

2 Sociodemographics

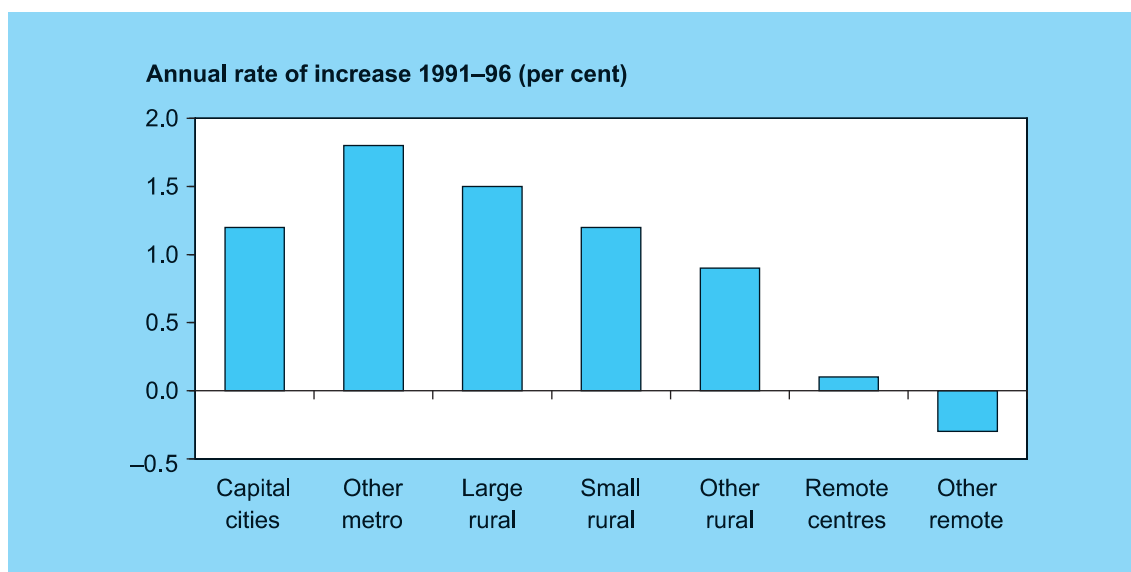
This chapter presents a range of indicators which summarise the demographic characteristics and the social wellbeing of the population in the various rural, remote and metropolitan zones. The size, growth and age structure of the overall population and the Indigenous population are described. The aspects of social wellbeing examined here include life expectancy, fertility rate and the 1991 Census-derived Socio-Economic Indexes for Areas (SEIFA).

Socioeconomic disadvantage and related sociodemographic factors are now recognised as important determinants of health. Because indicators of health status such as death rates and hospitalisation rates for specific causes depend on demographic factors such as age, sex and population size, understanding the demographics of a population is crucial to interpreting the results of health statistics. For example, it is important to remember that Australia's Indigenous population makes up only 2% of Australia's population. The Indigenous population is only 1% of the metropolitan zone and 3% of the rural zone. This percentage increases to 13% in 'remote centres' and 26% in 'other remote areas'. Consequently, the generally poorer health of Indigenous Australians will have little effect on metropolitan and rural health differentials but may affect the differentials in the remote zone. Understanding the demographics of the Indigenous and non-Indigenous populations allows for more effective analysis of health-related data.

Socio-Economic Indexes for Areas (SEIFA) are indicators of access to proper nutrition, adequate housing, transport and education. Lack of any of these necessities will affect health. Some necessities, like adequate nutrition, will have a direct impact on health status. Other necessities, like education, have a more subtle effect on health. For example, lack of information and education about the importance of breast examinations or Pap smear tests in preventing breast and cervical cancer can directly affect death rates from these diseases. Socioeconomic status has a strong influence on health outcomes for older population groups. For example, older males and females of low socioeconomic status are more likely to be overweight and inactive, smoke and use health services more than older people of higher socioeconomic status (AIHW 1998a). This in turn can result in the recorded higher rates of cardiovascular disease among people of low socioeconomic status.

Population distribution

Population distribution and growth, 1991–96



Indicator	Metropolitan		Rural			Remote		Total
	Capital cities	Other	Large centres	Small centres	Other	Centres	Other	
Population size 30 June 1996 (millions)	11.6	1.4	1.1	1.2	2.4	0.2	0.3	18.3
Per cent annual increase 1991–96	1.2	1.8	1.5	1.2	0.9	0.1	-0.3	1.2
Population density (per km ²)	346.7	191.0	59.4	18.4	2.6	0.3	0.1	2.4

Source: AIHW population database, based on SLA resident population estimates compiled by ABS.

