MURTOA TOWN PROFILE 2022



Murtoa was originally Marma Gully, renamed Murtoa in 1870. Its name means 'home of the lizard' in a local Traditional Language. Located in the Yarriambiack Shire it is 31.1kms from Horsham and 55kms from Warracknabeal.

Murtoa sits in prime agricultural production land and the remains of a strong and busy town are still visible. This is a community with a strong sense of self. Pride in heritage is evident in the iconic Stick Shed complex and in other features and events. Though only a short drive from the large centre of Horsham, Murtoa maintains a variety of services and utilises an extensive park complex centred around Lake Marma for both local and tourism opportunities. Sporting clubs and facilities are well-used and the local Neighbourhood House has long been a social gathering point as well as a centre for community activities.

WHO IS MURTOA?



Population 897



Country of Birth
(Other than Aus)
England, India,
Scotland, Germany
and The Philippines





Households 37.5% Single Person 60.2% Family



3.3% of Households speak a language other than English

Families

- Couple without children 44%
- Couple with children 36.9%
- One Parent **15.4%**

WWHS IN MURTOA

Facilities: Community Health Centre

Services:

- Community Nursing
- Diabetes Education
- Dietetics
- Exercise Groups
- Health Education & Promotion
- Occupational Therapy
- Packaged Care
- Physiotherapy
- Podiatry
- Social Work
- Speech Therapy
- Social Support Group

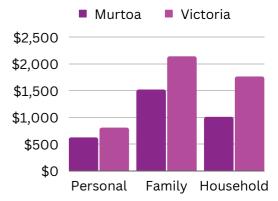
Top Employment Industries

- Hospitals / Health Services
- Other Grain Growing
- Combined Primary and Secondary Education
- Grain-Sheep or Grain-Beef Cattle Farming
- Aged Care Residential Services



are Aboriginal or Torres Strait Islander

Median Weekly Income



MURTOA IS KNOWN FOR:

Lake Marma, Murtoa Stick Shed and birth place of Amalie Sara Coloquhoun, Joyce Lee, Chris Crether, Hugh Delahunty and John Cade.





HOW HEALTHY IS MURTOA'S LGA (YARRIAMBIACK SHIRE)?

Traditionally, health has been measured in rates of illness and disease. When people experience these it can have a larger impact on other aspects of their lives and on society. This is known as the burden of disease. There are systems of reporting that can give high-level information about the burden of disease to local government or post-code areas. These include the following sources: ABS Census, PHIDU Social Health Atlas of Australia, VAHI Victorian Population Health Survey, Dental Health Services Victoria Oral Health Profiles and data from the Crime Statistics Agency.

5 year olds with full immunisation

94.9%





4.1% of adults have been diagnosed with heart disease

Potentially preventable hospital admissions is **30%** above the national average



102 policerecorded family incidents in 2022



Potential years of life lost due to premature deaths is 67% above the national average

10% have a profound or severe disability



CANCER

3.1%

of adults have cancer (inc. remission

participate in 60.6%

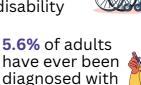
breast screening

participate in 46.1%

bowel screening

49.2%

participate in cervical screening





Adults with anxiety or depression

Females - 41.1% Males - 32%

4.2% of adults have three or more selected (see page 4) chronic diseases

decayed, missing or filled baby or adult tooth

Children with at least one



33% - 0-5 vears **59%** - 6 years

In the Yarriambiack Shire:

- People have similar rates as the state in cancer screening participation, except cervical which is slightly lower than state
- The rate of females having anxiety or depression is higher than males, which is the same as the state
- The proportion of males and females having anxiety or depression is higher in Yarriambiack compared to the state
- Hospital admissions for preventable conditions is similar to the Australian average
- Police-recorded family incidents is similar to the state rate
- Children with tooth decay at public services is slightly higher than the state

This comparison highlights the areas most in need of improvement for Yarriambiack. Some things that could be done to help in these areas are:

- More mental health services
- Increased education on oral hygiene

WELLBEING IN MURTOA'S LGA (YARRIAMBIACK SHIRE)

Wellbeing is derived from far more than physical health. Other factors – the social determinants of health – also impact on both physical and mental wellbeing. Once again, national and state-wide data can give us a high level picture of wellbeing in Murtoa.







