3 – 9.9)</td>
</tr>
<tr>
<td>Mid North</td>
<td>12</td>
<td>11.8</td>
<td>(6.6 – 20.2) ↑</td>
</tr>
<tr>
<td>Riverland</td>
<td>7</td>
<td>5.2</td>
<td>(2.2 – 10.6)</td>
</tr>
<tr>
<td>South East</td>
<td>19</td>
<td>7.8</td>
<td>(4.9 – 12.1)</td>
</tr>
<tr>
<td>Eyre</td>
<td>12</td>
<td>11.1</td>
<td>(5.8 – 18.2)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>9</td>
<td>7.3</td>
<td>(3.5 – 13.3)</td>
</tr>
<tr>
<td>Overall</td>
<td>365</td>
<td>6.6</td>
<td>(6.0 – 7.3)</td>
</tr>
</tbody>
</table>

↑↓ Statistically significantly higher or lower (p <0.05) than the other categories combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.
7.2 High Cholesterol

Respondents aged 20 to 64 years (n=5497) were asked a series of questions related to cholesterol. Overall, 19.1% (95% CI 18.1 – 20.2, n=1048) of the respondents reported ever being told that they have high cholesterol. The proportion of respondents who reported ever having high cholesterol is shown in Table 7.3 by health region.

There were no statistically significant differences observed in the prevalence of ever having high cholesterol between regions.

Table 7.3: Respondents reporting ever having been told that they have high cholesterol by health region, 20 to 64 years

<table>
<thead>
<tr>
<th>Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>510</td>
<td>19.1</td>
<td>(17.7 – 20.7)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>280</td>
<td>20.7</td>
<td>(18.6 – 23.0)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>79</td>
<td>20.0</td>
<td>(16.1 – 24.2)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>60</td>
<td>17.1</td>
<td>(13.5 – 21.6)</td>
</tr>
<tr>
<td>Mid North</td>
<td>20</td>
<td>19.4</td>
<td>(12.8 – 29.2)</td>
</tr>
<tr>
<td>Riverland</td>
<td>21</td>
<td>15.1</td>
<td>(9.9 – 22.6)</td>
</tr>
<tr>
<td>South East</td>
<td>38</td>
<td>15.5</td>
<td>(11.4 – 21.0)</td>
</tr>
<tr>
<td>Eyre</td>
<td>19</td>
<td>16.4</td>
<td>(10.7 – 25.3)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>22</td>
<td>17.1</td>
<td>(11.3 – 25.1)</td>
</tr>
<tr>
<td>Overall</td>
<td>1048</td>
<td>19.1</td>
<td>(18.1 – 20.2)</td>
</tr>
</tbody>
</table>

Note: The weighting of data can result in rounding discrepancies or totals not adding.
Note: 9 cases missing.

Overall, 6.1% (95% CI 5.5 – 6.8, n=337) of the respondents reported currently having high cholesterol. The proportion of respondents who reported currently having high cholesterol is shown in Table 7.4 by health region.

There were no statistically significant differences in the proportion of respondents reporting current high cholesterol between the regions.
Table 7.4: Prevalence of current high cholesterol by health region, 20 to 64 years

<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>149</td>
<td>5.6</td>
<td>(4.7 – 6.5)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>93</td>
<td>6.9</td>
<td>(5.6 – 8.4)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>25</td>
<td>6.2</td>
<td>(4.1 – 9.2)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>23</td>
<td>6.7</td>
<td>(4.3 – 9.9)</td>
</tr>
<tr>
<td>Mid North</td>
<td>7</td>
<td>6.9</td>
<td>(3.0 – 14.2)</td>
</tr>
<tr>
<td>Riverland</td>
<td>8</td>
<td>5.6</td>
<td>(2.7 – 11.5)</td>
</tr>
<tr>
<td>South East</td>
<td>15</td>
<td>6.3</td>
<td>(3.6 – 10.2)</td>
</tr>
<tr>
<td>Eyre</td>
<td>5</td>
<td>4.8</td>
<td>(1.6 – 10.5)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>12</td>
<td>9.1</td>
<td>(5.2 – 16.1)</td>
</tr>
<tr>
<td>Overall</td>
<td>337</td>
<td>6.1</td>
<td>(5.5 – 6.8)</td>
</tr>
</tbody>
</table>

Note: The weighting of data can result in rounding discrepancies or totals not adding.
7.3 Body mass index (BMI)

Respondents aged 18 years and over (n=6688) were asked for their height and weight. These measurements were then used to calculate body mass index (BMI). The formula for the calculation of BMI, according to World Health Organisation (WHO) criteria\(^5\): shown in Table 7.5, is as follows:

\[
\text{weight (kg) / height (m)}^2.
\]

Table 7.5: WHO BMI Criteria

<table>
<thead>
<tr>
<th>Descriptive term</th>
<th>BMI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Underweight</td>
<td>&lt;18.5</td>
</tr>
<tr>
<td>Normal weight</td>
<td>18.5 – 24.9</td>
</tr>
<tr>
<td>Overweight</td>
<td>25.0 – 29.9</td>
</tr>
<tr>
<td>Obese</td>
<td>30.0 +</td>
</tr>
</tbody>
</table>

The proportion of respondents who are determined to be underweight or normal according to the BMI classification is shown in Table 7.6, by health region. Overall, 2.5% (95% CI 2.1 – 2.9, n=166) of respondents were classified as being underweight, and 42.7% (95% CI 41.6 – 43.9, n=2859) of respondents were classified as being normal weight.

Respondents, 18 years and over, living in the Central Northern Adelaide region were statistically significantly more likely to be classified in the underweight range (3.0%) and the normal range (45.0%). Respondents living in the Riverland (29.4%), South East (36.1%) and Northern and Far Western (34.2%) regions were statistically significantly less likely to be classified in the normal weight range.
## Table 7.6: Self reported BMI, underweight or normal, by health region, 18 years and over

<table>
<thead>
<tr>
<th>Region</th>
<th>Underweight</th>
<th>Normal</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>% (95% CI)</td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>99</td>
<td>3.0 (2.5 – 3.7)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>39</td>
<td>2.4 (1.7 – 3.2)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>7</td>
<td>1.6 (0.7 – 3.3)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>9</td>
<td>2.0 (1.0 – 3.9)</td>
</tr>
<tr>
<td>Mid North</td>
<td>2</td>
<td>1.4 #</td>
</tr>
<tr>
<td>Riverland</td>
<td>2</td>
<td>1.4 #</td>
</tr>
<tr>
<td>South East</td>
<td>5</td>
<td>1.8 (0.6 – 4.2)</td>
</tr>
<tr>
<td>Eyre</td>
<td>1</td>
<td>0.6 #</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>2</td>
<td>1.3 #</td>
</tr>
<tr>
<td>Overall</td>
<td>166</td>
<td>2.5 (2.1 – 2.9)</td>
</tr>
</tbody>
</table>

↑↓ - Statistically significantly higher or lower (p <0.05) than the other categories combined.

# Insufficient numbers for statistical tests

Note: The weighting of data can result in rounding discrepancies or totals not adding.

The proportion of respondents, by region, who were overweight or obese according to the BMI classification is shown in Table 7.7. Overall, 36.3% (95% CI 35.2 – 37.5, n=2428) of respondents were overweight, and 18.5% (95% CI 17.5 – 19.4, n=1235) of respondents were obese.

Respondents, 18 years and over, living in the Central Northern Adelaide region were statistically significantly less likely to be overweight (34.5%) or obese (17.5%). Respondents living in the Mid North region (47.2%) were statistically significantly more likely to be overweight and respondents living in the Riverland (27.7%), South East (26.8%) and Northern and Far Western (26.1%) regions were statistically significantly more likely to be obese.

## Table 7.7: Self Reported BMI, overweight or obese, by health region, 18 years and over

<table>
<thead>
<tr>
<th>Region</th>
<th>Overweight</th>
<th>Obese</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>% (95% CI)</td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>1126</td>
<td>34.5 (32.9 – 36.2)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>610</td>
<td>36.9 (34.6 – 39.3)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>172</td>
<td>37.6 (33.3 – 42.4)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>175</td>
<td>39.3 (34.6 – 43.9)</td>
</tr>
<tr>
<td>Mid North</td>
<td>61</td>
<td>47.2 (38.4 – 56.3)</td>
</tr>
<tr>
<td>Riverland</td>
<td>63</td>
<td>41.4 (33.3 – 49.4)</td>
</tr>
<tr>
<td>South East</td>
<td>101</td>
<td>35.3 (29.6 – 40.9)</td>
</tr>
<tr>
<td>Eyre</td>
<td>56</td>
<td>41.1 (32.8 – 49.9)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>64</td>
<td>38.4 (31.1 – 46.4)</td>
</tr>
<tr>
<td>Overall</td>
<td>2428</td>
<td>36.3 (35.2 – 37.5)</td>
</tr>
</tbody>
</table>

↑↓ - Statistically significantly higher or lower (p <0.05) than the other categories combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.
7.4 Smoking

Respondents aged 16 years and over (n=7346) were asked a series of questions relating to smoking. Overall, 20.2% (95% CI 19.3 – 21.1, n=1483) of the respondents reported being current smokers. The proportion of respondents who reported being current smokers is shown in Table 7.8, by health region.

There were no statistically significant differences observed for current smokers between the regions.

