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This brief contains key points extracted from publications that have reported social statistics about the Northern Territory. The summary is not exhaustive and does not interpret information nor in all cases contain qualifiers or contextual information. Readers should check cited publications to assess suitability for the intended use. Care should be taken to ensure that population-based statistics reported for the Northern Territory do not refer to urban areas only. Although all due care has been exercised in the preparation of this document, no responsibility is accepted for any errors or omissions.

Disability Support Services 2009-10

AIHW, <http://www.aihw.gov.au>

About this publication

The Disability Support Services is an annual publication that reports on people who used disability support services provided under the National Disability Agreement (NDA).

Summary

Unless stated otherwise, the following is a summary of disability support services in the Territory in 2009-10.

- There were 35 agencies in the Territory providing disability support services under the NDA. Of this amount, 23 were Territory Government-funded agencies while 12 were Commonwealth Government-funded.
- There were 1108 users of state disability support services in the Territory. Of this number, 73.5 per cent of users accessed community support services, 20.1 per cent used community access services, 8.8 per cent accessed accommodation support services and 5.5 per cent accessed respite services. Figures do not add to 100 per cent as users of state disability support services may have accessed more than one service group.
- It is estimated that the Territory Government spent \$53.1 million on disability support services. Of this amount 56.5 per cent was spent on accommodation support. Nationally, total Commonwealth and state government expenditure on disability support services was \$5.8 billion, with accommodation support accounting for 44.7 per cent of total expenditure.
- Where Indigenous status is known, 49 per cent of disability support users aged 0-64 years in the Territory identified as Indigenous. Nationally, 5.3 per cent of disability support users aged 0-64 years were Indigenous.
- In the Territory, there were 6.8 service users per 1000 population, the lowest of all jurisdictions. This compares to 14.6 per 1000 population nationally (see Figure 1).
- The service use rates for disability support services in the Territory were 6.1 per 1000 population in outer regional areas, 8.1 in remote areas and 5.1 in very remote areas. For each remote classification, the Territory had the lowest service use rates. Nationally, the use rates for disability support services was 13.2 per 1000 population in major cities, 18.0 in inner regional, 14.4 in outer regional, 10.0 in remote and 8.4 in very remote areas.

Figure 1: Disability support service users per 1000 population



Source: AIHW

Household Wealth and Wealth Distribution

ABS, www.abs.gov.au

About this publication

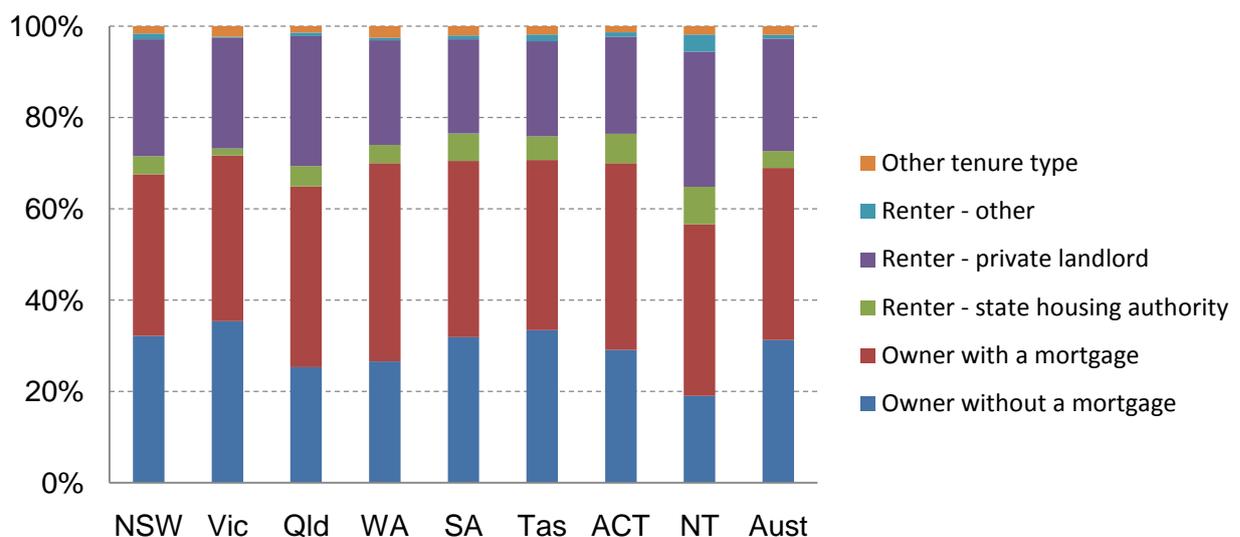
This publication provides estimates of household wealth and wealth distribution in Australia compiled from the 2009-10 Survey of Income and Housing. Information in the publication includes estimates of household value of assets and liabilities, gross household income and households by tenure and landlord type.

