BENDIGO HEALTH

LODDON MALLEE
PUBLIC HEALTH UNIT

Greater Bendigo Community Profile

2026

This document has been prepared to provide a data profile on the health and wellbeing of the local government area of Loddon Mallee. It contains publicly available data that has been collated and summarised to inform local government, health services, advocacy and community groups.

Every effort has been made to report data accurately and represent the data available at the time of publishing. These estimates may differ from those seen elsewhere due to differences in calculation methodologies and/or source data used.

We acknowledge the First Peoples of Australia who are the Traditional Custodians of the land and water where we live, work and play. We celebrate that this is the oldest living and continuous culture in the world. We are proud to be sharing the land that we work on and recognise that sovereignty was never ceded.

We welcome all cultures, nationalities and religions. Being inclusive and providing equitable healthcare is our commitment.

Loddon Mallee Public Health Unit

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Produced by Bendigo Health, Loddon Mallee Public Health Unit.
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Table of Contents

Data snapshot

The City of Greater Bendigo (Greater Bendigo) local government area (LGA) is a major regional centre in central Victoria with a population of 121,470 people (2021) and a median age of 40 years, slightly older than the Victorian average. The area includes Bendigo and surrounding townships, with an economy increasingly driven by health, education, retail, government and tourism.

Greater Bendigo had a higher proportion of Aboriginal and Torres Strait Islander residents (2.3%) than the state average, with a much younger median age (22 years) compared with the general population of Greater Bendigo. Most residents were Australian-born and English speaking, though Karen, Mandarin and Malayalam were among the most common other languages spoken at home. The region also had higher rates of profound or severe disability and National Disability Insurance Scheme participation compared with Victoria. Experiences of discrimination and violence against women were higher than the state average.

Socio-economic data showed areas of disadvantage, particularly around Bendigo and Heathcote, with lower median incomes, fewer university qualifications, more low-income households and declining rental affordability. Although unemployment was slightly lower than the state rate, homelessness was marginally higher. One-parent families and couple families without children were more common than the Victorian average.

Health risk factors present several notable challenges. Rates of alcohol-related harm, obesity, sugar-sweetened beverage consumption and sunburn were higher than the Victorian average. Childhood developmental vulnerability and family violence incident rates were also higher. Encouragingly, smoking and food insecurity have declined and participation in bowel, breast, cervical and skin cancer screening programs exceeded state averages.

Chronic disease was a significant concern in Greater Bendigo, with higher rates of multiple long-term health conditions, placing sustained pressure on individuals, families and local health services.

This snapshot highlights the indicators where the Greater Bendigo LGA is statistically different to expected levels* or in the absence of statistical analysis, ranks in the top ten of Victoria's 79 LGAs.

Areas of strength compared to Australian or Victorian measures

Areas of concern compared to Australian or Victorian measures

Health risk factors	
Obesity	
Breast screening	
Sexual violence against women	
Health conditions	
Mental health	
Asthma	
Cancer	
Arthritis	
Heart disease	
Kidney disease	
Lung condition	
Stroke	
Avoidable deaths	
Circulatory system	
Diabetes	
Cancer	
Respiratory system disease	
Obstructive pulmonary disease	
Colorectal cancer	
External causes	
Premature mortality	

*Comparison may be with Victorian or Australian data based on primary data source

Local government area summary: Greater Bendigo

The City of Greater Bendigo is located in central Victoria, approximately 150 km north of Melbourne. With a population of 121,470 (2021)[1], it is one of the largest regional cities in the state. Bendigo serves as a major service and economic hub for surrounding rural areas, with its economy driven by sectors such as healthcare, education, manufacturing, retail, and tourism. The city's rich history, particularly its gold mining past, remains a key tourist draw, alongside its art galleries, heritage buildings and cultural events.

Employment in Greater Bendigo is diverse, with many working in healthcare, education, public administration, and construction. The region is also experiencing growth in renewable energy, advanced manufacturing and agriculture.

Land use is a mix of urban, industrial, and rural zones. Bendigo's city centre is a focal point for commercial activity, while its surrounding areas feature farmland, conservation reserves, and residential developments.[2] According to geographical remoteness classifications, the region comprises of two Modified Monash Model categories (2 and 5), reflecting its regional status with access to services and surrounding smaller rural towns.