Table 7.8: Prevalence of current smokers by health region, 16 years and over

<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>735</td>
<td>20.7</td>
<td>(19.4 – 22.1)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>334</td>
<td>18.3</td>
<td>(16.6 – 20.2)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>113</td>
<td>21.3</td>
<td>(17.9 – 25.0)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>95</td>
<td>19.6</td>
<td>(16.2 – 23.5)</td>
</tr>
<tr>
<td>Mid North</td>
<td>24</td>
<td>17.4</td>
<td>(12.3 – 25.8)</td>
</tr>
<tr>
<td>Riverland</td>
<td>39</td>
<td>23.4</td>
<td>(17.4 – 30.8)</td>
</tr>
<tr>
<td>South East</td>
<td>73</td>
<td>22.6</td>
<td>(18.3 – 27.7)</td>
</tr>
<tr>
<td>Eyre</td>
<td>42</td>
<td>28.0</td>
<td>(21.0 – 35.8)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>28</td>
<td>16.0</td>
<td>(11.1 – 22.6)</td>
</tr>
<tr>
<td>Overall</td>
<td>1483</td>
<td>20.2</td>
<td>(19.3 – 21.1)</td>
</tr>
</tbody>
</table>

†† Statistically significantly higher or lower (p <0.05) than the other categories combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.
Note: One case missing.
7.5 Alcohol Consumption

Respondents aged 16 years and over (n=7346) were asked a series of questions related to alcohol consumption. These data were then used to calculate the risk of harm from alcohol in the short term and long term. The calculations were made based on an Australian Standard Drink and according to the NH&MRC guidelines\(^6\) and the World Health Organization’s International Guide for Monitoring Alcohol Consumption and Related Harm\(^7\), which calculates risk of harm in terms of alcohol consumption\(^8,9\). Table 7.9 provides a summary of these new guidelines for short and long term risk.

Table 7.9: For risk of harm from alcohol in the short and long term

<table>
<thead>
<tr>
<th>Number of standard drinks</th>
<th>Low Risk</th>
<th>Risky</th>
<th>High Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SHORT TERM HARM</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>MALES</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>On any one day</td>
<td>Up to 6</td>
<td>7 to 10</td>
<td>11 or more</td>
</tr>
<tr>
<td><strong>FEMALES</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>On any one day</td>
<td>Up to 4</td>
<td>5 to 6</td>
<td>7 or more</td>
</tr>
<tr>
<td><strong>LONG TERM HARM</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>MALES</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>On an average day</td>
<td>Up to 4 per day.</td>
<td>5 to 6 per day.</td>
<td>7 or more per day.</td>
</tr>
<tr>
<td>Overall weekly level</td>
<td>Up to 28 per week.</td>
<td>29 to 42 per week.</td>
<td>43 or more per week.</td>
</tr>
<tr>
<td><strong>FEMALES</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>On an average day</td>
<td>Up to 2 per day.</td>
<td>3 to 4 per day.</td>
<td>5 or more per day.</td>
</tr>
<tr>
<td>Overall weekly level</td>
<td>Up to 14 per week.</td>
<td>15 to 28 per week.</td>
<td>29 or more per week.</td>
</tr>
</tbody>
</table>

Overall, 8.6% (95% CI 7.9 – 9.2; n=629) of the respondents were classified to be at risk of harm from alcohol in the short term (risky & high risk) and 22.8% (95% CI 21.9 – 23.8; n=1677) of the respondents were classified as being at risk of harm from alcohol in the long term (risky & high risk). The proportion of respondents who were at risk of harm from alcohol (risky & high risk) in the short term and long term is shown in Table 7.10 by health region.

Respondents living in the Central Northern Adelaide region were statistically significantly less likely to be at risk of harm in the short term (7.9%) and the long term (21.7%) while respondents living in the Northern and Far Western region were statistically significantly more likely to be at risk of harm in the short term (19.2%) and the long term (37.9%).

42
Table 7.10: Risk of harm from alcohol (risky & high risk) in the short and long term by health region, 16 years and over

<table>
<thead>
<tr>
<th>Health Region</th>
<th>Short term risk of harm</th>
<th></th>
<th>Long term risk of harm</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>(95% CI)</td>
<td>n</td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>279</td>
<td>7.9</td>
<td>(7.0 – 8.8)</td>
<td>↓ 773</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>146</td>
<td>8.0</td>
<td>(6.8 – 9.4)</td>
<td>↓ 411</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>40</td>
<td>7.5</td>
<td>(5.5 – 10.2)</td>
<td>↓ 120</td>
</tr>
<tr>
<td>Wakefield</td>
<td>50</td>
<td>10.2</td>
<td>(7.8 – 13.4)</td>
<td>116</td>
</tr>
<tr>
<td>Mid North</td>
<td>18</td>
<td>12.8</td>
<td>(8.1 – 20.1)</td>
<td>32</td>
</tr>
<tr>
<td>Riverland</td>
<td>15</td>
<td>9.3</td>
<td>(5.3 – 14.7)</td>
<td>33</td>
</tr>
<tr>
<td>South East</td>
<td>31</td>
<td>9.7</td>
<td>(6.7 – 13.5)</td>
<td>85</td>
</tr>
<tr>
<td>Eyre</td>
<td>17</td>
<td>11.2</td>
<td>(6.9 – 17.8)</td>
<td>41</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>33</td>
<td>19.2</td>
<td>(13.6 – 25.8)</td>
<td>↑ 66</td>
</tr>
<tr>
<td>Overall</td>
<td>629</td>
<td>8.6</td>
<td>(7.9 – 9.2)</td>
<td>1677</td>
</tr>
</tbody>
</table>

↑↓: Statistically significantly higher or lower (p < 0.05) than the other categories combined.
Note: The weighting of data can result in rounding discrepancies or totals not adding.
Note: 6 cases missing.
7.6 Sunburn

Respondents of all ages (n=9265) were asked if they had been sunburned in the last 12 months (even just nose or shoulders). The proportion of respondents who reported being sunburned at least once in the last twelve months is shown in Table 7.11, by health region. Overall, 49.2% (95% CI 48.2 – 50.3, n=4561) of the respondents reported getting sunburned in the last 12 months.

Respondents from the Central Northern Adelaide region (46.2%) were statistically significantly less likely to have been sunburnt while respondents from the Hills Mallee (55.2%), South East (54.9%) and Eyre (57.1%) regions were statistically significantly more likely to have been sunburnt.

Table 7.11: Prevalence of self-reported sunburn, within the last 12 months, by health region

<table>
<thead>
<tr>
<th>Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
<th>Significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>2056</td>
<td>46.2</td>
<td>(44.8 – 47.7)</td>
<td>↓</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>1145</td>
<td>50.7</td>
<td>(48.6 – 52.8)</td>
<td></td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>381</td>
<td>55.2</td>
<td>(51.4 – 59.0)</td>
<td>↑</td>
</tr>
<tr>
<td>Wakefield</td>
<td>336</td>
<td>51.8</td>
<td>(47.8 – 55.6)</td>
<td></td>
</tr>
<tr>
<td>Mid North</td>
<td>86</td>
<td>49.5</td>
<td>(42.0 – 57.4)</td>
<td></td>
</tr>
<tr>
<td>Riverland</td>
<td>103</td>
<td>46.6</td>
<td>(39.9 – 53.4)</td>
<td></td>
</tr>
<tr>
<td>South East</td>
<td>227</td>
<td>54.9</td>
<td>(49.9 – 59.7)</td>
<td>↑</td>
</tr>
<tr>
<td>Eyre</td>
<td>110</td>
<td>57.1</td>
<td>(49.7 – 64.1)</td>
<td>↑</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>117</td>
<td>52.9</td>
<td>(46.1 – 59.7)</td>
<td></td>
</tr>
<tr>
<td>Overall</td>
<td>4561</td>
<td>49.2</td>
<td>(48.2 – 50.3)</td>
<td></td>
</tr>
</tbody>
</table>

↑↓ - Statistically significantly higher or lower (p <0.05) than the other categories combined.
Note: The weighting of data can result in rounding discrepancies or totals not adding.
7.7 Nutrition

A series of short questions were asked regarding the consumption of foods that contribute to nutrient intake (vegetables, fruit, bread, cereals and cereal products) and the consumption of foods that contribute to the intake of fat and saturated fat (milk and meat products such as sausages).

7.7.1 Vegetable Consumption

Respondents aged four years and over (n=8813) were asked how many serves of vegetables they ate per day. Table 7.12 shows the NH&MRC guidelines\textsuperscript{10,11} for the recommended daily intake of vegetables, according to age.

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Recommended Intake</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 – 7 years</td>
<td>2 to 4 serves per day</td>
</tr>
<tr>
<td>8 – 11 years</td>
<td>3 to 5 serves per day</td>
</tr>
<tr>
<td>12 – 15 years</td>
<td>4 or more serves per day</td>
</tr>
<tr>
<td>16 years and over</td>
<td>5 or more serves per day</td>
</tr>
</tbody>
</table>

The proportion of respondents who reported eating the recommended serves of vegetables per day is shown in Table 7.13, by health region.

Overall 28.7% (95% CI 26.4 – 31.1; n=421) of respondents, aged 4 to 15 years, reported eating the NH&MRC recommended serves of vegetables per day for their age group as shown in Table 7.13 with the individual age groups shown below.

- Overall, 51.4% (95% CI 46.8 – 56.0; n=243) of respondents, age four to seven years, reported eating less than two serves of vegetables per day and 47.0% (95% CI 42.4 – 51.5; n=222) reported eating two or more serves per day.
- Overall 24.8% (95% CI 21.3 – 28.8; n=133) respondents, eight to 11 years, reported eating three or more serves of vegetables per day and 73.4% (95% CI 69.3 – 76.9; n=392) reported eating less than three serves of vegetables per day.
- Overall 14.4% (95% CI 11.4 – 18.0; n=66) respondents, 12 to 15 years, reported eating four or more serves of vegetables per day and 83.2% (95% CI 79.4 – 86.5; n=382) reported eating less than four serves of vegetables per day.
Children, aged 4 to 15 years, living in the Hills Mallee (42.1%) and the Riverland (47.4%) regions were statistically significantly more likely to eat the recommended serves of vegetables per day.