Summary

The following is a summary of household assets and liabilities in Darwin from the 2009-10 Survey of Income and Housing and comparisons with households in other capital cities.

- The mean gross household income per week in Darwin was \$1964, the second highest behind the Australian Capital Territory (\$2325) and above the national average of \$1832.
- The median gross household income per week in Darwin was \$1838, the second highest behind the Australian Capital Territory (\$2008) and above the national average of \$1458.
- Of the households in Darwin surveyed, 56.6 per cent were owners with or without a mortgage, while 41.6 per cent were renters. Darwin households recorded the highest proportion of renters. The proportion of renters in other capital cities varied between 26.0 per cent in Melbourne to 33.8 per cent in Queensland (see Figure 2). The national average proportion of households that were renters was 29.2 per cent.
- The mean value of assets for Darwin households was \$792 900, the majority of which was property assets (\$495 000) compared to a national average of \$907 500. Darwin recorded the third lowest value of assets ahead of South Australia (\$677 300) and Tasmania (\$683 800).
- The mean value of liabilities for Darwin households was \$163 300, the highest of all states and above the national average of \$135 700.

Figure 2: Household tenure by type



Source: ABS

Aboriginal and Torres Strait Islander Health Services Report, 2009-10

AIHW, www.aihw.gov.au

About this publication

This publication reports on findings from the 2009-10 Office for Aboriginal and Torres Strait Islander Health (OATSIH) data collection. It provides information on services and programs provided by Aboriginal and Torres Strait Islander primary health care services, substance use services and other services that received funding through OATSIH for 2008-09 and 2009-10.

Summary

The following is a summary of the findings relating to OATSIH funded Aboriginal and Torres Strait Islander primary health care services for 2009-10.

- In 2009-10, 455 705 individual clients received care from a Aboriginal and Torres Strait Islander primary health care service in Australia. Of this amount, 18.2 per cent accessed services in the Territory.
- Nationally, there were 356 897 Indigenous clients of Aboriginal and Torres Strait Islander primary health care service individual clients. Of the total number of Indigenous clients in Australia, 18.2 per cent or 82 893 visited services located in the Territory. In comparison, 12.2 per cent of Indigenous people in Australia reside in the Territory.
- In 2009-10, there were 2.4 million episodes of care by Aboriginal and Torres Strait Islander primary health care services. Clients in the Territory received 26 per cent of all episodes of care, the highest proportion of all jurisdictions.
- There were 48 stand-alone substance use services that responded in the OATSIH data collection in 2009-10. Of this number, nine were located in the Territory.
- Nationally, most Aboriginal and Torres Strait Islander primary health services provided treatment or assistance to clients for alcohol (90 per cent), cannabis and marijuana (88 per cent) and tobacco and nicotine (73 per cent).
- Aboriginal and Torres Strait Islander stand-alone substance use services provided support to clients through various programs including: residential treatment and rehabilitation programs; sobering up and residential respite and short-term care; counselling; information and education; case management of clients with substance use issues; and general living skills programs.
- In 2009-10, 21.4 per cent or 5621 of all reported clients of Aboriginal and Torres Strait Islander stand-alone substance use services clients sought treatment or assistance in the Territory. This was the second highest proportion behind Queensland (30.0 per cent). However, in relation to Indigenous clients (19 789 nationally), 27.7 per cent received assistance at services located in the Territory, the highest of all jurisdictions.

