

Glamorgan Spring Bay

LOCAL GOVERNMENT AREA



Health is closely tied to our daily environment. This Community Health Check presents information about the environmental, social and economic state of the Glamorgan Spring Bay local government area.

**Community Health
Check 2026**



About us



	Glamorgan Spring Bay	Tasmania
Our population	5,012	557,571
Aboriginal population	<p>4.4%</p>	<p>5.4%</p>
Population by age	<p>19% 6% 20% 31% 34%</p> <p>0-14 15-24 25-44 45-64 65+</p>	<p>17% 11% 26% 26% 21%</p> <p>0-14 15-24 25-44 45-64 65+</p>
Population by gender	<p>51% 49%</p> <p>Male Female</p>	<p>49% 51%</p> <p>Male Female</p>
Median age in years	57	42
Born outside Australia	<p>23%</p>	<p>21%</p>

Sources: Our population, Aboriginal population, Population by age, Population by gender, Born outside Australia, and Median age in years: Australian Bureau of Statistics, 2021 Census All persons QuickStats, Local Government Areas, Glamorgan Spring Bay

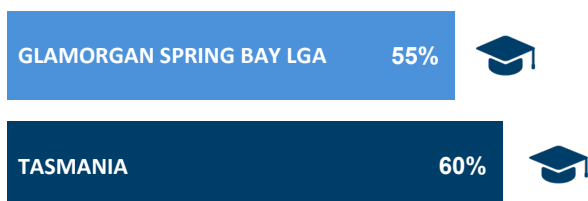
Social and economic conditions



Education

The proportion of people in the Glamorgan Spring Bay LGA who have completed Year 12 and above is less than the proportion for Tasmania overall.

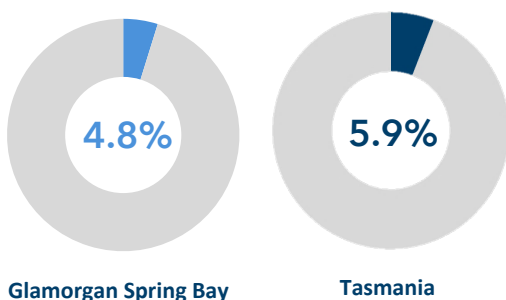
PER CENT OF ELIGIBLE POPULATION WHO HAVE COMPLETED YEAR 12 AND ABOVE



Higher education levels are associated with better health outcomes.

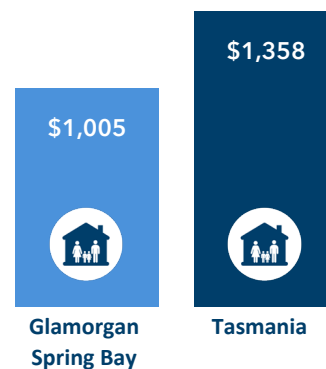
Unemployment rates

The rate of people in the Glamorgan Spring Bay LGA who are unemployed is less than the rate in Tasmania overall.



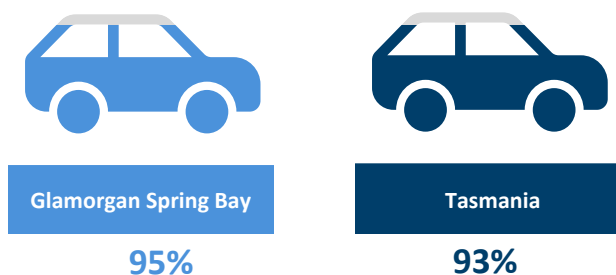
Median weekly income

Weekly income per household is less in the Glamorgan Spring Bay LGA than in the rest of Tasmania.



Motor vehicles

Ninety five per cent (95%) of households in the Glamorgan Spring Bay LGA have one or more motor vehicles.



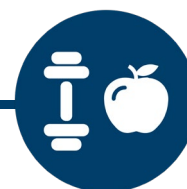
Home ownership

More people in the Glamorgan Spring Bay LGA own their homes outright when compared to the rest of Tasmania.