Population distribution

- Australia is very much an urban society, with more than 70% of its population living in the metropolitan zone in 1996. Of these metropolitan residents, almost 90% live in 'capital cities'. About 26% of Australia's population reside in the rural zone, with only 3% living in the remote zone.
- The population density varies enormously across RRMA categories, ranging from 347 persons per km² in 'capital cities' to 0.1 person per km² in 'other remote areas'. Population density may be misleading as a measure of isolation in that most of the settlements in rural and remote zones are clustered rather than distributed uniformly. However, it does provide some notion of the degree of isolation and distances people may have to travel to access health services.
- 'Capital cities', 'other metropolitan centres', and 'large rural centres' experienced the highest population growth rates in the 1991–96 period. This reflects the large

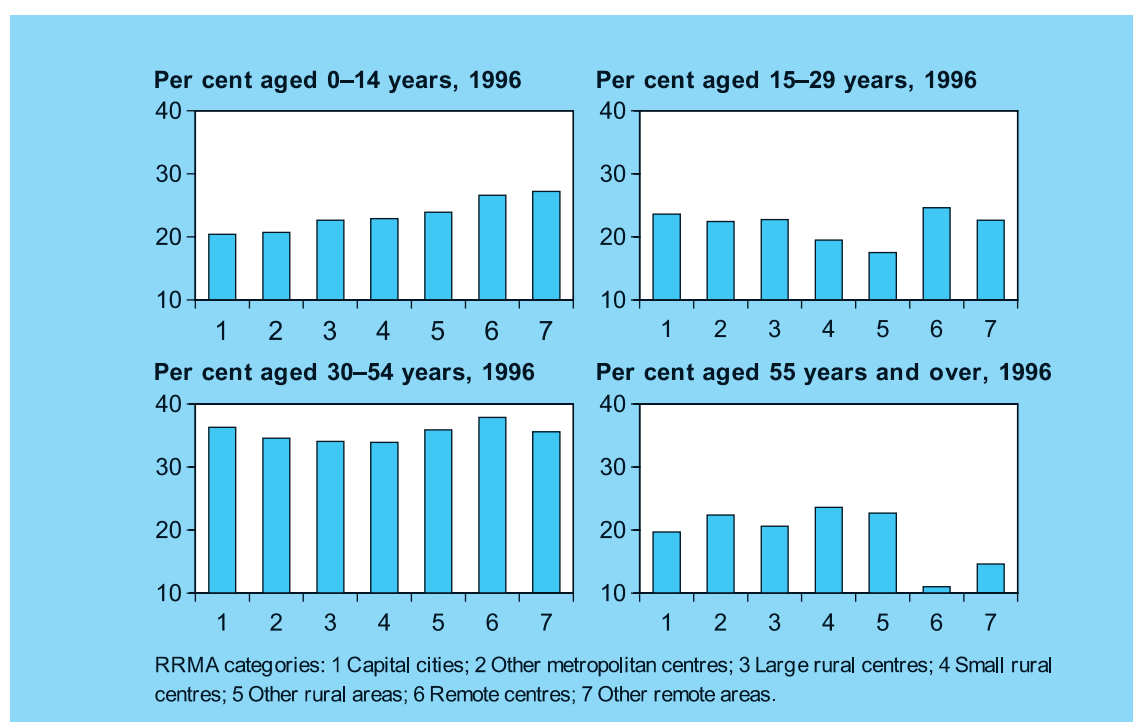
proportion of these areas which are situated within Australia's fast-growing coastal belt. In contrast, the remote zone experienced negligible growth over the same period.

- Although the 1991–96 growth rates provide a broad indication of where Australia's population growth is occurring, there is considerable variation in growth rates within RRMA categories. For example, within the 'small rural centres' category, the population of the New South Wales coastal town of Ballina increased by 15% between 1991 and 1996, whereas the population of the New South Wales inland city of Armidale declined by 4% over the same period.

For more information, see:

Australian Bureau of Statistics 1998. Regional population growth Australia, 1996–97. ABS Cat. No. 3218.0. Canberra: AGPS.