**Table 7.13: Respondents who met the NH&MRC recommendations for vegetable consumption per day, 4 to 15 years**

<table>
<thead>
<tr>
<th>Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>178</td>
<td>26.3</td>
<td>(21.3 – 29.9)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>95</td>
<td>28.1</td>
<td>(23.4 – 33.3)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>51</td>
<td>42.1</td>
<td>(33.0 – 51.1)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>38</td>
<td>32.9</td>
<td>(24.7 – 42.5)</td>
</tr>
<tr>
<td>Mid North</td>
<td>5</td>
<td>16.5</td>
<td>(6.1 – 34.5)</td>
</tr>
<tr>
<td>Riverland</td>
<td>21</td>
<td>47.4</td>
<td>(31.9 – 62.0)</td>
</tr>
<tr>
<td>South East</td>
<td>13</td>
<td>19.4</td>
<td>(11.0 – 30.8)</td>
</tr>
<tr>
<td>Eyre</td>
<td>7</td>
<td>19.4</td>
<td>(8.6 – 35.7)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>13</td>
<td>34.8</td>
<td>(20.1 – 51.4)</td>
</tr>
<tr>
<td>Overall</td>
<td>421</td>
<td>28.7</td>
<td>(26.4 – 31.1)</td>
</tr>
</tbody>
</table>

↑↓ Statistically significantly higher or lower (p <0.05) than the rest combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.

Overall, 25.4% (95% CI 24.4 – 26.4; n=1866) of respondents, aged 16 years and over, reported that they ate less than two serves of vegetables per day, 67.0% (95% CI 65.9 – 68.1; n=4923) reported that they ate two to four serves of vegetables per day and 7.0% (95% CI 6.41 – 7.6; n=511) reported that they ate five or more serves of vegetables per day.

Respondents, aged 16 years and over, living in the Hills Mallee (9.9%), Mid North (13.3%) and the Northern and Far Western (10.9%) regions were statistically significantly more likely to consume five or more serves of vegetables per day. Respondents living in the Wakefield (73.1%) and South East (72.9%) regions were statistically significantly more likely to consume two to four serves of vegetables per day while those living in the Central Northern Adelaide (65.7%) region were less likely to eat two to four serves of vegetables per day. Respondents living in the Wakefield (19.3%) and South East (19.5%) regions were statistically significantly less likely to eat less than two serves of vegetables per day while respondents living in the Central Northern Adelaide region (27.0%) were statistically significantly more likely to eat less than two serves of vegetables per day.
<table>
<thead>
<tr>
<th>Region</th>
<th>&lt;2 serves of vegetables per day</th>
<th>2 to 4 serves of vegetables per day</th>
<th>5 or more serves of vegetables per day</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>(95% CI)</td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>960</td>
<td>27.0</td>
<td>(24.6 - 28.5)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>473</td>
<td>26.0</td>
<td>(24.0 – 28.1)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>129</td>
<td>24.2</td>
<td>(20.6 - 28.0)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>94</td>
<td>19.3</td>
<td>(16.1 - 23.2)</td>
</tr>
<tr>
<td>Mid North</td>
<td>31</td>
<td>22.3</td>
<td>(16.0 - 30.5)</td>
</tr>
<tr>
<td>Riverland</td>
<td>39</td>
<td>23.7</td>
<td>(17.4 - 30.8)</td>
</tr>
<tr>
<td>South East</td>
<td>63</td>
<td>19.5</td>
<td>(15.5 - 24.4)</td>
</tr>
<tr>
<td>Eyre</td>
<td>34</td>
<td>22.3</td>
<td>(16.3 - 30.2)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>44</td>
<td>25.3</td>
<td>(19.2 - 32.5)</td>
</tr>
<tr>
<td>Overall</td>
<td>1866</td>
<td>25.4</td>
<td>(24.4 - 26.4)</td>
</tr>
</tbody>
</table>

↑↓ Statistically significantly higher or lower (p <0.05) than the other categories combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.
7.7.2 Fruit Consumption

Respondents aged four years and over (n=8813) were asked how many serves of fruit they ate per day. The NH&MRC guidelines\textsuperscript{10,11} for the recommended daily intake of fruit, according to age, are shown in Table 7.15.

<table>
<thead>
<tr>
<th>Age Group</th>
<th>NH&amp;MRC Guidelines for Daily Fruit Intake</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 – 7 years</td>
<td>1 to 2 serves per day</td>
</tr>
<tr>
<td>8 – 11 years</td>
<td>1 to 2 serves per day</td>
</tr>
<tr>
<td>12 – 15 years</td>
<td>3 or more serves per day</td>
</tr>
<tr>
<td>16 years and over</td>
<td>2 or more serves per day</td>
</tr>
</tbody>
</table>

Table 7.15: NH&MRC guidelines for daily fruit intake, by age group

Overall, 10.2% (95% CI 8.7 – 11.8; n=149) of respondents aged 4 to 15 years, reported eating one serve or less of fruit per day, 68.0% (95% CI 65.6 – 70.4; n=998) reported eating one to two serves of fruit per day and 19.4% (95% CI 17.5 – 21.6; n=285) reported eating three or more serves of fruit per day, as shown in Table 7.16 by health region.

Respondents, aged 4 to 15 years, from the Northern and Far Western region (30.5%) were statistically significantly more likely to eat one serve or less of fruit per day.

<table>
<thead>
<tr>
<th>Health Region</th>
<th>Less than 1 serve</th>
<th>1 to 2 serves</th>
<th>3 or more serves</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n, % (95% CI)</td>
<td>n, % (95% CI)</td>
<td>n, % (95% CI)</td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>71, 10.5 (98.4 - 13.1)</td>
<td>452, 66.9 (63.3 - 70.5)</td>
<td>132, 19.6 (16.7 - 22.8)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>36, 10.7 (7.7 - 14.6)</td>
<td>233, 69.0 (63.7 - 73.8)</td>
<td>64, 18.8 (15.0 - 23.6)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>8, 6.8 (3.1 - 12.9)</td>
<td>88, 72.5 (63.2 - 79.7)</td>
<td>23, 18.8 (12.6 - 27.2)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>6, 5.2 (2.1 - 11.5)</td>
<td>79, 69.2 (59.3 - 76.8)</td>
<td>28, 24.4 (17.0 - 33.4)</td>
</tr>
<tr>
<td>Mid North</td>
<td>1, 1.9 #</td>
<td>21, 69.4 (48.5 - 82.7)</td>
<td>9, 28.6 (14.9 - 48.2)</td>
</tr>
<tr>
<td>Riverland</td>
<td>4, 8.4 #</td>
<td>28, 63.3 (46.5 - 75.8)</td>
<td>9, 20.5 (10.1 - 35.1)</td>
</tr>
<tr>
<td>South East</td>
<td>9, 13.2 (6.6 - 24.1)</td>
<td>53, 77.3 (65.9 - 86.7)</td>
<td>6, 9.5 (3.6 - 18.9)</td>
</tr>
<tr>
<td>Eyre</td>
<td>3, 8.6 #</td>
<td>24, 64.2 (47.4 - 79.3)</td>
<td>10, 27.2 (14.4 - 44.4)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>11, 30.5 (16.0 - 46.1) ‡</td>
<td>20, 54.0 (36.0 - 68.7)</td>
<td>4, 10.1 #</td>
</tr>
<tr>
<td>Overall</td>
<td>149, 10.2 (8.7 - 11.8) ‡</td>
<td>998, 68.0 (65.6 - 70.4)</td>
<td>285, 19.4 (17.5 - 21.6)</td>
</tr>
</tbody>
</table>

† ‡ Statistically significantly higher or lower (p <0.05) than the other categories combined.
# Insufficient numbers for statistical tests.
Note: The weighting of data can result in rounding discrepancies or totals not adding.
Overall, 52.8% (95% CI 51.6 – 53.9; n=3875) of respondents aged 16 years and over, reported eating one serve or less of fruit per day and 24.9% (95% CI 23.9 – 25.9; n=1830) reported eating one to two serves of fruit per day and 16.0% (95% CI 15.1 – 16.8; n=1172) reported eating three or more serves of fruit per day, as shown in Table 7.17 by health region.

Respondents aged 16 years and over, living in the Central Northern Adelaide region were statistically significantly more likely to eat three or more (16.9%) or two (26.2%) serves of fruit per day and less likely to eat one serve or less of fruit per day (50.5%). Respondents living in the Hills Mallee (19.7%) and Riverland (16.1%) regions were statistically significantly less likely to eat two serves of fruit. Respondents from the Eyre region were more likely to eat one serve or less of fruit (65.5%) and less likely to eat three or more serves of fruit per day (9.1%).

Table 7.17: Serves of fruit eaten per day by health region, 16 years and over

<table>
<thead>
<tr>
<th>Health Region</th>
<th>1 serve or less</th>
<th>2 serves</th>
<th>3 or more serves</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>(95% CI)</td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>1796</td>
<td>50.5</td>
<td>(48.9 - 52.2)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>971</td>
<td>53.3</td>
<td>(51.0 - 55.6)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>300</td>
<td>56.3</td>
<td>(52.1 - 60.6)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>269</td>
<td>55.4</td>
<td>(50.9 - 60.0)</td>
</tr>
<tr>
<td>Mid North</td>
<td>69</td>
<td>49.7</td>
<td>(41.4 - 58.6)</td>
</tr>
<tr>
<td>Riverland</td>
<td>96</td>
<td>57.9</td>
<td>(49.9 - 65.4)</td>
</tr>
<tr>
<td>South East</td>
<td>174</td>
<td>54.1</td>
<td>(48.4 - 59.6)</td>
</tr>
<tr>
<td>Eyre</td>
<td>99</td>
<td>65.5</td>
<td>(57.3 - 73.0)</td>
</tr>
<tr>
<td>Northern &amp; Far West</td>
<td>101</td>
<td>58.1</td>
<td>(50.3 - 65.4)</td>
</tr>
<tr>
<td>Overall</td>
<td>3875</td>
<td>52.8</td>
<td>(51.6 - 53.9)</td>
</tr>
</tbody>
</table>

† ‡ Statistically significantly higher or lower (p <0.05) than the other categories combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.
7.7.3 Potato consumption

Respondents aged 16 years and over (n=3728) were asked how often they ate potato chips, french fries, wedges, fried potatoes or crisps. Overall, 23.5% (95% CI 22.1 – 24.9; n=875) of the respondents reported rarely or never eating fried potatoes, french fries, wedges or crisps while 2.5% (95% CI 2.1 - 3.1; n=94) of respondents ate potatoes five or more times per week.