Figure 3: Individual clients of Aboriginal and Torres Strait Islander primary health care services, by Indigenous status, 2009-10

	NSW / ACT ¹	Vic / Tas ¹	Qld	WA	SA	NT	Total
Individual clients							
<i>Indigenous</i>	95 785	34 456	64 093	74 069	16 490	72 007	356 897
<i>Non-Indigenous</i>	25 617	10 744	18 290	18 686	2 623	9 533	85 493
<i>Unknown Indigenous status</i>	5 092	527	4 658	1 152	533	1 353	13 315
Total	126 494	45 724	87 041	93 907	19 646	82 893	455 705

¹ Data for the Australian Capital Territory have been combined with New South Wales and data for Tasmania have been combined with Victoria due to the small number of services in those two jurisdictions.

Source: AIHW

Health Expenditure Australia 2009-10

AIHW, www.aihw.gov.au

About this publication

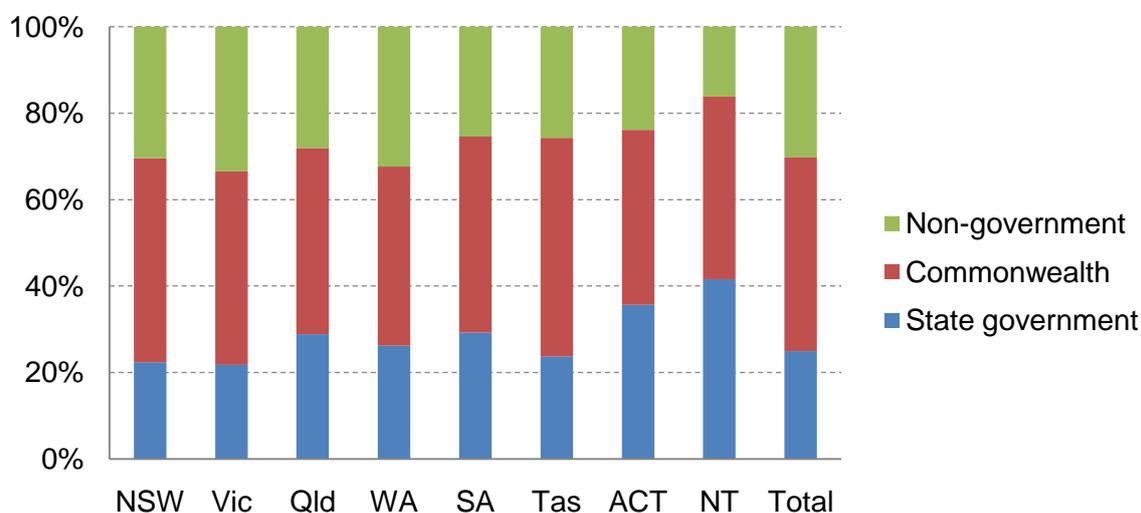
This publication reports on health expenditure in Australia for the year 2009-10. It includes information on expenditure by sources of fund and by area of health expenditure.

Summary

Unless stated otherwise, the following is a summary of the estimates of recurrent health expenditure in the Territory in 2009-10.

- Total health expenditure as a proportion of gross domestic product in Australia has grown from 7.9 per cent in 1999-00 to 9.4 per cent in 2009-10. The average annual growth rate in total health expenditure in Australia between 1999-00 to 2009-10 was 5.3 per cent.
- Total recurrent health expenditure in the Territory in 2009-10 was \$1493 million. This amount comprised \$621 million from the Territory Government, \$606 million from the Commonwealth and \$242 million from non-government sources.
- Territory government expenditure represented 41.6 per cent of total recurrent health expenditure in the Territory. This was the highest proportion of all states. On average, state governments contributed 25 per cent of total health expenditure in Australia (see Figure 4).
- The largest area of recurrent health expenditure in the Territory was public hospital services (\$499 million) followed by 'community health and other' (\$324 million), 'medical services' (\$148 million) and 'public health' (\$105 million).
- Between 1999-00 to 2009-10, total recurrent health expenditure in the Territory increased by an annual average of 6.0 per cent, the third highest behind Queensland (6.5 per cent) and Western Australia (6.0 per cent) and above the national average of 5.4 per cent.
- In 2009-10, the Territory had the lowest average health expenditure funded by private health insurance at \$495 per person covered compared with \$933 per person covered nationally. Non-government sources represented 16.2 per cent of total recurrent health expenditure in the Territory, the lowest of all jurisdictions, compared to the national average of 30.1 per cent.

Figure 4: Recurrent health expenditure by source of funds, 2009-10



Source: AIHW