Age distribution, 1996



Indicator	Metropolitan		Rural			Remote		Total
	Capital cities	Other	Large centres	Small centres	Other	Centres	Other	
0–14	20.4	20.7	22.6	22.9	23.9	26.6	27.2	21.4
15–29	23.6	22.4	22.7	19.5	17.5	24.6	22.6	22.4
30–54	36.3	34.6	34.1	33.9	35.9	37.9	35.6	35.8
55 and over	19.7	22.4	20.6	23.6	22.7	11.0	14.6	20.4
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Note: Columns may not add to 100.0 due to rounding.

Source: AIHW population database, based on SLA resident estimates compiled by ABS.

Age distribution

- There are substantial variations in the age structures of Australia's populations living in metropolitan, rural and remote zones. These differences reflect the varying patterns of fertility, mortality and migration experienced in each zone.
- Resident population estimates at 30 June 1996 show that rural and remote communities have larger proportions of children compared with the metropolitan zone. This is consistent with the higher fertility rates in rural and remote zones.
- The established pattern of young adults leaving country areas and migrating to cities and large towns is reflected in the lower

proportions of 15–29-year-olds in 'small rural centres' and 'other rural areas'.

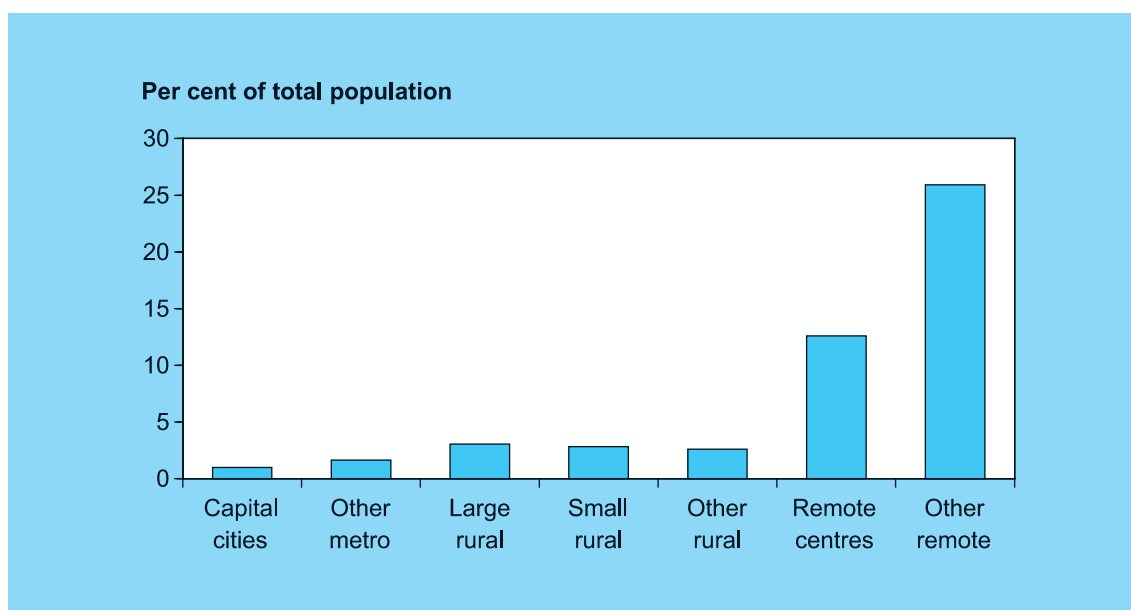
- The proportion of people aged 55 years and over in the remote zone is around half that of metropolitan and rural communities. Out-migration and higher premature mortality of people living in the remote zone contribute to these lower proportions.

For more information, see:

Australian Bureau of Statistics 1997. Population by age and sex, Australia, States and Territories. ABS Cat. No. 3201.0. Canberra: AGPS.

Indigenous population

Distribution of Indigenous population, 1996



Indicator	Metropolitan		Rural			Remote		Total
	Capital cities	Other	Large centres	Small centres	Other	Centres	Other	
Population size 30 June 1996 ('000)	117.1	22.9	33.4	34.0	64.0	27.5	87.1	386.0
Per cent of total population	1.0	1.7	3.1	2.8	2.6	12.6	25.9	2.1

Source: AIHW population database, based on Indigenous State/Territory population estimates compiled by ABS.