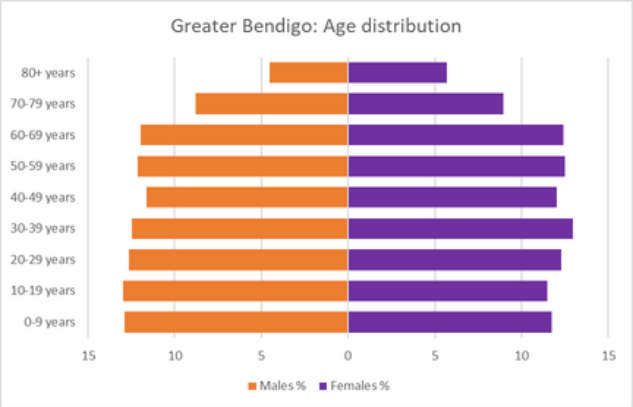
The traditional owners of the lands in the region are the Dja Dja Wurrung and Taungurung people, who have a deep cultural and spiritual connection to the land and its natural resources, particularly the waterways and forests.

[1] Australian Bureau of Statistics, 2021
[2] Land use and management, Department of Agriculture, Fisheries and Forestry, 2023
[3] Modified Monash Model | Australian Government Department of Health and Aged Care;

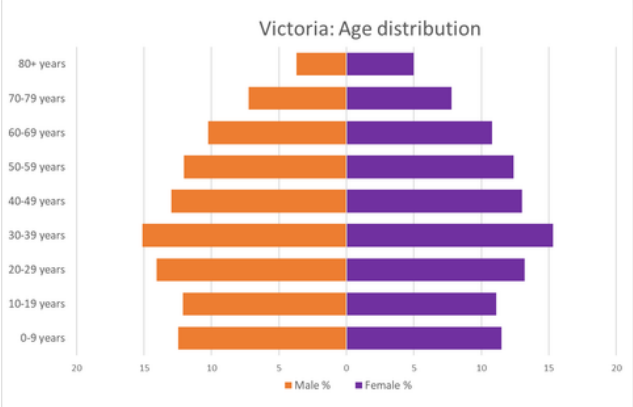
1. Population

Greater Bendigo's population profile, based on Australian Bureau of Statistics (ABS) data obtained from the 2021 Census revealed a slightly older demographic compared with Victoria. The median age was 40 years, slightly higher than the state median of 38 years. The percentage of people aged 70 years and above was also higher in Greater Bendigo (14%) compared with the state proportion (11.9%). The male to female ratio was slightly skewed towards females.

121,470 people resided in Greater Bendigo in 2021
40yrs was the median age in Greater Bendigo (Victoria 38yrs) in 2021



Source: Australian Bureau of Statistics, 2021



Source: Australian Bureau of Statistics, 2021

	Greater Bendigo (n)		Greater Bendigo (%)		Victoria (%)	
Age groups	**Male**	**Female**	**Male**	**Female**	**Male**	**Female**
0-9 years	7597.0	7,338	12.9	11.7	12.5	11.5
10-19 years	7637	7176	13.0	11.5	12.1	11.1
20-29 years	7,438	7,679	12.6	12.3	14.1	13.2
30-39 years	7342	8101	12.5	12.9	15.1	15.3
40-49 years	6841	7522	11.6	12.0	13.0	13.0
50-59 years	7,149	7823	12.1	12.5	12.0	12.4
60-69 years	7038	7,775	12.0	12.4	10.2	10.8
70-79 years	5,184	5602	8.8	9.0	7.2	7.8
80+ years	2662	3574	4.5	5.7	3.7	5.0
Total	58,884	62,586	100	100	100	100

Source: Australian Bureau of Statistics, 2021

2. Priority groups

2.1 Indigenous peoples

Greater Bendigo had a higher Indigenous population (2.3%) compared with the Victorian proportion (1%). The median age of Greater Bendigo's Indigenous population was younger at 22 years, compared to the state median of 24 years.

The Indigenous median age was considerably younger than the average of the total region's population (40 years).

Indigenous status	Greater Bendigo (n)	Greater Bendigo (%)	Victoria (n)	Victoria (%)
Aboriginal and/or Torres Strait Islander	2,743	2.3	65,646	1
Non-Indigenous	112,430	92.6	6,148,188	94.5
Indigenous status not stated	6,266	5.2	289,665	4.5
Median age of Indigenous Population (years)	22		24	

Source: Australian Bureau of Statistics, 2021

Murray Primary Health Network's First Nations Health and Healing report provides an overview of the current state of First Nations health drawing on data and consultation with First Nations Peoples.

