



MEDIA RELEASE

Major report presents picture of Gippsland's health and wellbeing

21 April 2022

An extensive picture of Gippsland's health and wellbeing has been detailed in the Gippsland Primary Health Network's Health Needs Assessment 2022-2025.

A requirement from the Australian Government's Department of Health every three years, the previous assessment was updated in 2021 with new information gathered from people across Gippsland through surveys, interviews and workshops.

The data were collected and analysed by Gippsland PHN's Health Planning, Research and Evaluation team with an expert priority setting group helping to identify priority areas for the next three years. The 274 page report was submitted to the government in November 2021 and recently approved.

Gippsland PHN Chief Executive Officer, Amanda Proposch, said the Health Needs Assessment 2022-2025 built on previous analysis by using recently released data, input from ongoing stakeholder consultation and learnings from the monitoring and evaluation of commissioning activities.

Ms Proposch said as well as providing data on a range of issues such as prevention, better health services, main health issues and supporting people, the report captured feedback from the community.

"People in Gippsland tell us about their lived experience across a range of areas which is important to identifying any service gaps," she said.

"Population health planning is an ongoing activity at Gippsland PHN with the Health Needs Assessment a significant part of this work. We will now use this information to work with our partners towards our vision of a measurably healthier Gippsland."

The Health Needs Assessment revealed total life expectancy for people in Gippsland is 80.6 years, with females living for 83.0 years and males 78.9 years. This compares to national life expectancy of 82.5 years, comprising females at 84.6 years and males at 80.5 years.

Coronary heart disease is the leading cause of death for both men and women in Gippsland while cancers rate among the top causes of death with a mortality of 184 per 100,000 people (167 in Australia).

Other key data includes:

Supporting people

- 10.9% children have emotional or behavioural problems at school entry compared with 8.1% in Victoria.
- 46% of the activity at Gippsland GP practices in 2019-20 was for people aged 65+. The most common diagnosis was hypertension, affecting 53% of people aged 65+.

- The most common active disability diagnosis in general practice was autistic disorder (21.4% of all disability diagnoses), followed by intellectual functioning disability (11.2%) and dementia (9.4%).
- Chronic disease management, mental health and wellbeing, and socio-economic determinants of health such as employment and housing were identified as key issues for Aboriginal and Torres Strait Islander people.

Better health services

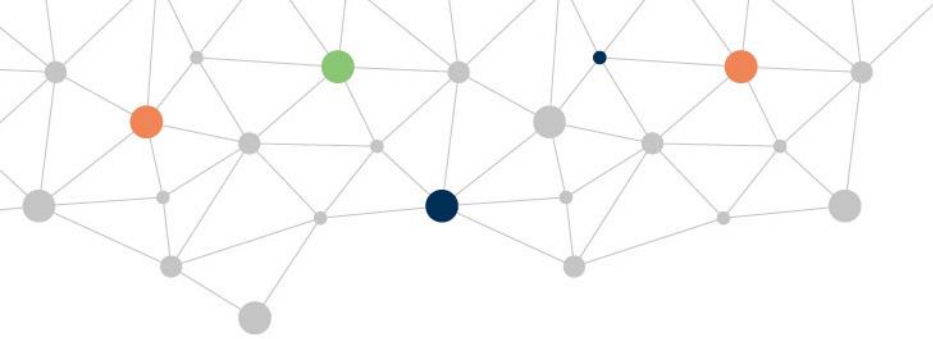
- In 2020-21, 20% of general practice activity was after hours compared to 16.9% in 2019-20.
- Psychologists working in the primary care or community setting across Gippsland has decreased by 15.7 Full Time Equivalents between 2015 and 2019.
- 27% of general practices were enabled to use videocalls for telehealth appointments in 2021, a 50% improvement since 2020.

Prevention

- Factors affecting health (social determinants; housing, income, social connections): 20.7% of school leavers participated in higher education in Gippsland (39.3% in Victoria).
- Family violence: Gippsland experiences high rates of family violence incidents, including some of the State's highest rates in Latrobe, East Gippsland and Wellington.
- Healthy and safe environment: A total of 1,717 people were seen at Gippsland HeadtoHelp (now known as Head to Health) hubs funded in response to the Victorian COVID-19 pandemic between September 2020 and 2021.

Main health issues

- 17% of all Gippsland general practice patients had an active mental health diagnosis in 2020-21. The most common mental health diagnoses in general practice were depression (10.9%) and anxiety (7.9%).
- More than 65% of people in Gippsland consumed alcohol at levels likely to increase lifetime risk of harm (>2 standard drinks per day) (59.5% in Victoria).
- 0.5% of all general practice patients had an active dementia diagnosis, increasing by age to 3.1% of patients 75 years or older.
- Over 30% of adults in Gippsland report more than one chronic disease, compared to 25.5% in Victoria.
- Cancers rate among the top causes of death in Gippsland with a mortality of 184 per 100,000 people (167 in Australia).
- The most common reproductive health diagnosis among general practice patients in 2020-21 was oral contraception (9.9% of all reproductive health diagnoses), followed by enlarged prostate (9.2%) and heavy periods (6.8%).