	Glamorgan Spring Bay	Tasmania
Owned outright	53%	37%
Owned with mortgage	22%	33%
Rented	20%	26%

Source: Education, Unemployment rates, Median weekly income, Motor vehicles, Home ownership: Australian Bureau of Statistics 2021, Census All persons QuickStats, Local Government Areas, Glamorgan Spring Bay

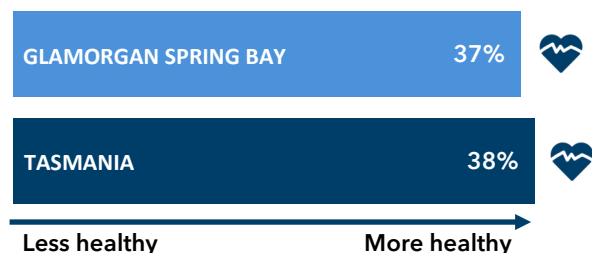
Healthy living



Self-reported health

Thirty-seven per cent (37%) of Glamorgan Spring Bay residents rated their health as “excellent” or “very good”. This is lower than the rate for Tasmania.

ADULTS REPORTING THEIR OWN HEALTH AS ‘EXCELLENT’ OR ‘VERY GOOD’



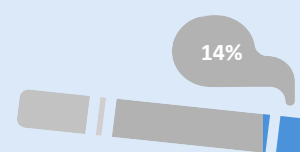
How people feel about their own health, their state of mind and their life in general is a common measure of health. *(Australia’s Health 2018. AIHW)*

Risk factors

Risk factors are conditions or behaviours that make it more likely people will get a chronic condition or health problem. Some data not available for Glamorgan Spring Bay.

	Glamorgan Spring Bay	Tasmania
Overweight/obese body mass index (BMI)	70%	62%
Current smoker	14%	15%
Daily/occasional vaping	--	3%
Single occasion risky drinking (>4 alcoholic standard drinks)*	38%	37%
Insufficient moderate/vigorous activity⁺	--	24%
Did not meet recommended daily vegetable intake[^]	92%	91%
Did not meet recommended daily fruit intake[^]	59%	61%

In the Glamorgan Spring Bay LGA, around 14% of people aged 18 years and over, are daily and current smokers, which is higher than the rate for Tasmania.



Source: Self-reported health and Risk factors: Tasmanian Population Health Survey 2022 Local Government Areas (LGA) Supplementary Data Tables

*2009 National Health and Medical Research Council alcohol guidelines

⁺2014 National Health and Medical Research Council physical activity guidelines

[^]2013 National Health and Medical Research Council dietary guidelines

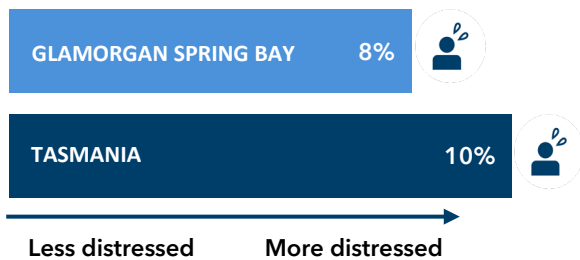
Healthy living



Psychological distress

Fewer adults in the Glamorgan Spring Bay LGA are likely to experience high or very high levels of psychological distress compared with Tasmania overall.

PEOPLE WITH HIGH OR VERY HIGH LEVELS OF PSYCHOLOGICAL DISTRESS



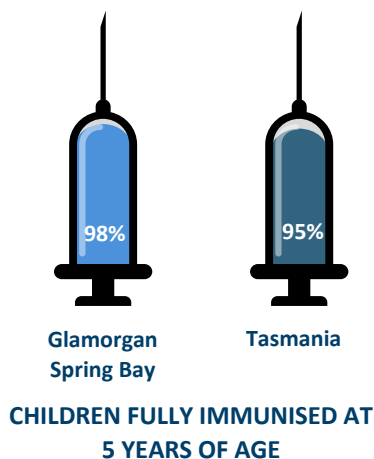
Psychological distress is a term used to describe unpleasant feelings or emotions that can influence how we function in daily life.

Health care



Immunisations

Ninety-seven percent (98%) of children in the Glamorgan Spring Bay LGA are fully immunised by the age of five, which is higher than the rate for Tasmania.



GP and emergency department encounters



In 2022, 84% of people from the Glamorgan Spring Bay LGA visited a general practitioner for their own health in the previous twelve months*.