Distribution of Indigenous population

- The Indigenous population constitutes just over 2% of Australia's population. Across zones, this proportion varies considerably, from around 1% in the metropolitan zone to 3% in the rural zone, increasing to 13% in 'remote centres' and 26% in 'other remote areas'. The Indigenous component of the population is not large enough in relative terms to contribute markedly to differences in health status between metropolitan and rural zones, but is large enough to affect differences in the remote zone.
- The majority of Indigenous people are living in 'capital cities' and 'other remote areas'. In 1996, 30% of Australia's Indigenous population lived in 'capital cities' and 23% lived in 'other remote areas'.
- Indigenous Australians suffer a higher burden of illness and die at a younger age than other Australians (Bhatia & Anderson 1995; Anderson et al. 1996). As a result the median

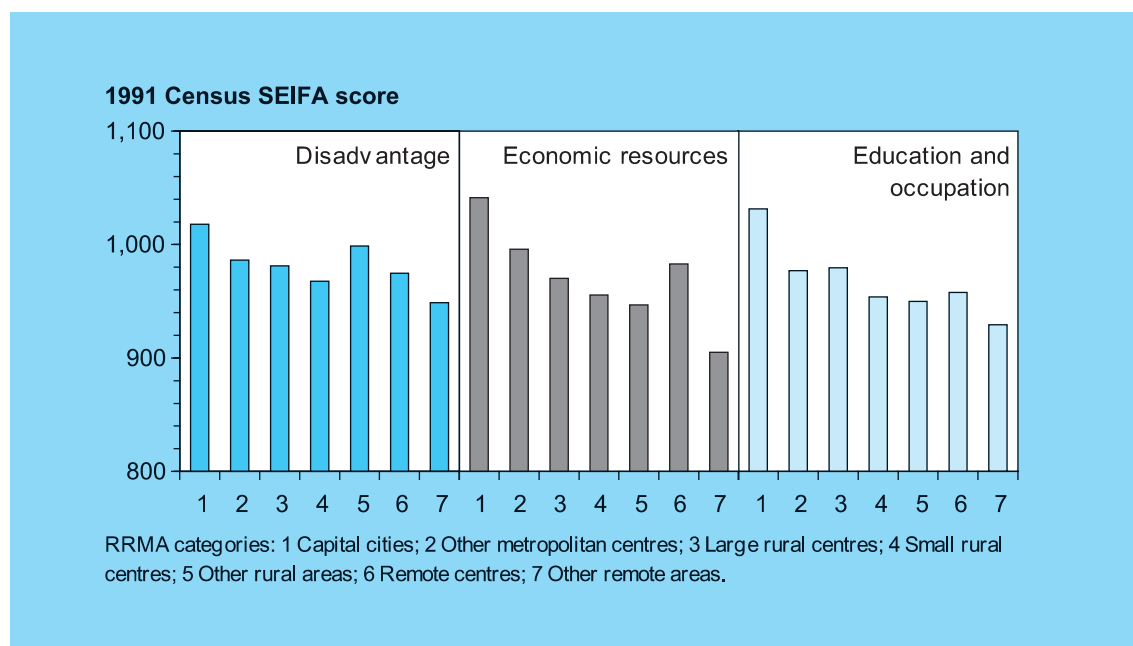
age of the Indigenous population, at 20.1 years, is 14 years less than for the overall population. Only 2% of the Indigenous population are aged 65 and over, compared with 12% for the overall population.

- Between 1991 and 1996, the Indigenous population increased 12%, compared with 6% for the overall population. The higher growth rate for the Indigenous population is due to a combination of a higher fertility rate and a larger proportion of the female population in the peak child-bearing ages.

For more information, see:

Australian Bureau of Statistics 1998. Experimental estimates of the Aboriginal and Torres Strait Islander population. ABS Cat. No. 3230.0. Canberra: AGPS.

Socioeconomic wellbeing



SEIFA index	Metropolitan		Rural			Remote	
	Capital cities	Other	Large centres	Small centres	Other	Centres	Other
Disadvantage	1,018	986	981	968	999	975	949
Economic resources	1,041	996	970	956	947	983	905
Education and occupation	1,032	977	979	954	950	958	929

Source: 1991 Census—Socio-Economic Indexes for Areas (SEIFA) unit record file.