2.2 Multicultural communities

A majority of Greater Bendigo's residents, accounting for 90.1% of the total population, were Australian citizens with 84.6% being born in Australia. Only 4.8% of residents were not Australian citizens. Language use patterns revealed that a vast majority (87.8%) of residents speak English only. However, a small percentage (1.2%) speak other languages and do not use English well or at all which was less than the Victorian proportion (4.4%).

England was the top country of birth outside of Australia

Country of birth, top responses	Greater Bendigo (n)	Greater Bendigo (%)	Victoria (%)
Australia	102,810	84.6	65.0
England	2,095	1.7	2.7
India	1,239	1	4
New Zealand	868	0.7	1.5
Myanmar	787	0.6	0.2
Thailand	776	0.6	0.3

Source: Australian Bureau of Statistics, 2021

Language used at home other than English, top responses	Greater Bendigo (n)	Greater Bendigo (%)	Victoria (%)
Karen	1,597	1.31	0.1
Mandarin	570	0.5	3.4
Malayalam	495	0.4	0.4
Punjabi	464	0.4	1.6
Tagalog	240	0.2	0.4
English only used at home	106,692	87.8	67.2
Households where a non-English language is used	3,310	7.1	30.2
Uses other languages and speaks English not well/not at all	1,426	1.2	4.4

Source: Australian Bureau of Statistics, 2021

Of those who do not speak English well or not at all, the top native languages were (number):

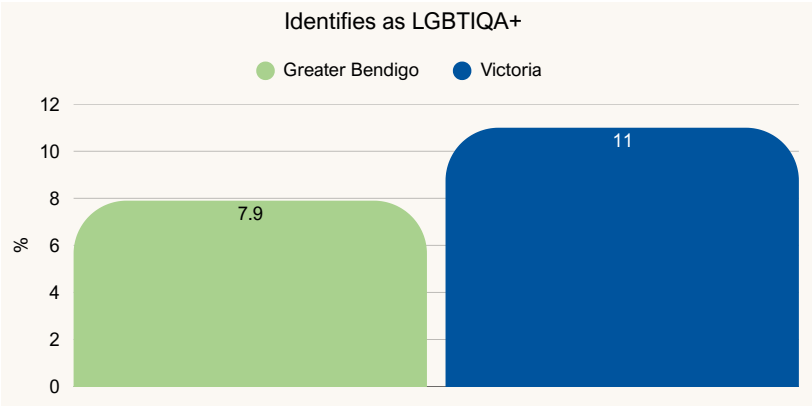
- Mandarin (156)
- Malayalam (37)
- Cantonese (28)
- Punjabi (26)
- Greek (23)

2.3 LGBTIQA+ population

LGBTIQA+ people (lesbian, gay, bisexual, transgender, intersex, queer, asexual and other sexually or gender diverse people) encounter disproportionately higher rates of exclusion, discrimination and harassment across various social environments, including in the workplace. LGBTIQA+ Victorians face increased levels of violence, harassment and discrimination, with:

- 58% of LGBTIQA+ Victorians having faced unfair treatment based on sexual orientation
- 78% of trans and gender diverse Victorians have faced unfair treatment based on their gender identity
- 33% of LGBTIQA+ Victorians from multicultural backgrounds, have faced unfair treatment based on their ethnicity, cultural identity or heritage.

The proportion of Victorians identifying as LGBTIQA+ has increased from 5.7% (2017) to 11% (2023) which suggests that people are more comfortable with identifying as LGBTIQA+ however it likely remains underreported.[1] In Greater Bendigo, 7.9% of people identified as LGBTIQA+, lower compared with Victoria (11%)



Source: Victorian Population Health Survey 2023, Unpublished data

Note: Data should be interpreted with caution as:

- some LGAs have a high relative standard error based on model estimation and survey sampling sizes.
- estimates are crude estimates and not age-standardised
- LGA estimates should not be used to compare against each other or for the same LGA over time because the sample size is not large enough to detect significant differences with adequate power,
- LGA estimates can be used to compare with the Victorian estimate

1. Victorian Population Health Survey 2023, Unpublished data

2.4 People with disabilities

Data on disability show that the proportion of people with a profound or severe disability in Greater Bendigo, all ages and ages 0 to 64 years, were higher than Victorian proportions. These data indicate the majority of people with a profound or severe disability aged 0 to 64 years were living and being cared for in households (4.7%) rather than long-term accommodation (0.1%).