The proportion of respondents who reported rarely or never eating fried potatoes and respondents who ate potatoes five or more times per week is shown in Table 7.18 by health region. There were no statistically significant differences in fried potato consumption between the health regions.

Table 7.18: Frequency of fried potatoes/ chips eaten weekly by health region, 16 years and over

<table>
<thead>
<tr>
<th>Health Region</th>
<th>Rarely/ never eat fried potato</th>
<th>Eat fried potato 5 or more times</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>% (95% CI)</td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>417</td>
<td>23.4 (21.4 -25.4)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>230</td>
<td>24.1 (21.5 -27.0)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>56</td>
<td>22.1 (17.1 -27.6)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>55</td>
<td>21.6 (16.9 -27.4)</td>
</tr>
<tr>
<td>Mid North</td>
<td>18</td>
<td>26.7 (17.4 -39.8)</td>
</tr>
<tr>
<td>Riverland</td>
<td>31</td>
<td>33.1 (24.1 -44.0)</td>
</tr>
<tr>
<td>South East</td>
<td>32</td>
<td>19.6 (14.0 -26.7)</td>
</tr>
<tr>
<td>Eyre</td>
<td>18</td>
<td>24.0 (15.2 -35.5)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>19</td>
<td>22.6 (14.3 -32.9)</td>
</tr>
<tr>
<td>Overall</td>
<td>875</td>
<td>23.5 (22.1 -24.9)</td>
</tr>
</tbody>
</table>

†↓ Statistically significantly higher or lower (p <0.05) than the other categories combined.
Note: The weighting of data can result in rounding discrepancies or totals not adding.
# Insufficient numbers for statistical tests.

* This question was asked bi-monthly.
7.7.4 Carbohydrate consumption

Respondents aged 16 years and over (n=3728)* were asked a series of questions relating to carbohydrate consumption. These questions included how often they ate bread, including bread rolls, flat breads, crumpets, bagels, English bread type muffins and cooked breakfast cereals, how often they consumed breakfast cereal and how often they consumed pasta, rice, noodles or other cereals daily.

0.1.1.1 Bread

Overall, 2.2% (95% CI 1.8 - 2.7; n=82)* of the respondents reported rarely or never eating bread and 14.0% (95% CI 1.8 - 2.7; n=82) reported consuming bread less than daily. The proportion of respondents, who reported eating bread rarely or never, less than daily and daily is shown in Table 7.19 by health region.

There were no statistically significant differences in the proportion of respondents reporting bread consumption between the health regions.

Table 7.19: Frequency of daily bread consumption by health region, 16 years and over

<table>
<thead>
<tr>
<th></th>
<th>Rarely/never eat bread</th>
<th>Eat bread less than daily</th>
<th>Eat bread daily</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%    (95% CI)</td>
<td>n</td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>40</td>
<td>2.2 (1.6 - 3.1)</td>
<td>261</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>21</td>
<td>2.2 (5.3 - 12.6)</td>
<td>135</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>1</td>
<td>0.4 #</td>
<td>30</td>
</tr>
<tr>
<td>Wakefield</td>
<td>7</td>
<td>2.8 (1.2 - 5.9)</td>
<td>39</td>
</tr>
<tr>
<td>Mid North</td>
<td>2</td>
<td>2.5 #</td>
<td>7</td>
</tr>
<tr>
<td>Riverland</td>
<td>1</td>
<td>1.5 #</td>
<td>8</td>
</tr>
<tr>
<td>South East</td>
<td>4</td>
<td>2.3 #</td>
<td>21</td>
</tr>
<tr>
<td>Eyre</td>
<td>2</td>
<td>2.8 #</td>
<td>11</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>3</td>
<td>4.0 #</td>
<td>11</td>
</tr>
<tr>
<td>Overall</td>
<td>82</td>
<td>2.2 (1.8 - 2.7)</td>
<td>524</td>
</tr>
</tbody>
</table>

* Insufficient numbers for statistical analysis.

Note: The weighting of data can result in rounding discrepancies or totals not adding.

* This question was asked bi-monthly.
**0.1.1.2 Breakfast cereal**

Overall, 28.5% (95% CI 27.0 - 30.0; n=1062)* of the respondents reported rarely or never eating breakfast cereal and 27.4% (95% CI 26.0 - 28.9; n=1021) eat cereal less than daily. The proportion of respondents who reported eating breakfast cereal rarely or never, less than daily and daily is shown in Table 7.20 by health region.

There were no statistically significant differences in breakfast cereal consumption between the health regions.

**Table 7.20: Frequency of daily breakfast cereal consumption by health region, 16 years and over**

<table>
<thead>
<tr>
<th>Health Region</th>
<th>Rarely/ never eat breakfast cereal</th>
<th>Eat breakfast cereal less than daily</th>
<th>Eat breakfast cereal daily</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>% (95% CI)</td>
<td>n</td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>520</td>
<td>29.1 (27.1 - 31.3)</td>
<td>458</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>254</td>
<td>26.6 (23.9 - 29.6)</td>
<td>291</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>70</td>
<td>27.3 (22.2 - 33.4)</td>
<td>81</td>
</tr>
<tr>
<td>Wakefield</td>
<td>70</td>
<td>27.5 (22.3 - 33.7)</td>
<td>75</td>
</tr>
<tr>
<td>Mid North</td>
<td>16</td>
<td>24.4 (14.9 - 36.6)</td>
<td>14</td>
</tr>
<tr>
<td>Riverland</td>
<td>37</td>
<td>40.0 (30.0 - 50.5)</td>
<td>18</td>
</tr>
<tr>
<td>South East</td>
<td>47</td>
<td>28.5 (22.2 - 36.5)</td>
<td>44</td>
</tr>
<tr>
<td>Eyre</td>
<td>24</td>
<td>31.7 (22.0 - 43.9)</td>
<td>13</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>26</td>
<td>30.1 (21.3 - 41.7)</td>
<td>26</td>
</tr>
<tr>
<td><strong>Overall</strong></td>
<td>1062</td>
<td>28.5 (27.0 - 30.0)</td>
<td>1021</td>
</tr>
</tbody>
</table>

↑↓ Statistically significantly higher or lower (p <0.05) than the other categories combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.

*This question was only asked bi-monthly
0.1.1.3 Pasta, rice, noodles or other cereals

Overall, 6.8% (95% CI 6.0 - 7.7; n=254) of the respondents reported rarely or never eating pasta, rice, noodles or other cereals and 85.9% (95% CI 84.7 - 87.0; n=3203) reported eating pasta, rice, noodles or other cereals less than daily. The proportion of respondents who reported eating pasta, rice, noodles or other cereals rarely or never, less than daily and daily is shown in Table 7.21 by health region.

Respondents living in the Wakefield region (10.4%) were statistically significantly more likely to rarely or never eat pasta, rice, noodles or other cereals. Respondents living in the Hills Mallee region (90.6%) were statistically significantly more likely to eat pasta, rice, noodles or other cereals less than daily. Respondents living in the Central Northern Adelaide region (9.4%) were statistically significantly more likely to eat pasta, rice, noodles or other cereals daily while respondents living in the Hills Mallee (3.8%) and the South East (3.2%) regions were statistically significantly less likely to eat pasta, rice, noodles or other cereals daily.

Table 7.21: Frequency of consumption of pasta, rice, noodles or other cereals by health region, 16 years and over

<table>
<thead>
<tr>
<th>Region</th>
<th>Rarely/never eat pasta, rice or noodles</th>
<th>Eat pasta, rice or noodles less than daily</th>
<th>Eat pasta, rice or noodles daily</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%      (95% CI)</td>
<td>n</td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>102</td>
<td>5.7 (4.7 - 6.9)</td>
<td>1,514</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>74</td>
<td>7.7 (6.2 - 9.7)</td>
<td>820</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>13</td>
<td>5.2 (2.9 - 8.8)</td>
<td>231</td>
</tr>
<tr>
<td>Wakefield</td>
<td>26</td>
<td>10.4 (6.9 - 14.9)</td>
<td>215</td>
</tr>
<tr>
<td>Mid North</td>
<td>3</td>
<td>5.1 #</td>
<td>59</td>
</tr>
<tr>
<td>Riverland</td>
<td>9</td>
<td>10.0 (4.8 - 18.0)</td>
<td>80</td>
</tr>
<tr>
<td>South East</td>
<td>13</td>
<td>8.2 (4.5 - 13.5)</td>
<td>145</td>
</tr>
<tr>
<td>Eyre</td>
<td>7</td>
<td>8.7 (4.2 - 18.9)</td>
<td>66</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>6</td>
<td>7.1 (2.9 - 15.3)</td>
<td>74</td>
</tr>
<tr>
<td>Overall</td>
<td>254</td>
<td>6.8 (6.0 - 7.7)</td>
<td>3203</td>
</tr>
</tbody>
</table>

↑↓ Statistically significantly higher or lower (p <0.05) than the other categories combined.
# Insufficient numbers for statistical tests.
Note: The weighting of data can result in rounding discrepancies or totals not adding.

*This question was only asked bi-monthly
### 7.7.5 Dairy consumption

Respondents aged 16 years and over (n=7346) were asked what type of milk they usually consumed. Overall, 34.4% (95% CI 33.3 - 35.5; n=2524) reported that they usually consumed whole milk and 55.4% (95% CI 54.3 - 56.6; n=4071) reported that they usually consumed low or reduced fat or skim milk as shown in Table 7.22.

Respondents living in the Hills Mallee, Wakefield, Riverland and South East regions were statistically significantly more likely to usually consume whole milk (40.5%, 40.7%, 52.5%, 44.0%) and less likely to usually consume low or reduced fat milk or skim milk (48.7%, 50.8%, 38.6%, 47.5%) while respondents living in the Central Northern Adelaide region were statistically significantly less likely to usually consume whole milk (31.2%) and more likely to usually consume low or reduced fat or skim milk (58.4%). Respondents living in the Southern Adelaide region (32.6%) were statistically significantly less likely to usually consume whole milk.