Socioeconomic wellbeing

- Socioeconomic wellbeing has been reported to have a strong association with the health status of a population (Mathers 1994).
- The Socio-Economic Indexes for Areas (SEIFA) are a set of summary indicators on socioeconomic wellbeing on a geographic basis. There are five indexes calculated: the urban index of advantage, the rural index of advantage, the index of disadvantage, the index of economic resources and the index of education and occupation. The indexes of rural and urban advantage cannot be used at the RRMA level, as the urban index of advantage is not calculated for the rural zone and the rural index of advantage is not calculated for the metropolitan zone. Note that the higher scores for socioeconomic disadvantage indicate more advantaged populations.
- All of the indexes are designed so that the Australian average is 1,000. Relatively advantaged areas have index values higher

than 1,000, and relatively disadvantaged areas have values lower than 1,000.

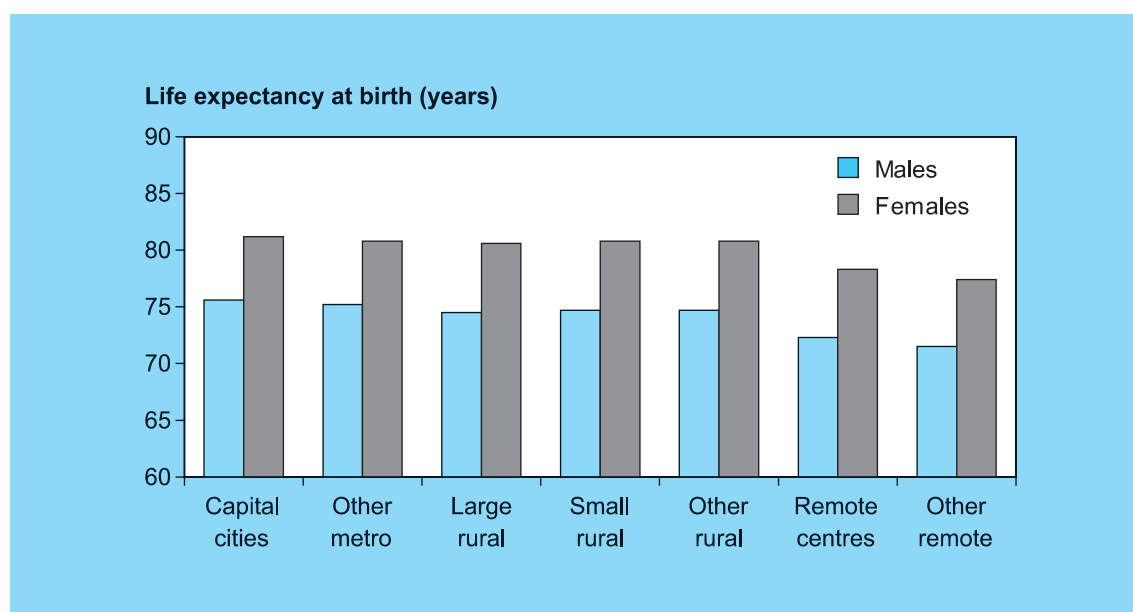
- All three indexes based on 1991 Census results are highest in 'capital cities' and lowest in 'other remote areas'. Despite the odd anomaly such as 'other rural areas' having the second highest socioeconomic disadvantage score and 'remote centres' having a relatively high economic resources score, the indexes generally show a pattern of increasing disadvantage as population density declines.

For more information, see:

Australian Bureau of Statistics 1993. Information paper: 1991 Census—Socio-Economic Indexes for Areas. ABS Cat. No. 2912.0. Canberra: AGPS.

Mathers CD 1994. Health differentials among adult Australians aged 25–64 years. Australian Institute of Health and Welfare: Health Monitoring Series No. 1. Canberra: AGPS.

Life expectancy, 1994–96



Sex	Metropolitan		Rural			Remote		Total
	Capital cities	Other	Large centres	Small centres	Other	Centres	Other	
Males	75.6	75.2	74.5	74.7	74.7	72.3	71.5	75.2
Females	81.2	80.8	80.6	80.8	80.8	78.3	77.4	81.1

Source: AIHW, based on 1994–96 Australian life tables constructed jointly by the Australian Government Actuary and ABS.