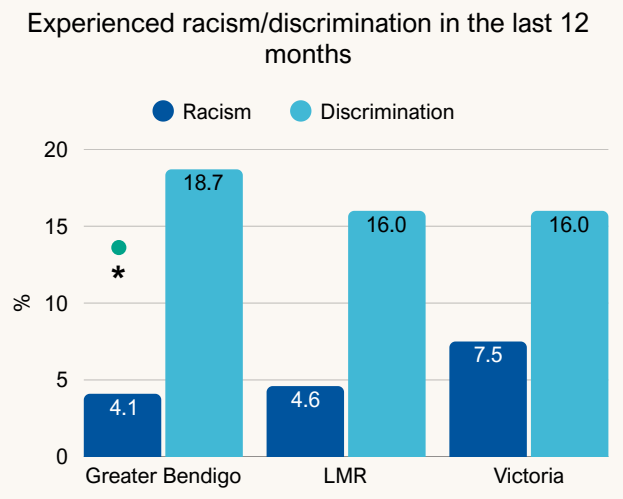
Disability indicators	Greater Bendigo (n)	Greater Bendigo	Victoria
People with a profound or severe disability, includes people in long-term accommodation (all ages), 2021	8,558	7.4%	6.1%
People with a profound or severe disability and living in households (all ages), 2021	7,566	6.6%	5.4%
People with a profound or severe disability, includes people in long-term accommodation (0 to 64 years), 2021	4,406	4.8%	3.3%
People with a profound or severe disability and living in households (0 to 64 years), 2021	4,338	4.7%	3.2%
Estimated number of total persons, living in households, with moderate or mild core activity limitation (modelled estimates, 2018)	12,604	10.4 ASR^	na

Source: PHIDU Torrens University Australia
^Average annual ASR per 100. Age-standardised rate (ASR) is used to remove the effect of the differing age distributions that we can make conclusions about the relative decreases or increases in mortality over time.

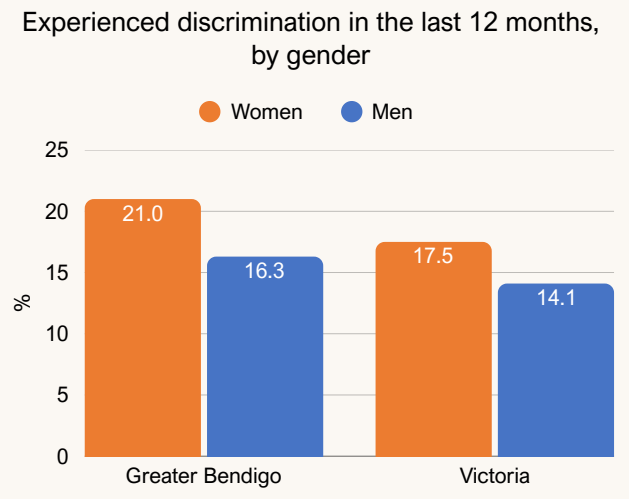
2.5 Racism and discrimination

On an individual level, racism refers to the beliefs and attitudes members of certain groups have of their superiority in relation to other groups who were regarded as inferior based on race, ethnicity or cultural background (Sanson et al, 1998).

Racism was defined as experiences of discrimination due to First People's status, skin colour, nationality, race, ethnic group or language spoken at home. Discrimination was defined as experiences of discrimination due to gender identity, sexual orientation or intersex status.



