

# Launceston

LOCAL GOVERNMENT AREA



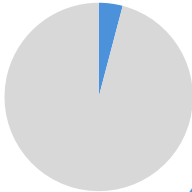
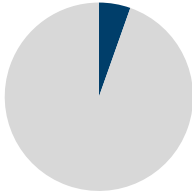
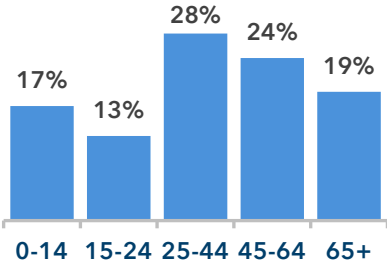
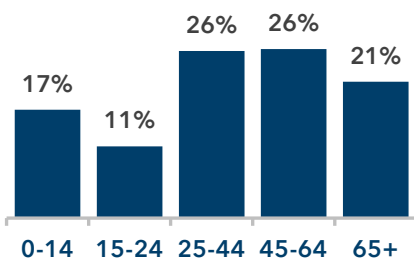
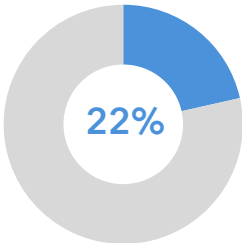
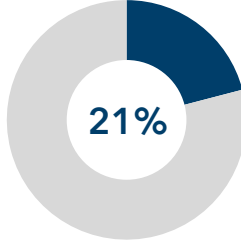
Health is closely tied to our daily environment. This Community Health Check presents information about the environmental, social and economic state of the Launceston local government area.

**Community Health  
Check 2026**



# About us



	Launceston LGA	Tasmania
<b>Our population</b>	<b>70,049</b>	<b>557,571</b>
<b>Aboriginal population</b>	 <b>4.1%</b>	 <b>5.4%</b>
<b>Population by age</b>		
<b>Population by gender</b>	<b>49%</b> Male <b>51%</b> Female	<b>49%</b> Male <b>51%</b> Female
<b>Median age in years</b>	<b>39</b>	<b>42</b>
<b>Born outside Australia</b>	 <b>22%</b>	 <b>21%</b>

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

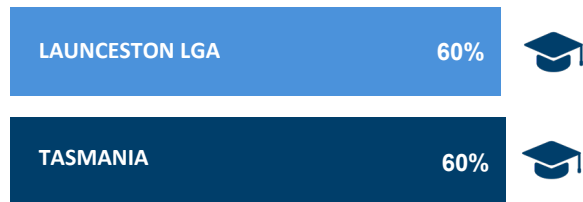
# Social and economic conditions



## Education

The proportion of people in the Launceston LGA who have completed Year 12 and above is similar to the proportion for Tasmania overall.

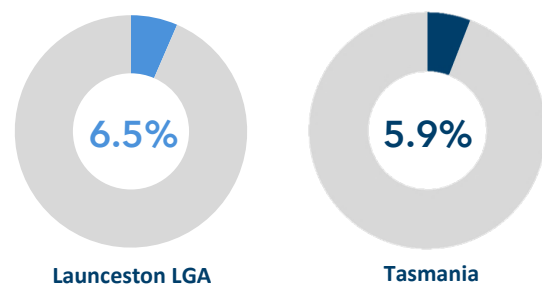
PER CENT OF ELIGIBLE POPULATION WHO HAVE COMPLETED YEAR 12 AND ABOVE



Higher education levels are associated with better health outcomes.

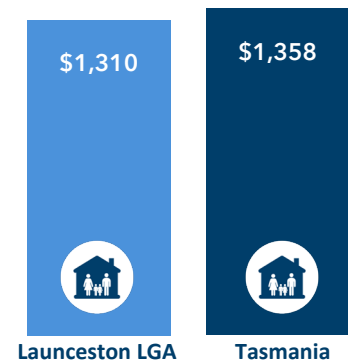
## Unemployment rates

More people in the Launceston LGA are unemployed, compared to Tasmania overall.



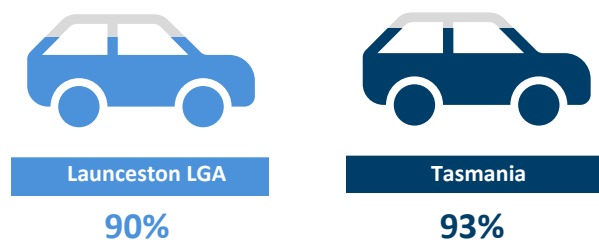
## Median weekly income

Weekly income per household is less in the Launceston LGA than in the rest of Tasmania.



## Motor vehicles

Ninety percent (90%) of households in the Launceston LGA have one or more motor vehicles.