On average each year during 2022-2024, 449 individuals from the Glamorgan Spring Bay LGA visited an emergency department (86 people per 1,000 population[^]), with an average of 702 ED presentations per year (134 ED presentations per 1,000 population[^]).

[^]Estimated population for June 2023=5,237

Sources: Psychological distress and GP encounters: Tasmanian Population Health Survey LGA Supplementary Data Tables 2022
Immunisations: Primary Health Information Development Unit, Social Health Atlas of Australia: Local Government Areas; Compiled based on data provided by Australian Childhood Immunisation Register, Medicare Australia, 2021
Emergency department encounters: Department of Health and Human Services, Health Central Data Warehouse, Tasmania. Analysed by Primary Health Tasmania; accessed January 2026.

*Individual totals may be higher due to patients potentially visiting more than one practice outside an LGA area or possible de-identification linkage errors from patient administration extraction software.

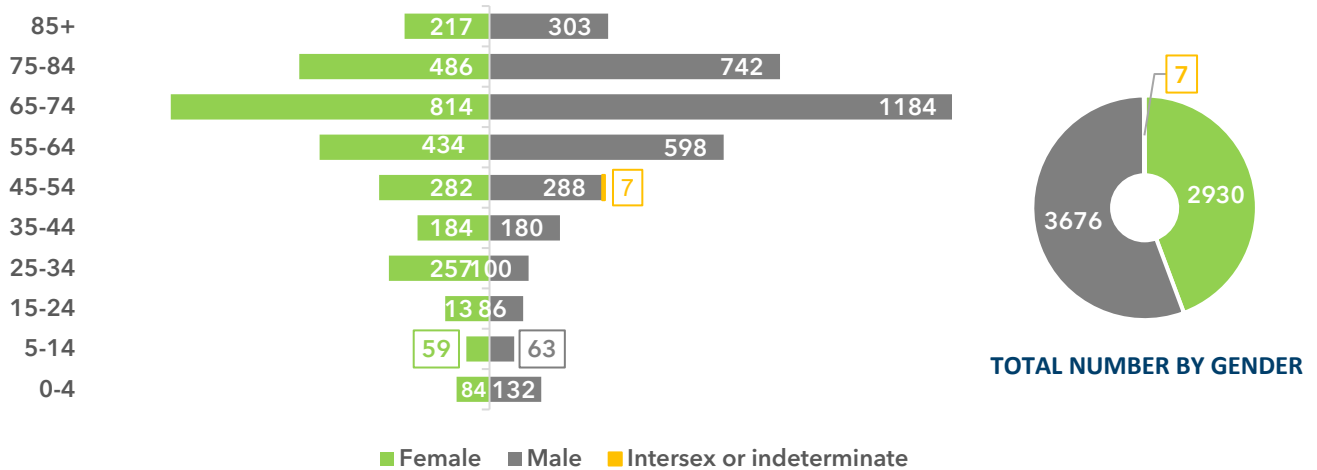
Health outcomes



Public hospital admissions

During the five years from 2020-21 to 2024-25 there were 6,613 admissions to Tasmanian public hospitals from the Glamorgan Spring Bay LGA, with 3,328 overnight stays.

NUMBER OF PUBLIC HOSPITAL ADMISSIONS BY AGE GROUP AND GENDER 2020-21 TO 2024-25



TOP 10 PRIMARY HOSPITAL DIAGNOSIS*^	TOP 10 CHARLSON COMORBIDITIES^^	TOP 10 POTENTIALLY PREVENTABLE HOSPITALISATIONS
Cystitis	Any malignancy, including lymphoma and leukaemia, except malignant neoplasm of skin	Diabetes complications
Pain in throat and chest	Renal disease	Chronic obstructive pulmonary disease
Care involving dialysis	Cerebrovascular disease	Cellulitis
Other cataract	Chronic pulmonary disease	Type 2 diabetes
Other diseases of anus and rectum	Myocardial infarction	Congestive heart failure
Myelodysplastic syndromes	Congestive heart failure	Urinary tract infections
Other symptoms and signs involving the digestive system and abdomen	Diabetes with chronic complication	Iron deficiency anaemia
Other anaemias	Metastatic tumour	Dental conditions
Abdominal and pelvic pain	Dementia	Type 1 diabetes
Pneumonia, organism unspecified	Diabetes without chronic complication	Convulsions epilepsy

*Excludes diagnoses coded as “persons encountering health services in other circumstances” and “other medical care” which cover a wide range of diverse categories and are as such less useful in understanding reasons for hospitalisations.