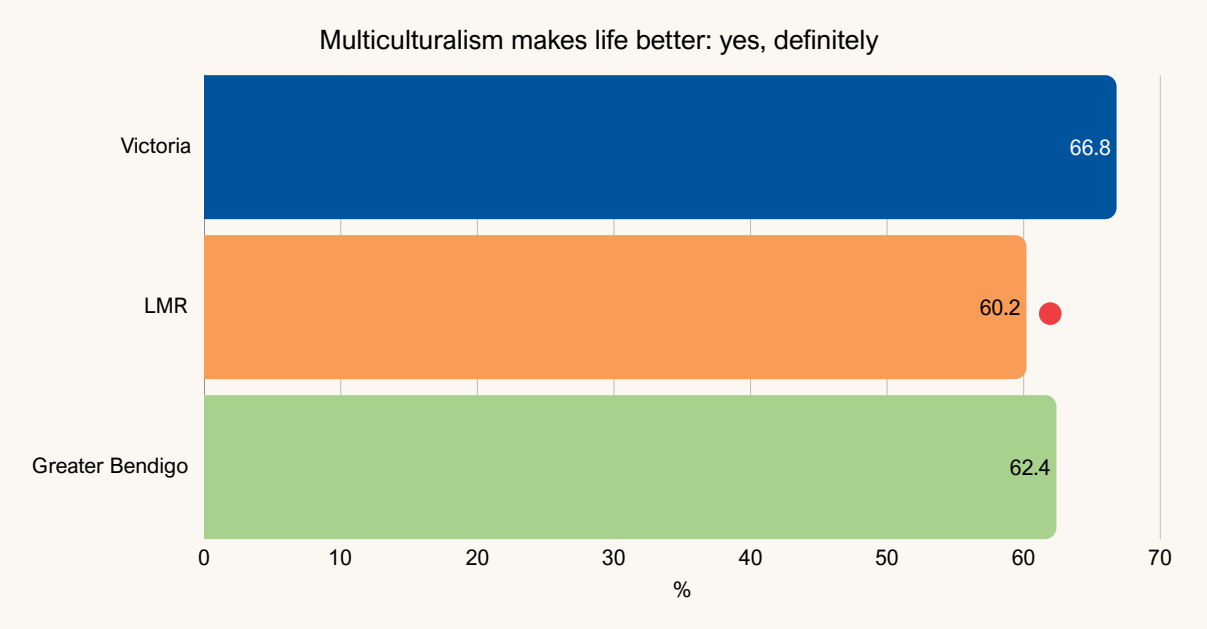
Source: Victorian Population Health Survey 2023, age-adjusted
*high relative standard error so interpret with caution
● Statistically significantly lower compared to Victoria



Source: Victorian Population Health Survey 2023, age-adjusted

Greater Bendigo had a lower proportion of racism experienced in the last 12 months, compared with Victoria but a higher proportion of people experiencing discrimination. A higher proportion of women (21%) reported discrimination in the last 12 months, compared with men (16.3%).

To measure tolerance of diversity, adults were asked if multiculturalism makes life better. In Greater Bendigo there were fewer people who felt that multiculturalism definitely makes life better, compared to Victoria.



Source: Victorian Population Health Survey 2023, age-adjusted.
● Statistically significantly lower compared to Victoria

3. Determinants of health

3.1 Areas of disadvantage

The Index of Relative Socio-economic Disadvantage (IRSD) is a general socio-economic index that summarises a range of information about the economic and social conditions of people and households within an area.

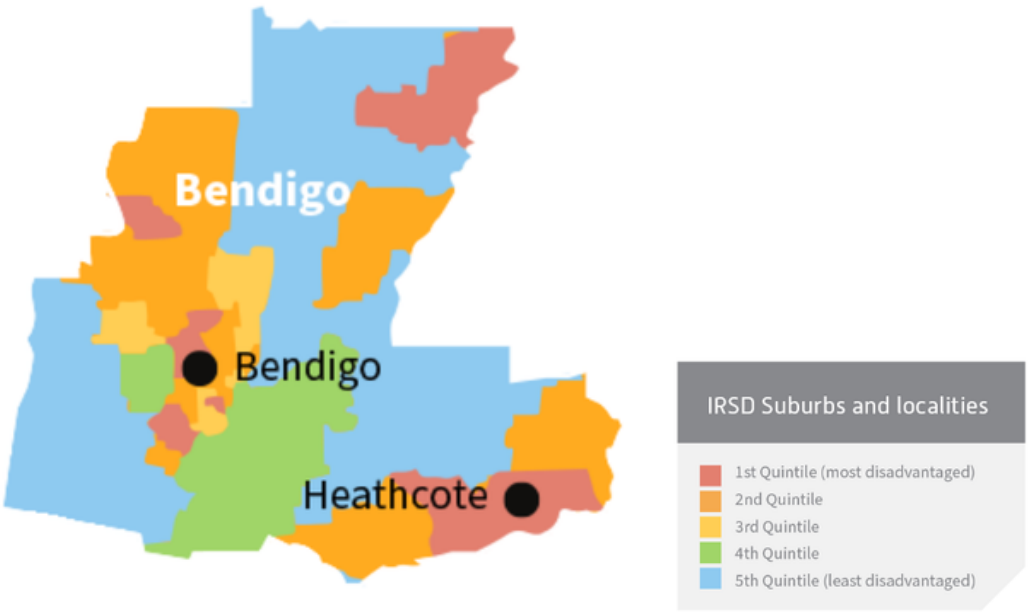
A low score indicates relatively greater disadvantage. For example, an area could have a low score if there are: many households with low income, or many people without qualifications, and many people in low skilled occupations.