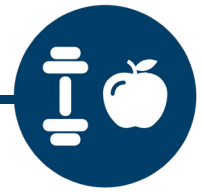
## Home ownership

Fewer people in the Launceston LGA own their homes outright, compared to the rest of Tasmania.

	Launceston	Tasmania
Owned outright	32%	37%
Owned with mortgage	31%	33%
Rented	34%	26%

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

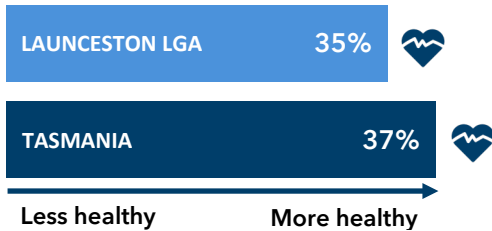
# Healthy living



## Self-reported health

Thirty-five per cent (35%) of Launceston 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’



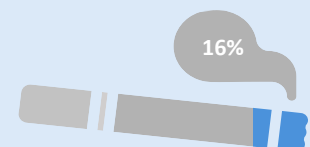
How people feel about their own health, their state of mind and their life in general is a common measure of health. *(Australia’s Health 2018. AIHW)*

## Risk factors

Risk factors are conditions or behaviours that make it more likely people will get a chronic condition or health problem.

	Launceston	Tasmania
<b>Overweight/obese body mass index (BMI)</b>	62%	62%
<b>Current smoker</b>	16%	15%
<b>Daily/occasional vaping</b>	4%	3%
<b>Single occasion risky drinking (&gt;4 alcoholic standard drinks)*</b>	40%	37%
<b>Insufficient moderate/vigorous activity<sup>†</sup></b>	24%	24%
<b>Did not meet recommended daily vegetable intake<sup>‡</sup></b>	93%	91%
<b>Did not meet recommended daily fruit intake<sup>‡</sup></b>	63%	61%

In the Launceston LGA, around 16% 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

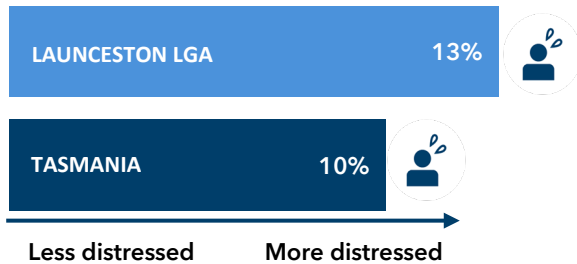
# Healthy living



## Psychological distress

More adults in the Launceston 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



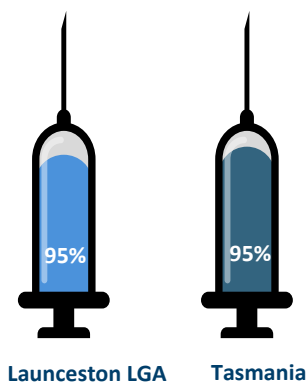
Psychological distress is a term used to describe unpleasant feelings or emotions that can influence how we function in daily life.

# Health care



## Immunisations

Ninety-five per cent (95%) of children in the Launceston LGA are fully immunised by the age of five, which is similar to the rate for Tasmania.



CHILDREN FULLY IMMUNISED AT 5 YEARS OF AGE

## GP and emergency department encounters



Eighty-two percent (82%) of people from the Launceston LGA saw a general practitioner for their own health in the past twelve months\*.



On average each year during 2022-2024, 9,868 individuals from the Launceston LGA visited an ED (137 people per 1,000 population<sup>^</sup>), with an average of 21,760 presentations per year (303 ED presentations per 1,000 population<sup>^</sup>)

<sup>^</sup>Estimated population for June 2023=71,788

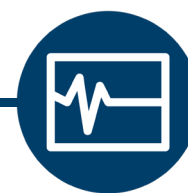
Sources: Psychological distress and GP encounters: Tasmanian Population Health Survey 2022 Local Government Areas (LGA) Supplementary Data Tables.

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.