#### Table 7.22: Types of milk usually consumed, by health region, aged 16 years and over

<table>
<thead>
<tr>
<th>Health Region</th>
<th>Whole milk N % (95% CI)</th>
<th>Low or reduced fat/Skim N % (95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>1,111 31.2 (29.7 - 32.8)</td>
<td>2,075 58.4 (56.7 - 60.0)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>594 32.6 (19.8 - 23.6)</td>
<td>1,023 56.2 (53.4 - 58.5)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>215 40.5 (36.2 - 44.7)</td>
<td>259 48.7 (44.4 - 53.0)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>198 40.7 (36.4 - 45.4)</td>
<td>246 50.8 (46.2 - 55.3)</td>
</tr>
<tr>
<td>Mid North</td>
<td>56 40.6 (32.4 - 49.3)</td>
<td>70 50.9 (42.1 - 59.3)</td>
</tr>
<tr>
<td>Riverland</td>
<td>87 52.5 (44.5 - 60.2)</td>
<td>64 38.6 (31.2 - 46.4)</td>
</tr>
<tr>
<td>South East</td>
<td>142 44.0 (38.6 - 49.7)</td>
<td>153 47.5 (42.0 - 53.1)</td>
</tr>
<tr>
<td>Eyre</td>
<td>61 40.6 (32.6 - 48.7)</td>
<td>77 51.0 (42.8 - 59.2)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>61 34.8 (28.1 - 42.7)</td>
<td>102 58.5 (50.9 - 65.9)</td>
</tr>
<tr>
<td>Overall</td>
<td>2524 34.4 (33.3 - 35.5)</td>
<td>4071 55.4 (54.3 - 56.6)</td>
</tr>
</tbody>
</table>

↑↓ Statistically significantly higher or lower (p < 0.05) than the other categories combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.
7.7.6 Meat products

Respondents aged 16 years and over (n=3728) were asked how often they ate meat products such as sausages, frankfurters, devon (fritz), salami, meat pies, bacon or ham.

Overall, 12.8% (95% CI 11.8 – 13.9; n=477) of the respondents reported rarely or never eating meat products such as sausages, frankfurters, devon (fritz), salami, meat pies, bacon or ham while 56.8% (95% CI 55.2 – 58.4; n=2117) of respondents ate meat products such as sausages, frankfurters, devon (fritz), salami, meat pies, bacon or ham less than three times per week. The proportion of respondents who reported eating meat products such as sausages, frankfurters, devon (fritz), salami, meat pies, bacon or ham rarely or never less than three times per week and three or more times per week is shown in Table 7.23 by health region.

There were no statistically significant differences observed for meat product consumption between the regions.

Table 7.23: Frequency of meat products such as sausages, frankfurters, devon (fritz), salami, meat pies, bacon or ham eaten weekly by health region, 16 years and over

<table>
<thead>
<tr>
<th></th>
<th>Rarely/ never eat meat products</th>
<th>Eat meat products less than three times per week</th>
<th>Eat meat products three or more products per week</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>(95% CI)</td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>243</td>
<td>13.6</td>
<td>(12.1 - 15.3)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>110</td>
<td>11.6</td>
<td>(9.6 - 13.8)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>33</td>
<td>12.8</td>
<td>(9.2 - 17.8)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>26</td>
<td>10.2</td>
<td>(6.9 - 14.9)</td>
</tr>
<tr>
<td>Mid North</td>
<td>8</td>
<td>12.5</td>
<td>(5.7 - 23.0)</td>
</tr>
<tr>
<td>Riverland</td>
<td>13</td>
<td>14.5</td>
<td>(7.9 - 23.1)</td>
</tr>
<tr>
<td>South East</td>
<td>22</td>
<td>13.3</td>
<td>(8.8 - 19.9)</td>
</tr>
<tr>
<td>Eyre</td>
<td>7</td>
<td>9.2</td>
<td>(4.2 - 18.9)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>15</td>
<td>17.4</td>
<td>(10.5 - 27.8)</td>
</tr>
<tr>
<td>Overall</td>
<td>477</td>
<td>12.8</td>
<td>(11.8 - 13.9)</td>
</tr>
</tbody>
</table>

*↑↓ Statistically significantly higher or lower (p <0.05) than the other categories combined.
Note: The weighting of data can result in rounding discrepancies or totals not adding.

*This question asked bi-monthly.
7.8 Physical Activity

A number of short questions, adopted from the Active Australia Survey\textsuperscript{12}, were asked to monitor physical activity levels. These questions related to walking, moderate activity and vigorous activity including the number of times per week that these activities had been undertaken, and the time spent doing these activities.

The Active Australia Survey physical activity questions enable the calculation of Sufficient Physical Activity as defined by the Australian Institute of Health and Welfare. Sufficient Physical Activity (SPA) has been defined as “the completion of 150 minutes of walking, moderate or vigorous physical activity (when vigorous is weighted by a factor of two to account for its greater intensity) in the past week\textsuperscript{13}. Not all people undertake sufficient physical activity, but are still physically active to some extent, just not to levels that benefit their health. This is known as Insufficient Physical Activity (IPA) and is defined as “the completion of some but less than 150 minutes in total of walking, moderate or vigorous activity (when vigorous activity is weighted by a factor of two) and/or less than five separate sessions in the past week.” The proportion of people in the population who do not undertake physical activity, are classified as inactive. This is defined as “no walking, moderate or vigorous activity undertaken in the past week”.

Respondents aged 20 to 64 years (n=5038) were asked various questions relating to their physical activity. Overall, 50.1\% (95\% CI 48.7 - 51.5; n=2524), as shown in Table 7.24, reported a level of activity that was determined to equate to sufficient activity.

Respondents living in the Central Northern Adelaide region (51.5\%) were statistically significantly more likely to undertake sufficient physical activity while respondents living in the Hills Mallee region (40.8\%) were statistically significantly less likely to undertake sufficient physical activity.
### Table 7.24: Sufficient physical activity by health region, 20 to 64 years

<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
<th>Statistically significant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>1268</td>
<td>51.5</td>
<td>(49.5 - 53.5)</td>
<td>↑</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>626</td>
<td>51.2</td>
<td>(48.3 - 54.0)</td>
<td></td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>150</td>
<td>40.8</td>
<td>(35.6 - 45.9)</td>
<td>↓</td>
</tr>
<tr>
<td>Wakefield</td>
<td>152</td>
<td>47.6</td>
<td>(42.2 - 53.4)</td>
<td></td>
</tr>
<tr>
<td>Mid North</td>
<td>43</td>
<td>46.9</td>
<td>(36.4 - 57.4)</td>
<td></td>
</tr>
<tr>
<td>Riverland</td>
<td>64</td>
<td>49.3</td>
<td>(40.7 - 58.5)</td>
<td></td>
</tr>
<tr>
<td>South East</td>
<td>101</td>
<td>45.4</td>
<td>(38.5 - 51.9)</td>
<td></td>
</tr>
<tr>
<td>Eyre</td>
<td>55</td>
<td>55.2</td>
<td>(45.2 - 65.4)</td>
<td></td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>65</td>
<td>53.3</td>
<td>(43.7 - 61.8)</td>
<td></td>
</tr>
<tr>
<td>Overall</td>
<td>2524</td>
<td>50.1</td>
<td>(48.7 - 51.5)</td>
<td></td>
</tr>
</tbody>
</table>

↑↓ Statistically significantly higher or lower (p <0.05) than the other categories combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.
7.9 Multiple risk factors

Multiple risk factors were derived by the accumulation of seven risk factors. These included obesity; current high blood pressure; current high cholesterol; long or short-term risk (high risk) of harm from alcohol; smoking; no or insufficient physical activity; and fruit and vegetable consumption below the recommended levels. Overall 25.0% (n=1376) of respondents aged 20 to 64 years reported that they had no risk factors, 36.5% (n=2007) had one risk factor, 25.3% (n=1392) had two risk factors, and 13.1% (n=723) had three or more risk factors. The proportion of respondents aged 20 to 64 years reporting risk factors is shown by health regions in Table 7.25.

There were no statistically significant differences observed in the proportion of multiple risk factors between the health regions.

Table 7.25: Prevalence of multiple risk factors by health region, 20 to 64 years

<table>
<thead>
<tr>
<th>Health Region</th>
<th>No risk factors</th>
<th>I-2 risk factors</th>
<th>3 or more risk factors</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>(95% CI)</td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>695</td>
<td>26.0</td>
<td>(24.4 - 27.7)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>350</td>
<td>25.8</td>
<td>(23.5 - 28.2)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>89</td>
<td>22.5</td>
<td>(18.5 - 26.9)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>89</td>
<td>25.6</td>
<td>(21.1 - 30.5)</td>
</tr>
<tr>
<td>Mid North</td>
<td>23</td>
<td>22.4</td>
<td>(5.3 - 32.4)</td>
</tr>
<tr>
<td>Riverland</td>
<td>29</td>
<td>20.8</td>
<td>(14.7 - 28.9)</td>
</tr>
<tr>
<td>South East</td>
<td>51</td>
<td>21.0</td>
<td>(16.1 - 26.7)</td>
</tr>
<tr>
<td>Eyre</td>
<td>25</td>
<td>21.8</td>
<td>(15.1 - 31.1)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>25</td>
<td>19.7</td>
<td>(13.3 - 27.7)</td>
</tr>
<tr>
<td><strong>Overall</strong></td>
<td>1376</td>
<td>25.0</td>
<td>(23.9 - 26.2)</td>
</tr>
</tbody>
</table>

Note: The weighting of data can result in rounding discrepancies or totals not adding
CHAPTER 8: MENTAL HEALTH

To ascertain the mental health status of respondents, they were asked a series of questions relating to the following or using the following measures:

- Anxiety, depression, stress related problem, any other mental health problem (16+ years);
- Kessler Psychological Distress Scale (K10) (16+ years);
- Suicidal ideation (16+ years); and
- Emotions, behaviour, social ability (2-15 years).

8.1 Prevalence of current self-reported diagnosed mental health condition

Current diagnosed mental health condition was determined if the respondent, aged 16 years and over (n=7346) was:

- diagnosed with a mental health condition such as anxiety, depression, a stress related problem, or any other mental health problem in the last 12 months; or
- currently receiving treatment for a mental health condition.