A high score indicates a relative lack of disadvantage. For example, an area may have a high score if there are: few households with low incomes, few people without qualifications, few people in low skilled occupations.

Within Greater Bendigo there were five Australian quintile areas of disadvantage, with areas of most disadvantage around Greater Bendigo and Heathcote. The average IRSD score for Greater Bendigo was 985 (2021), which ranked Greater Bendigo as the 27th most disadvantaged LGA in Victoria.

LGA, 2021	IRSD Score	Victorian LGA ranking^
Mildura	940	5
Swan Hill	941	7
Loddon	948	11
Gannawarra	952	14
Campaspe	965	19
Buloke	972	24
Greater Bendigo	**985**	**27**
Mount Alexander	1007	47
Macedon Ranges	1063	73

Source: ABS: Census of population and Housing: Socio-Economic Indexes from areas (SEIFA), 2021
^Rank 1 = most disadvantage, rank 79 = least disadvantage



Source: Socio-Economic Index for Areas, ABS, 2021

3.2 Educational attainment

Type of educational institution attending

Greater Bendigo had a higher percentage of the population attending preschool, primary, secondary education and vocational education compared to the state average. However, the region had a lower percentage of people attending university or other higher education compared with the state-wide average, with Greater Bendigo at 10.8% and Victoria at 16.6%.

People attending an educational institution	Greater Bendigo (n)	Greater Bendigo (%)	Victoria (%)
Preschool total	2,576	7.3	7.1
Primary total	10,102	28.7	26.5
Secondary total	7,751	22	21
Tertiary: Vocational education (including TAFE and private training providers)	2,890	8.2	7.9
Tertiary - University or other higher education	3,808	10.8	16.6
Tertiary total	6,715	19.1	24.5

Source: Australian Bureau of Statistics, 2021

Level of highest educational attainment

The data on the highest educational attainment in Greater Bendigo for people aged 15 years and over reveals a diverse educational landscape, which was comparable to the Victorian educational distribution. Greater Bendigo shows lower percentages of individuals with higher education qualifications (diploma and above) and higher proportions of people with certificate level III and IV qualifications. The region has lower attainment of year 12 (12.6%) compared with Victoria (14.9%).

In Greater Bendigo, 19.7% completed a bachelor degree or higher qualifications (Vic. 29.2%)

Level of highest educational attainment	Greater Bendigo (n)	Greater Bendigo (%)	Victoria (%)
Bachelor degree level and above	19,494	19.7	29.2
Advanced diploma and diploma level	9,005	9.1	9.8
Certificate level IV	4,650	4.7	3.4
Certificate level III	15,069	15.3	10.9
Year 12	12,429	12.6	14.9
Year 11	7,031	7.1	5.7
Year 10	10,094	10.2	7.3
Certificate level II	114	0.1	0.1
Certificate level I	19	0	0
Year 9 or below	9,699	9.8	7.9
Inadequately described	1,877	1.9	2.1
No educational attainment	617	0.6	1.1
Not stated	8,621	8.7	7.6

Source: Australian Bureau of Statistics, 2021, people aged 15yrs and over

3.3 Household income

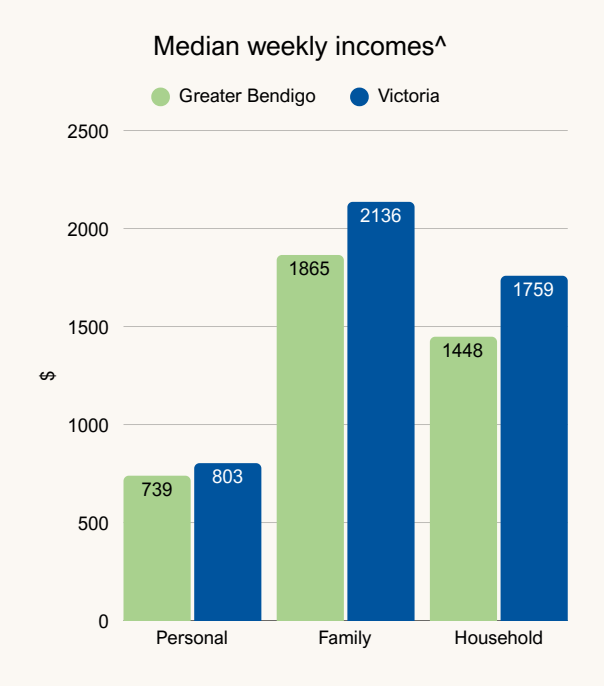
Data on household income for Greater Bendigo, compared with the state of Victoria, gives insights into the income distribution within the community. The median weekly incomes for people aged over 15 years, families and households were all below the state medians. The percentage of occupied private dwellings in Greater Bendigo with a weekly income of less than $650 was 19% and above $3000 was 16.2% compared with the state percentages of 16.4% and 24.2% respectively. This indicates that Greater Bendigo has a greater number of low-income households compared with Victoria.