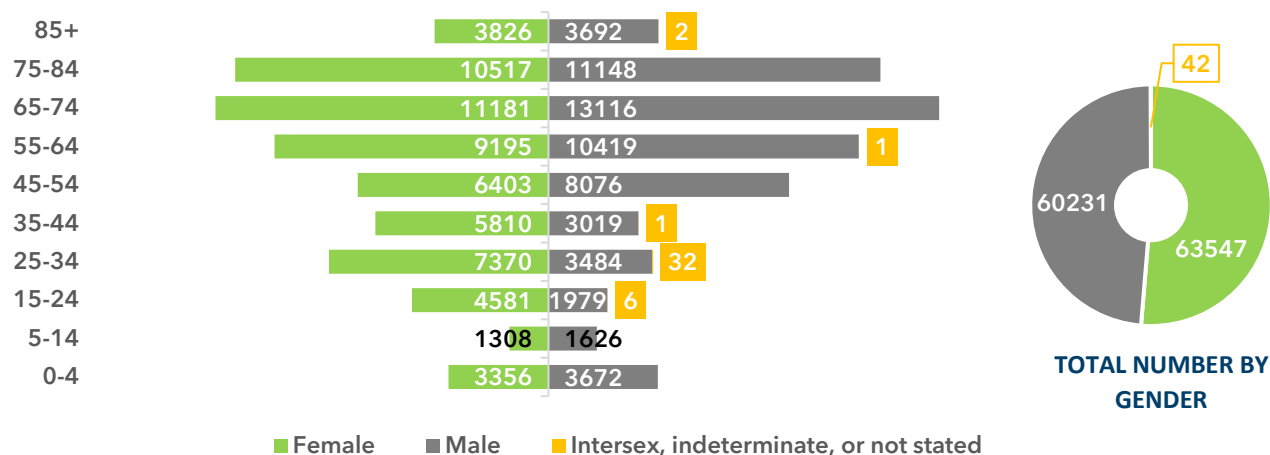
# Health outcomes



## Public hospital admissions

During the five years from 2020-21 to 2024-25 there were 123,820 admissions to Tasmanian public hospitals from the Launceston LGA area, with 48,996 overnight stays.

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



TOP 10 PRIMARY HOSPITAL DIAGNOSIS <sup>*^</sup>	TOP 10 CHARLSON COMORBIDITIES <sup>**</sup>	TOP 10 POTENTIALLY PREVENTABLE HOSPITALISATIONS
Care involving dialysis	Renal disease	Chronic obstructive pulmonary disease
Liveborn infants according to place of birth	Any malignancy, including lymphoma and leukaemia, except malignant neoplasm of skin	Urinary tract infections
Other cataract	Chronic pulmonary disease	Iron deficiency anaemia
Single spontaneous delivery	Cerebrovascular disease	Cellulitis
Single delivery by caesarean section	Congestive heart failure	Congestive heart failure
Crohn's disease (regional enteritis)	Myocardial infarction	Asthma
Abdominal and pelvic pain	Metastatic tumour	Diabetes complications
Multiple sclerosis	Diabetes without chronic complication	Dental conditions
Other chronic obstructive pulmonary disease	Dementia	Convulsions epilepsy
Benign neoplasm of colon, rectum, anus and anal canal	Diabetes with chronic complication	Angina

\*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



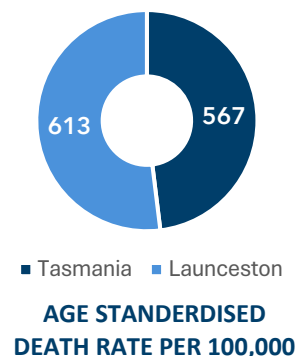
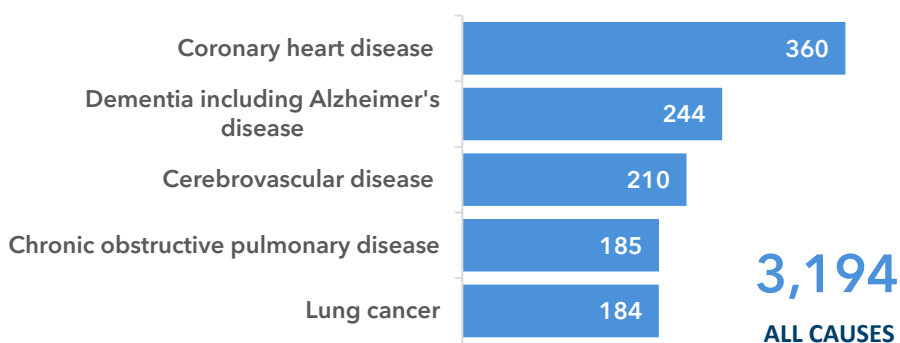
^The *primary hospital diagnosis* is the diagnosis established after study (for example, at the completion of the episode of care) to be chiefly responsible for causing the episode of admitted patient care. It is essentially the main reason someone needed to be admitted to hospital.

^^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 (11.3%), dementia including Alzheimer disease (7.6%), cerebrovascular disease (6.6%), chronic obstructive pulmonary disease (5.8%) and lung cancer (5.0%) were the leading causes of the 3,194 deaths in the Launceston LGA area. The age standardised death rate in 2019-2023 was 613 per 100,000 compared with the overall age 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](http://primaryhealthtas.com.au) and search for [Community Health Checks](#) or email [info@primaryhealthtas.com.au](mailto: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](http://www.phnexchange.com.au).*