Overall, 13.5% (95% CI 12.7 – 14.3; n=993) of the respondents reported a current mental health problem. The proportion of respondents who reported having been told by a doctor in the last 12 months that they have a mental condition or are currently being treated for a mental health condition, is shown in Table 8.1 by region.

People living in the Riverland region (7.1%) were statistically significantly less likely to have a current mental health condition.
<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>507</td>
<td>14.3</td>
<td>(13.1 – 15.5)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>258</td>
<td>14.2</td>
<td>(12.6 – 15.9)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>66</td>
<td>12.4</td>
<td>(9.8 – 15.6)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>56</td>
<td>11.5</td>
<td>(8.9 – 14.8)</td>
</tr>
<tr>
<td>Mid North</td>
<td>17</td>
<td>12.3</td>
<td>(7.5 – 19.3)</td>
</tr>
<tr>
<td>Riverland</td>
<td>12</td>
<td>7.1</td>
<td>(4.0 – 12.6)  ↓</td>
</tr>
<tr>
<td>South East</td>
<td>34</td>
<td>10.7</td>
<td>(7.5 – 14.6)</td>
</tr>
<tr>
<td>Eyre</td>
<td>26</td>
<td>16.9</td>
<td>(11.8 – 24.4)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>17</td>
<td>9.9</td>
<td>(6.0 – 15.4)</td>
</tr>
<tr>
<td><strong>Overall</strong></td>
<td>993</td>
<td>13.5</td>
<td>(12.7 – 14.3)</td>
</tr>
</tbody>
</table>

†‡ Statistically significantly higher or lower (p < 0.05) than the other categories combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.
8.2 Kessler Psychological Distress Scale (K10)

The level of psychological distress experienced by respondents, aged 16 years and over (n=7346), was determined using the Kessler Psychological Distress 10 item scale (K10)\textsuperscript{14,15,16}. This scale was developed to measure anxiety and depressive disorders in the general population. Overall 10.8% (95% CI 10.1 – 11.5; n=790) of the respondents were determined, according to the Kessler Psychological Distress Scale (K10), to be experiencing psychological distress. The proportion of respondents who were experiencing psychological distress as determined by K10 is shown in Table 8.2 by health region.

People living in the Central Northern Adelaide region (12.1%) were statistically significantly more likely to have psychological distress as defined by K10 and people living in the Wakefield region (7.5%) were statistically significantly less likely to have psychological distress as defined by K10.

Table 8.2: High to very high levels of psychological distress according to the Kessler Psychological Distress Scale (K10) by health region, 16 years and over

<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>429</td>
<td>12.1</td>
<td>(11.0 – 13.2)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>189</td>
<td>10.4</td>
<td>(9.0 – 11.9)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>51</td>
<td>9.5</td>
<td>(7.3 – 12.5)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>36</td>
<td>7.5</td>
<td>(5.3 – 10.2)</td>
</tr>
<tr>
<td>Mid North</td>
<td>15</td>
<td>11.2</td>
<td>(6.4 – 17.6)</td>
</tr>
<tr>
<td>Riverland</td>
<td>14</td>
<td>8.3</td>
<td>(4.9 – 14.0)</td>
</tr>
<tr>
<td>South East</td>
<td>26</td>
<td>8.1</td>
<td>(5.4 – 11.7)</td>
</tr>
<tr>
<td>Eyre</td>
<td>14</td>
<td>9.2</td>
<td>(5.4 – 15.4)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>16</td>
<td>9.0</td>
<td>(5.5 – 14.8)</td>
</tr>
<tr>
<td>Overall</td>
<td>790</td>
<td>10.8</td>
<td>(10.1 – 11.5)</td>
</tr>
</tbody>
</table>

\textsuperscript{\uparrow\downarrow} Statistically significantly higher or lower (p <0.05) than the other categories combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.
8.3 Suicidal ideation

Respondents aged 16 years and over (n=1620) were asked a series of questions relating to suicidal ideation. Suicidal ideation was determined based on four questions contained in the 28-item General Health Questionnaire (GHQ-28)\textsuperscript{17,18,19}. Overall 4.5% (95% CI 3.6 – 5.6, n=73) of the respondents reported suicidal ideation. The proportion of respondents who reported suicidal ideation is shown in Table 8.3 by health region.

There were no statistically significant differences observed in the proportion of respondents having suicidal ideation between the regions.

Table 8.3: Suicidal Ideation by health region, 16 years and over

<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>41</td>
<td>5.2</td>
<td>(3.8 – 7.1)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>17</td>
<td>4.3</td>
<td>(2.6 – 6.8)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>5</td>
<td>4.2</td>
<td>(1.6 – 10.4)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>3</td>
<td>2.8</td>
<td>#</td>
</tr>
<tr>
<td>Mid North</td>
<td>1</td>
<td>1.6</td>
<td>#</td>
</tr>
<tr>
<td>Riverland</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>South East</td>
<td>3</td>
<td>5.0</td>
<td>#</td>
</tr>
<tr>
<td>Eyre</td>
<td>3</td>
<td>7.3</td>
<td>#</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>1</td>
<td>0.5</td>
<td>#</td>
</tr>
<tr>
<td>Overall</td>
<td>73</td>
<td>4.5</td>
<td>(3.6 – 5.6)</td>
</tr>
</tbody>
</table>

# Insufficient numbers for statistical tests.
\^\# Statistically significantly higher or lower (p <0.05) than the other categories combined.
Note: The weighting of data can result in rounding discrepancies or totals not adding.

* This question was asked bi-monthly
8.4 Child mental health problems

Parents or caregivers of children aged 2 to 15 years (n=1691) were asked if, overall, in their opinion does the child have trouble with emotions, concentration, behaviour or getting on with people. Overall, 7.9% (95% CI 6.7 - 9.3; n=134) of the respondents reported their child as having quite a lot or very much trouble with emotions, concentration, behaviour, or getting on with people. The proportion of respondents who reported their child as having problems is shown in Table 8.4 by health region.

There were no statistically significant differences observed in the proportion of respondents reporting their child, aged 2 to 15 years, as having trouble with emotions, concentration, behaviour or getting on with people.

Table 8.4: Overall, quite a lot or very much trouble with emotions, concentration, behaviour or getting on with people, by health region, 2 to 15 years

<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>61</td>
<td>7.9</td>
<td>(6.2 - 10.1)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>32</td>
<td>8.3</td>
<td>(5.9 - 11.7)</td>
</tr>
<tr>
<td>SA Country</td>
<td>41</td>
<td>7.6</td>
<td>(5.6 - 10.3)</td>
</tr>
<tr>
<td>Overall</td>
<td>134</td>
<td>7.9</td>
<td>(6.7 - 9.3)</td>
</tr>
</tbody>
</table>

# Insufficient numbers for statistical analysis.
Note: The weighting of data can result in rounding discrepancies or totals not adding.
8.5 Child mental health treatment

Parents or caregivers of children aged 2 to 15 years (n=1691) were asked if their child had ever been treated for an emotional, mental health or behavioural problem. Overall, 8.3% (95% CI 7.1 - 9.8; n=141) of the respondents reported that their child had ever been treated for an emotional problem. The proportion of respondents who reported that their child had ever been treated for an emotional, mental health or behavioural problem is shown in Table 8.5, by health region.

There were no statistically significant differences observed in the proportion of respondents reporting that their child had ever been treated for an emotional, mental health or behavioural problem.

### Table 8.5: Ever been treated for an emotional, mental health or behavioural problem, by health region, 2 to 15 years

<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>56</td>
<td>7.3</td>
<td>(5.6 - 9.4)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>31</td>
<td>8.0</td>
<td>(5.6 - 11.4)</td>
</tr>
<tr>
<td>SA country</td>
<td>54</td>
<td>10.1</td>
<td>(7.7 - 13.0)</td>
</tr>
<tr>
<td>Overall</td>
<td>141</td>
<td>8.3</td>
<td>(7.1 - 9.8)</td>
</tr>
</tbody>
</table>

Note: The weighting of data can result in rounding discrepancies or totals not adding.

# Insufficient numbers for statistical tests.
CHAPTER 9: PSYCHOSOCIAL EVENTS

This section reports on the respondent’s, aged 16 years and over,* experience of major psychosocial events in the last 12 months such as unplanned loss of job; new job; family or domestic violence; death of somebody; discrimination; moving house; robbery; marriage or relationship breakdown; serious injury; and any other major events as shown in Table 9.1 to Table 9.4 by health region.

The following statistically significant differences were observed for the psychosocial events shown in Table 9.2:
- The Southern Adelaide region (14.2%) had statistically significantly more respondents reporting new jobs while the Hills Mallee region (7.7%) had a statistically significantly lower proportion of respondents reporting new jobs;
- Respondents living in the Central Northern Adelaide region (6.1%) were statistically significantly more likely to have experienced the unplanned loss of a job.

| Table 9.1: Psychosocial events by health region, 16 years and over |
|------------------|-----------------|-----------------|-----------------|
|                  | New job          |                  | Unplanned loss of job |                  | Family or domestic violence |                  |
|                  | n % (95% CI)     |                  | n % (95% CI)         |                  | n % (95% CI)                |
| Central Northern| 228 12.9 (11.4 - 14.6) | 108 6.1 (5.1 - 7.3) | 30 1.7 (1.2 - 2.4)   |
| Adelaide         |                 |                  |                  |                  |                             |
| Southern Adelaide| 123 14.2 (12 - 16.7) ↑ | 49 5.7 (4.2 - 7.4)  | 28 3.3 (2.2 - 4.7)   |
| Hills Mallee     | 21 7.7 (4.9 - 11.5) ↓ | 10 3.5 (1.8 - 6.7)  | 4 1.5 - #            |
| Wakefield        | 20 8.6 (5.5 - 13.2) | 6 2.6 (1.1 - 5.8)   | 4 1.5 - #            |
| Mid North        | 11 15.4 (8.1 - 25.8) | 4 6.1 - #          | 1 1.7 - #            |
| Riverland        | 11 14.7 (8.1 - 25.8) | 5 6.4 (2.5 - 15.9)  | 1 1.0 - #            |
| South East       | 12 7.6 (4.1 - 13.1)  | 3 1.6 - #          | 1 0.7 - #            |
| Eyre             | 10 13.4 (6.8 - 23.3) | 5 7.0 (2.4 - 15.3)  | 2 3.1 - #            |
| Northern & Far Western | 4 4.6 - #       | 4 4.3 - #          | 1 1.3 - #            |
| Overall          | 441 12.2 (11.2 - 13.3) | 194 5.4 (4.7 - 6.2) | 73 2.0 (1.6 - 2.5)   |

↑↓ Statistically significantly higher or lower (p <0.05) than the other categories combined.
# Insufficient numbers for statistical analysis.