Health outcomes



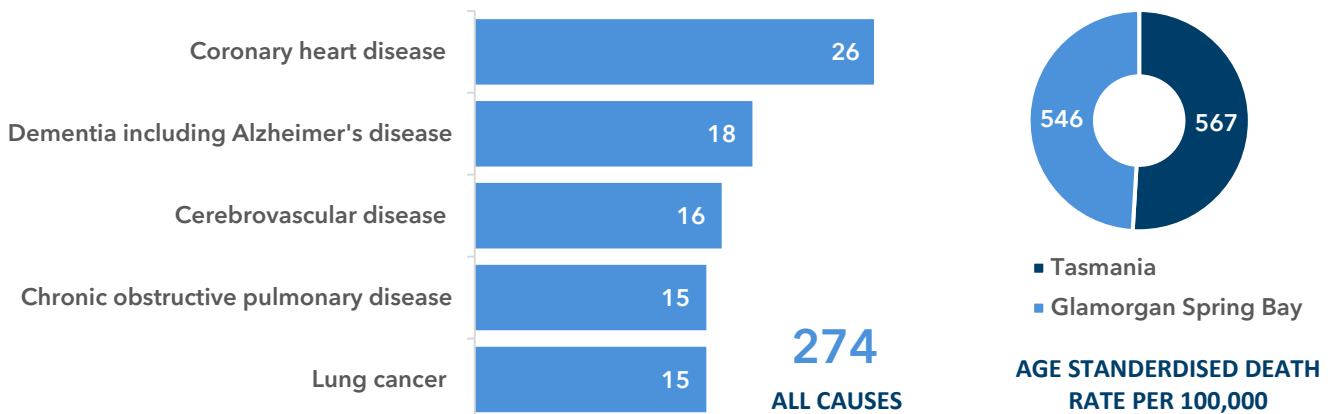
^The *primary hospital diagnosis* is the diagnosis established after study (for example, at the completion of the episode of care) to be chiefly responsible for causing the episode of admitted patient care. It is essentially the main reason someone needed to be admitted to hospital.

^^Patients admitted to hospital often have other comorbid conditions, which may or may not be related to their diagnosis. *The Charlson Comorbidities Index* classifies 17 comorbid conditions which may influence mortality risk.

Causes of death

During 2019-2023 coronary heart disease (9.5%), dementia including Alzheimer disease (6.6%), cerebrovascular disease (5.9%), chronic obstructive pulmonary disease (5.5%), and lung cancer (5.5%), were the leading causes of the 274 deaths in the Glamorgan Spring Bay LGA. The age standardised death rate in 2019-2023 was 546 compared with the overall aged standardised rate of 567 for Tasmania.

TOP CAUSES OF DEATH 2019-2023, BY NUMBER



Sources: Public hospital admissions: Department of Health and Human Services, Health Central Data Warehouse, Tasmania. Analysed by Primary Health Tasmania; Accessed January 2026; Charlson Comorbidities: Charlson, Mary E., et al. "A new method of classifying prognostic comorbidity in longitudinal studies: development and validation." *Journal of chronic diseases* 40.5 (1987): 373-383
Causes of death: Mortality over Regions and Time (MORT) book, LGA, 2019-2023, accessed January 2026.

The Tasmanian Community Health Checks feature information about the 29 Local Government Areas (LGAs) in Tasmania. For reports on the other 28 LGAs, please visit primaryhealthtas.com.au and search for [Community Health Checks](#) or email info@primaryhealthtas.com.au.

This data is sourced as part of Primary Health Tasmania's ongoing provider support activity. While extensive efforts have been made to ensure this information is as accurate as possible, the data is gleaned from multiple public and private organisations via visits and web searches, and Primary Health Tasmania cannot attest to the continued veracity of this dataset as practice and practitioner details change continually. The information presented is accurate as of January 2026. For the most current information, please go to www.phnexchange.com.au.