See the full report at <https://gphn.org.au/what-we-do/health-planning-research-and-evaluation/population-health/our-priorities/>

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SNAPSHOTS OF HEALTH ISSUES

From the feedback gathered for the Gippsland Primary Health Network's Health Needs Assessment 2022-2025, some snapshots of people's health issues and solutions were compiled.

While the people in the snapshots below are not real, they are based on real scenarios.

Mara's journey

Mara is a 66-year-old Gunai/Kurnai woman and Elder in her community. She has multiple chronic conditions including diabetes, asthma, stress and anxiety. During the coronavirus pandemic, Mara has been feeling overwhelmed, balancing her responsibilities as an Elder with family commitments and her own wellbeing. She decides to reach out to her GP for support. She tells her GP she's worried for her health and has trouble keeping track of appointments.

What follows is a pathway to improving her health and wellbeing:

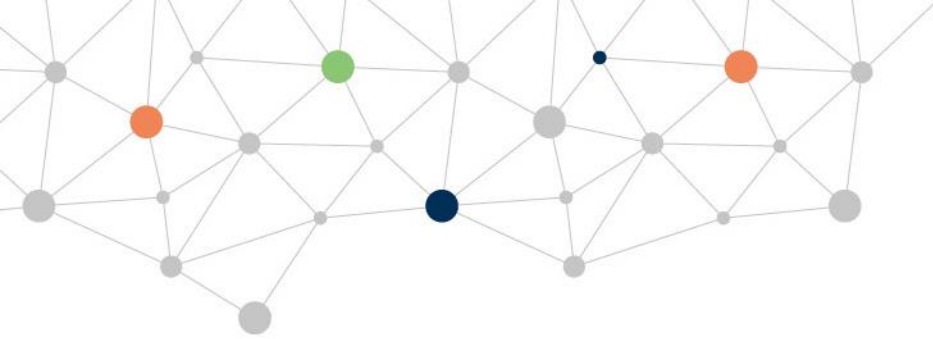
- The GP feels that Mara would benefit from a care coordinator so she doesn't have to manage this situation alone.
- The GP refers Mara to the Integrated Team Care (ITC) Program to coordinate her care.
- Mara wants to access services at home so she doesn't risk exposing her family to COVID-19.
- Her care coordinator arranges home visits to check in on her and her family's health.
- Having her healthcare team collaborate through the ITC Program helps Mara feel on track.
- She is also able to access transport to her doctor's appointments through the program.

Key takeouts for Mara:

Feeling comfortable accessing health care professionals and services that understand the cultural aspects of Indigenous health is important.

There are supports in place to help access services when family and cultural commitments, cost and transport prevent timely access.

Anne's journey



Anne is 75 years old and lives independently on a rural property. Anne has enjoyed being a music and singalong volunteer at aged care facilities and would like to remain independent for as long as she can. Anne told her GP she was struggling with her mobility and had experienced a fall at home. Her daughter discusses transitioning into an aged care facility which upsets Anne.

- Anne discusses her concerns about losing her independence with her GP.
- Her GP liaises with local services and supports for independent living arrangements.
- Anne expresses her desire to have access to a keyboard and sheet music at the facility.
- Anne discusses this with her daughter who arranges it with the help of the GP and the facility.
- Anne feels heard and agrees to transition to a facility when she feels ready.

Key takeouts for Anne:

Maintaining independence for as long as possible is a goal for many people as they age. What this looks like is different for each person.

Understanding a person's relationships assists with developing plans and the successful transition from independent living to assisted care.

Suni's journey

Suni is a 13 year old who recently transitioned to a new high school and has been struggling with low self-esteem following difficulties making friends. Her mother notes that she may need some help for her mental health and wellbeing. Suni's mother discusses mental health support with the school's wellbeing team.

- Suni accesses support through the Enhancing Mental Health Services in Schools program.
- It's Suni's first time accessing mental health support and she feels anxious about the appointment.
- Suni reveals that she has experienced anxiety in class and social settings.
- She is referred for Cognitive Behavioural Therapy (CBT) to address her symptoms of anxiety.
- The sessions address Suni's negative automatic thoughts, mindfulness and stress reduction strategies.
- Over six sessions, Suni engages well, despite high levels of anxiety in appointments.

Key takeouts for Suni:

What is important is awareness of pathways to access mental health; support; familiarity of the school environment can help young people to better engage with mental health support services; and education on stress reduction and relational wellbeing can be helpful for young people to manage their mental health.

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