Highest level of Educational Attainment*

Bachelor Degree and above	12.4%
Advanced Diploma and Diploma	9.8%
Certificate III or IV	17.6%
Year 10,11 or 12	34.1%
Certificate I or II	0%
Year 9 or below	13.8%

10.8% 65 and over are Seniors Health Card holders

8.8% Receive long-term unemployment benefit

Low income, welfare-dependent families (with children)

29.5% current smokers (daily and occasional)

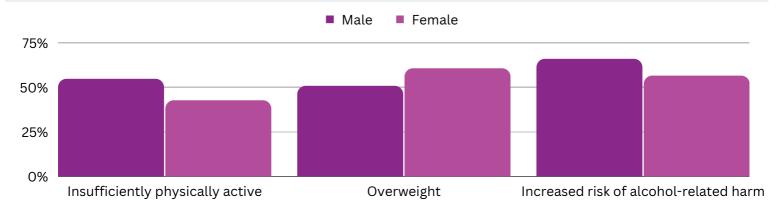


13.3% consume sugar-sweetened soft drinks daily



55.8% do not meet dietary guidelines for either fruit or vegetable consumption





Key differences in the Yarriambiack Shire Local Government Area compared to state averages are:

- The proportion of current smokers is almost double the Victorian average
- Higher proportion of males who are insufficiently active
- Higher proportion of females who are overweight

While this data is collected at the Local Government Area level, when considered in the context of Murtoa's demographics, some key influencing factors are:

- Most people work in the farming industry (especially grain farming) which due to the increase of machinery use has led to farmers being less active in their daily work
- There is a significant proportion of older adults who may have mobility issues or limited ability to participate in physical activity
- Lower median income which can affect people's ability to access resources to support health and wellbeing, and can contribute to higher rates of unhealthy behaviours such as smoking
- Higher proportion of people who live alone

^{*}Data at town level not LGA

This is the first edition of Murtoa's Health and Wellbeing Profile. For this version, we are providing a more in-depth look at chronic disease statistics. In future versions, we will include a page on the outcomes of our 5 Top Things survey. This specific local survey will be Murtoa's opportunity to identify what matters most about health and wellbeing to the people who live here.

HOW DOES MURTOA COMPARE?

Dementia (inc. Alzheimer's)

Murtoa 0.9%

Victoria 0.7%

Kidney disease

Murtoa 1.1%

Victoria 0.9%

Lung condition

Murtoa 3.8%

Victoria 1.5%

Stroke

Murtoa 1.6%

Victoria 0.9%

Cancer (inc. remission)

Murtoa 3.1%

Victoria 2.8%

Asthma

Murtoa 11.3%

Victoria 8.4%

Diabetes (Type I and Type II)

Murtoa 6.8%

Victoria 4.7%

Mental health condition

Murtoa 12.3%

Victoria 8.8%

Arthritis

Murtoa 14.9%

Victoria 8.0%

Heart disease

Murtoa 4.1%

Victoria 3.7%

Other long-term conditions

Murtoa 10.1% Victoria 8.0%

PRIORITIES FOR MURTOA

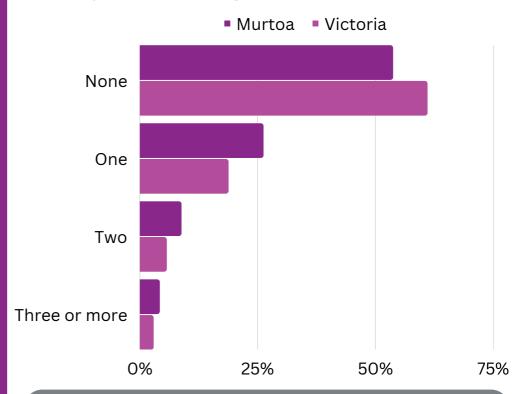
The regional health promotion priorities for the Wimmera and Southern Mallee are:

- Healthy Eating
- Active Living
- Social Connection
- Reduction of Harm from Tobacco and Alcohol

Foundational activities for the WWHS Health Promotion team include:

- Cafe Health
- 3in1 Towards a Healthy Town
- WWHS Community Health
 & Wellbeing grants
 projects:
 - Murtoa Community Pool Come and Try Days

How many of the above long-term conditions do people have?



Strategic Health Promotion work in Murtoa is governed by the four regional priorities (listed left), but activities in each location are adjusted to local settings.