Life expectancy

- Life expectancy is the number of years that a person can expect to live assuming the death rates of a reference period. Based on 1994–96 mortality rates, Australian males can expect to live 75.2 years from birth, and females can expect to live 81.1 years. The marked reduction in death rates since the early 1980s has resulted in increases in life expectancy of 4 years for males and 2.8 years for females.
- People living in ‘capital cities’ enjoy greater longevity than people living in other areas of Australia. Based on death rates for the period 1994–96, males living in ‘capital cities’ can expect to live 1 year longer than those living in the rural zone, and 4 years longer than those living in ‘other remote areas’. Females living in ‘capital cities’ can expect to live around half

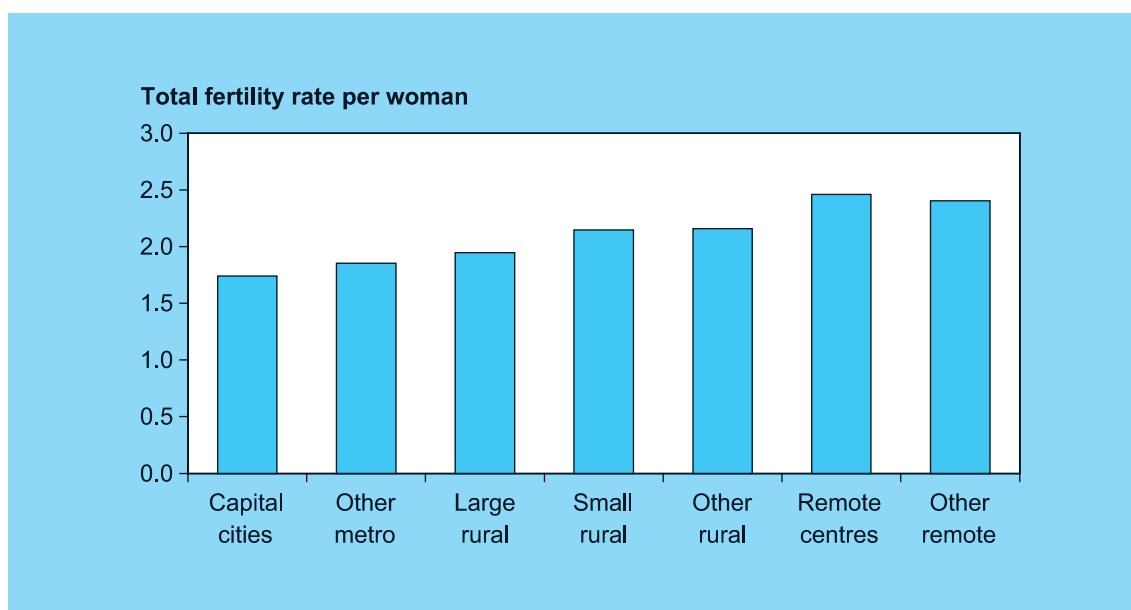
a year longer than those living in the rural zone, and, as with males, almost 4 years longer than those living in ‘other remote areas’.

- Life expectancy is consistently higher for females across all of the RRMA categories. The gap between male and female life expectancies at birth is larger in rural and remote zones (6 years), compared with 5.6 years for ‘capital cities’.

For more information, see:

Australian Bureau of Statistics 1997. Deaths Australia, 1996. ABS Cat. No. 3302.0. Canberra: AGPS.

Fertility rates, 1995



Indicator	Metropolitan		Rural			Remote		Total
	Capital cities	Other	Large centres	Small centres	Other	Centres	Other	
Total fertility rate	1.7	1.9	1.9	2.1	2.2	2.5	2.4	1.9

Source: AIHW National Perinatal Statistics Unit.

Fertility

- Total fertility rate is a measure of the number of children each woman would bear if she experienced the fertility rates of the reference period throughout her reproductive life. The latest national fertility rates (ABS 1998a) show that women are now having an average of 1.8 children, compared with 2.9 children in 1971.
- Annual fertility rates from 1991 through to 1995 show a consistent pattern of higher levels in rural and remote zones when compared with the metropolitan zone. In 1995, 'large rural centres' experienced fertility rates 12% higher than for 'capital cities'. Rates in 'small rural centres' and 'other rural areas' are more than 20% higher than for 'capital cities'.
- Higher fertility rates have been reported for Indigenous women compared with non-Indigenous women. The remote zone, with relatively higher proportions of Indigenous people, had substantially higher fertility rates than the rural zone in 1995. 'Remote centres' experienced rates around 25% higher than 'large rural centres', and 40% higher than 'capital cities'.

For more information, see:

Day P, Lancaster P & Huang J 1997. Australia's mothers and babies 1995. Perinatal Statistics Series Number 6. Sydney: AIHW National Perinatal Statistics Unit.