Note: The weighting of data can result in rounding discrepancies or totals not adding.

There were no statistically significant differences observed between the regions for the psychosocial events shown in Table 9.2.

* This question asked bi-monthly
Table 9.2: Psychosocial events by health region, 16 years and over

<table>
<thead>
<tr>
<th>Region</th>
<th>Death of somebody close</th>
<th>Discrimination</th>
<th>Moved house</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>% (95% CI)</td>
<td>n</td>
</tr>
<tr>
<td>Central Northern</td>
<td>372</td>
<td>21.0 (19.2 - 23.0)</td>
<td>71</td>
</tr>
<tr>
<td>Adelaide</td>
<td>183</td>
<td>21.1 (14.4 - 24.0)</td>
<td>30</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>48</td>
<td>17.3 (13.1 - 22.3)</td>
<td>3</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>55</td>
<td>23.4 (18.4 - 29.7)</td>
<td>6</td>
</tr>
<tr>
<td>Wakefield</td>
<td>11</td>
<td>14.6 (8.1 - 25.8)</td>
<td>2</td>
</tr>
<tr>
<td>Mid North</td>
<td>12</td>
<td>16.4 (9.0 - 27.0)</td>
<td>2</td>
</tr>
<tr>
<td>Riverland</td>
<td>24</td>
<td>14.9 (10.1 - 21.8)</td>
<td>3</td>
</tr>
<tr>
<td>South East</td>
<td>55</td>
<td>23.4 (18.4 - 29.7)</td>
<td>6</td>
</tr>
<tr>
<td>Eyre</td>
<td>11</td>
<td>14.6 (8.1 - 25.8)</td>
<td>2</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>20</td>
<td>22.9 (14.6 - 32.8)</td>
<td>3</td>
</tr>
<tr>
<td>Overall</td>
<td>733</td>
<td>20.2 (19.0 - 21.6)</td>
<td>127</td>
</tr>
</tbody>
</table>

↑↓ Statistically significantly higher or lower (p <0.05) than the other categories combined.
# Insufficient numbers for statistical analysis.

No statistically significant differences were observed between respondents reporting the psychosocial events shown in Table 9.3.

Table 9.3: Psychosocial events by health region, 16 years and over

<table>
<thead>
<tr>
<th>Region</th>
<th>Robbed or home burgled</th>
<th>Marriage or relationship breakdown</th>
<th>Serious Injury</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>% (95% CI)</td>
<td>n</td>
</tr>
<tr>
<td>Central Northern</td>
<td>79</td>
<td>4.5 (3.6 - 5.6)</td>
<td>105</td>
</tr>
<tr>
<td>Adelaide</td>
<td>32</td>
<td>3.7 (2.6 - 5.2)</td>
<td>65</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>6</td>
<td>2.3 (0.9 - 4.9)</td>
<td>10</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>6</td>
<td>2.5 (1.1 - 5.8)</td>
<td>18</td>
</tr>
<tr>
<td>Wakefield</td>
<td>1</td>
<td>1.2 #</td>
<td>6</td>
</tr>
<tr>
<td>Mid North</td>
<td>1</td>
<td>0.3 #</td>
<td>6</td>
</tr>
<tr>
<td>Riverland</td>
<td>9</td>
<td>5.4 (2.8 - 10.8)</td>
<td>7</td>
</tr>
<tr>
<td>South East</td>
<td>3</td>
<td>3.6 #</td>
<td>1</td>
</tr>
<tr>
<td>Eyre</td>
<td>2</td>
<td>1.9 #</td>
<td>4</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>138</td>
<td>3.8 (3.2 - 4.5)</td>
<td>224</td>
</tr>
</tbody>
</table>

↑↓ Statistically significantly higher or lower (p <0.05) than the other categories combined.
# Insufficient numbers for statistical analysis.

There were no statistically significant differences observed between the regions for the psychosocial events shown in Table 9.4.
<table>
<thead>
<tr>
<th>Health Region</th>
<th>Other Major Events</th>
<th>Serious Illness</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>Central Northern Adelaide</td>
<td>173</td>
<td>9.8</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>119</td>
<td>13.7</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>33</td>
<td>12.0</td>
</tr>
<tr>
<td>Wakefield</td>
<td>31</td>
<td>13.5</td>
</tr>
<tr>
<td>Mid North</td>
<td>7</td>
<td>10.2</td>
</tr>
<tr>
<td>Riverland</td>
<td>8</td>
<td>11.3</td>
</tr>
<tr>
<td>South East</td>
<td>18</td>
<td>11.4</td>
</tr>
<tr>
<td>Eyre</td>
<td>9</td>
<td>11.4</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>9</td>
<td>9.8</td>
</tr>
<tr>
<td>Overall</td>
<td>408</td>
<td>11.3</td>
</tr>
</tbody>
</table>

↑↓ Statistically significantly higher or lower (p <0.05) than the other categories combined.
Note: The weighting of data can result in rounding discrepancies or totals not adding.
# Insufficient numbers for statistical analysis.
Note: Question asked bi-monthly.
Respondents were asked a series of questions relating to their personal and environmental safety, trust and locus of control.

10.1 Neighbourhood Safety

Respondents (n=5536)* were asked whether they felt that overall their neighbourhood was a safe place to live. Overall, 89.0% (95% CI 88.2 – 89.8; n=4928) of the respondents answered that they thought their neighbourhood was safe. The proportion of respondents who reported their neighbourhood as safe is shown in Table 10.1 by health region.

Respondents living in the Hills Mallee (95.4%), Wakefield (96.5%), Mid North (97.9%) and Eyre (95.4%) regions were statistically significantly more likely to have reported that their neighbourhood was safe, while respondents living in the Central Northern Adelaide region (86.2%) were statistically significantly less likely to report that their neighbourhood was a safe place to live.

Table 10.1: Respondents who reported their neighbourhood as safe by health region, all ages

<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>2292</td>
<td>86.2</td>
<td>(84.8 - 87.4)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>1156</td>
<td>88.6</td>
<td>(86.8 - 90.3)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>414</td>
<td>95.4</td>
<td>(92.9 - 97.1)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>383</td>
<td>96.5</td>
<td>(94.0 - 98.0)</td>
</tr>
<tr>
<td>Mid North</td>
<td>106</td>
<td>97.9</td>
<td>(92.8 - 99.7)</td>
</tr>
<tr>
<td>Riverland</td>
<td>110</td>
<td>85.7</td>
<td>(78.4 - 91.2)</td>
</tr>
<tr>
<td>South East</td>
<td>232</td>
<td>92.4</td>
<td>(88.2 - 95.3)</td>
</tr>
<tr>
<td>Eyre</td>
<td>113</td>
<td>95.4</td>
<td>(89.9 - 98.4)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>123</td>
<td>90.6</td>
<td>(83.9 - 94.6)</td>
</tr>
<tr>
<td>Overall</td>
<td>4928</td>
<td>89.0</td>
<td>(88.2 - 89.8)</td>
</tr>
</tbody>
</table>

* Statistically significantly higher or lower (p <0.05) than the other categories combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.

* Question asked monthly of children and bi-monthly of adults.
10.2 Neighbourhood trust

All respondents (n=5536)* were asked whether they felt that people in their neighbourhood generally trusted each other. Overall, 79.8% (95% CI 78.7 - 80.8; n=4415) of the respondents answered that they thought people generally trusted each other in their neighbourhood. The proportion of respondents who reported people trusted each other in their neighbourhood is shown in Table 10.2 by health region.

Respondents living in the Hills Mallee (90.1%), Wakefield (86.9%), Mid North (90.9%) Riverland (96.6%), South East (85.4%) and Eyre (92.3%) regions were statistically significantly more likely to report neighbourhood trust, while Central Northern Adelaide (76.1%), Southern Adelaide (77.8%) and Northern and Far Western (70.2%) regions were statistically significantly less likely to report neighbourhood trust.

Table 10.2: Respondents who reported that people trust one another in their neighbourhood, by health region, all ages

<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>2024</td>
<td>76.1</td>
<td>(74.4 - 77.7)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>1014</td>
<td>77.8</td>
<td>(75.4 - 80.0)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>391</td>
<td>90.1</td>
<td>(86.8 - 92.7)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>345</td>
<td>86.9</td>
<td>(83.1 - 90.0)</td>
</tr>
<tr>
<td>Mid North</td>
<td>98</td>
<td>90.9</td>
<td>(83.2 - 95.2)</td>
</tr>
<tr>
<td>Riverland</td>
<td>124</td>
<td>96.6</td>
<td>(91.7 - 99.0)</td>
</tr>
<tr>
<td>South East</td>
<td>214</td>
<td>85.4</td>
<td>(80.1 - 89.3)</td>
</tr>
<tr>
<td>Eyre</td>
<td>109</td>
<td>92.3</td>
<td>(85.6 - 96.2)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>95</td>
<td>70.2</td>
<td>(61.3 - 77.3)</td>
</tr>
<tr>
<td><strong>Overall</strong></td>
<td><strong>4415</strong></td>
<td><strong>79.8</strong></td>
<td><strong>(78.7 - 80.8)</strong></td>
</tr>
</tbody>
</table>

*Statistically significantly higher or lower (p <0.05) than the other categories combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.

* Question asked monthly of children and bi-monthly of adults.
10.3 Home safety

All respondents (n=5536)\(^*\) were asked whether they felt safe in their own home. Overall, 97.1% (95% CI 96.6 – 97.5; n=5376) of the respondents answered that they felt safe in their home all or most of the time. The proportion of respondents who reported feeling safe in their home all or most of the time is shown in Table 10.3 by health region.

Respondents living in the Hills Mallee (99.4%) and the Wakefield (99.4%) regions were statistically significantly more likely to feel safe in their own home while respondents living in the Central Northern Adelaide (96.3%) were statistically significantly less likely to report feeling safe in their own home.

Table 10.3: Respondents who felt safe in their homes, most or all of the time, by health region, all ages

<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>2561</td>
<td>96.3</td>
<td>(95.5 - 97.0)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>1264</td>
<td>96.9</td>
<td>(95.8 - 97.8)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>432</td>
<td>99.4</td>
<td>(98.2 - 99.9)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>394</td>
<td>99.4</td>
<td>(97.6 - 99.8)</td>
</tr>
<tr>
<td>Mid North</td>
<td>105</td>
<td>97.7</td>
<td>(91.5 - 99.3)</td>
</tr>
<tr>
<td>Riverland</td>
<td>128</td>
<td>99.8</td>
<td>(99.4 - 100.0)</td>
</tr>
<tr>
<td>South East</td>
<td>244</td>
<td>97.3</td>
<td>(94.1 - 98.8)</td>
</tr>
<tr>
<td>Eyre</td>
<td>117</td>
<td>98.7</td>
<td>(94.7 - 100.0)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>131</td>
<td>96.8</td>
<td>(91.2 - 98.6)</td>
</tr>
<tr>
<td><strong>Overall</strong></td>
<td>5376</td>
<td>97.1</td>
<td>(96.6 - 97.5)</td>
</tr>
</tbody>
</table>

\(^\uparrow\downarrow\) Statistically significantly higher or lower (p <0.05) than the other categories combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.

---

*Question asked monthly of children and bi-monthly of adults.
10.4 Control over decisions that affect life

Respondents aged 16 years and over (n=3617)\(^*\) were asked whether they felt they had control over the decisions that affect their life. Overall, 91.0\% (95\% CI 90.0 –91.9; n=3292) of the respondents answered that they felt they had control over the decisions that affect their life. The proportion of respondents who reported having control over the decisions that affect their life is shown in Table 10.4 by health region.

There were no statistically significant differences observed for control over decisions that affect their life between the regions.

| Table 10.4: Control over decisions that affect life, by health region, 16 years and over |
|---------------------------------|--------|-----|---------------------|
|                                 | n      | %   | (95\% CI)          |
| Central Northern Adelaide      | 1601   | 90.5| (89.0 - 91.8)      |
| Southern Adelaide              | 792    | 91.3| (89.1 - 93.0)      |
| Hills Mallee                   | 258    | 93.2| (89.3 - 95.7)      |
| Wakefield                      | 217    | 93.4| (89.3 - 96.2)      |
| Mid North                      | 68     | 93.7| (84.1 - 97.5)      |
| Riverland                      | 68     | 93.7| (84.1 - 97.5)      |
| South East                     | 143    | 90.0| (83.9 - 94.0)      |
| Eyre                           | 69     | 91.3| (81.4 - 95.9)      |
| Northern & Far Western         | 74     | 82.9| (73.4 - 90.0)      |
| Overall                        | 3292   | 91.0| (90.0 - 91.9)      |

\(\uparrow\downarrow\) Statistically significantly higher or lower (p < 0.05) than the other categories combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.

\(^*\) Question asked monthly of children and bi-monthly of adults.
10.5 Problems with transport

Parents or caregivers of children aged 0 to 15 years (n=1916) were asked whether they felt they had problems with transport when wanting to go, for example, to hospital, medical appointments, recreational facilities, visiting people, shopping, school or childcare. Overall, 10.4% (95% CI 9.1 - 11.9; n=200) of the respondents answered that they felt they had problems with transport sometimes or all the time. The proportion of respondents who reported having problems with transport is shown in Table 10.5 by health region.

There were no statistically significant differences observed between the regions for problems with transport.

Table 10.5: Problems with transport at least some of the time, by health region, 0 to 15 years

<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>100</td>
<td>11.2</td>
<td>(9.3 - 13.5)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>47</td>
<td>10.7</td>
<td>(8.1 - 14.1)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>11</td>
<td>7.2</td>
<td>(3.7 - 12.5)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>18</td>
<td>11.1</td>
<td>(6.9 - 17.3)</td>
</tr>
<tr>
<td>Mid North</td>
<td>1</td>
<td>3.0</td>
<td>#</td>
</tr>
<tr>
<td>Riverland</td>
<td>3</td>
<td>6.0</td>
<td>#</td>
</tr>
<tr>
<td>South East</td>
<td>11</td>
<td>12.5</td>
<td>(6.4 - 20.8)</td>
</tr>
<tr>
<td>Eyre</td>
<td>5</td>
<td>11.9</td>
<td>(4.5 - 26.4)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>3</td>
<td>6.9</td>
<td>#</td>
</tr>
<tr>
<td><strong>Overall</strong></td>
<td>200</td>
<td>10.4</td>
<td>(9.1 - 11.9)</td>
</tr>
</tbody>
</table>

# Insufficient numbers for statistical analysis.

↑↓ Statistically significantly higher or lower (p <0.05) than the other categories combined.

Note: The weighting of data can result in rounding discrepancies or totals not adding.
CHAPTER 11: DAYS LOST OR LIMITED BECAUSE OF HEALTH

11.1 Days lost because of health

Respondents, 16 years and over (n=7346), were asked, during the last four weeks how many days they were totally unable to work or carry out their normal duties because of their health. Overall, 16.7% (95% CI 15.8 – 17.6; n=1225) of the respondents reported being unable to work or carry out normal duties for one or more days. The proportion of respondents who reported being unable to work or carry out normal duties for one or more days is shown in Table 11.1 by health region.

There were no statistically significant differences observed between the regions for respondents who were totally unable to work due to health problems for one or more days.

Table 11.1: One or more days lost out of the past four weeks because of health problems, by health region, 16 years and over

<table>
<thead>
<tr>
<th>Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>624</td>
<td>17.5</td>
<td>(16.3 - 18.9)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>310</td>
<td>17.0</td>
<td>(15.3 - 18.8)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>70</td>
<td>13.2</td>
<td>(10.5 - 16.4)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>73</td>
<td>15.0</td>
<td>(12.1 - 18.6)</td>
</tr>
<tr>
<td>Mid North</td>
<td>27</td>
<td>19.2</td>
<td>(13.5 - 27.4)</td>
</tr>
<tr>
<td>Riverland</td>
<td>19</td>
<td>11.7</td>
<td>(7.2 - 17.5)</td>
</tr>
<tr>
<td>South East</td>
<td>46</td>
<td>14.4</td>
<td>(10.7 - 18.7)</td>
</tr>
<tr>
<td>Eyre</td>
<td>21</td>
<td>13.9</td>
<td>(9.0 - 20.7)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>35</td>
<td>20.2</td>
<td>(14.6 - 27.0)</td>
</tr>
<tr>
<td>Overall</td>
<td>1225</td>
<td>16.7</td>
<td>(15.8 - 17.6)</td>
</tr>
</tbody>
</table>

† † Statistically significantly higher or lower (p <0.05) than the other categories combined.
Note: The weighting of data can result in rounding discrepancies or totals not adding.
11.2 Limited amount of work done

Respondents aged 16 years and over (n=7346) were asked during the last four weeks how many days they were partially unable to work or carry out their normal duties because of their health. Overall, 23.5% (95% CI 22.6 – 24.5; n=1729) of the respondents reported being partially unable to work or carry out their normal duties for one or more days. The proportion of respondents who reported being partially unable to work or carry out their normal duties for one or more days is shown in Table 11.2 by health region.

There were no statistically significant differences observed between the regions for respondents who were limited in their ability to work or carry out their normal duties for one or more days because of health problems.

<table>
<thead>
<tr>
<th>Health Region</th>
<th>n</th>
<th>%</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Northern Adelaide</td>
<td>876</td>
<td>24.6</td>
<td>(23.2 - 26.1)</td>
</tr>
<tr>
<td>Southern Adelaide</td>
<td>426</td>
<td>23.4</td>
<td>(21.5 - 25.4)</td>
</tr>
<tr>
<td>Hills Mallee</td>
<td>113</td>
<td>21.1</td>
<td>(17.9 - 25.0)</td>
</tr>
<tr>
<td>Wakefield</td>
<td>115</td>
<td>23.8</td>
<td>(20.0 - 27.8)</td>
</tr>
<tr>
<td>Mid North</td>
<td>36</td>
<td>25.8</td>
<td>(19.2 - 34.4)</td>
</tr>
<tr>
<td>Riverland</td>
<td>22</td>
<td>13.3</td>
<td>(8.7 - 19.6)</td>
</tr>
<tr>
<td>South East</td>
<td>68</td>
<td>21.2</td>
<td>(16.9 - 26.1)</td>
</tr>
<tr>
<td>Eyre</td>
<td>39</td>
<td>25.8</td>
<td>(19.2 - 36.7)</td>
</tr>
<tr>
<td>Northern &amp; Far Western</td>
<td>34</td>
<td>19.7</td>
<td>(14.1 - 26.4)</td>
</tr>
<tr>
<td>Overall</td>
<td>1729</td>
<td>23.5</td>
<td>(22.6 - 24.5)</td>
</tr>
</tbody>
</table>

†↓ Statistically significantly higher or lower (p <0.05) than the other categories combined.
Note: The weighting of data can result in rounding discrepancies or totals not adding.
## APPENDIX 1: SOUTH AUSTRALIAN HEALTH REGIONS BY POSTCODE

Table 1A: South Australian Health Regions by postcode

<table>
<thead>
<tr>
<th>Central Northern Adelaide</th>
<th>5000</th>
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<td>5052</td>
<td>5161</td>
<td>5168</td>
<td></td>
</tr>
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APPENDIX 2: MAP OF SOUTH AUSTRALIAN HEALTH REGIONS
REFERENCES


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