From 2006 to 2021, the median weekly household income for Greater Bendigo was continuously lower than the Victorian median and the pay gap appears to be widening.

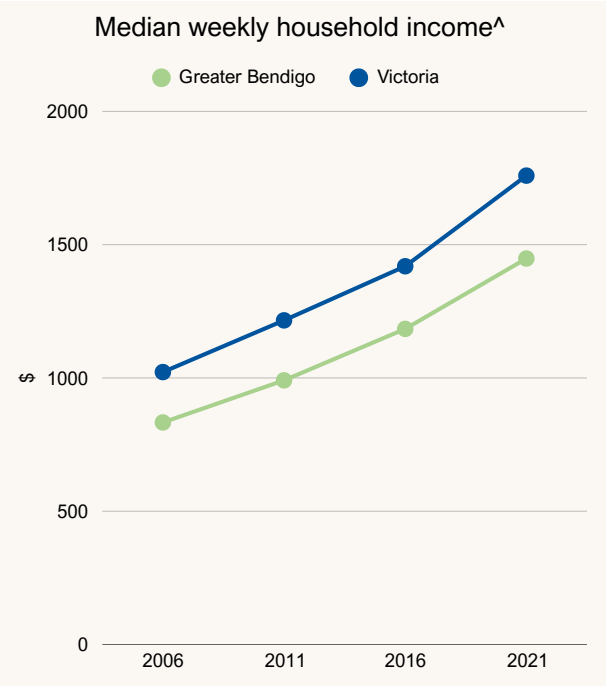
In Greater Bendigo, 46.2% of households were low-income (households in bottom 40% of income distribution), higher compared with Victoria (39.5%).[1]

Occupied private dwellings (excl. visitor only and other non-classified households)	Greater Bendigo (%)	Victoria (%)
Less than $650 total household weekly income	19.0	16.4
More than $3,000 total household weekly income	16.2	24.2

Source: Australian Bureau of Statistics, 2021, Percentages exclude dwellings with 'Partial income stated' and 'All incomes not stated.'



Source: Australian Bureau of Statistics, 2021
^ Incomes are collected in ranges and exclude people, families and households where at least one member aged 15 years and over did not state their income.

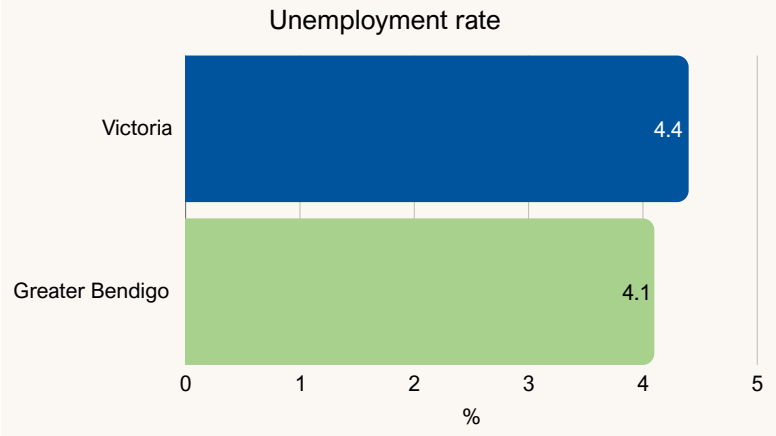


Source: Australian Bureau of Statistics, 2021
^ Incomes are collected in ranges and exclude people, families and households where at least one member aged 15 years and over did not state their income.

[1] Source: Social Health Atlas, 2021

3.4 Unemployment

The psychosocial stress caused by unemployment has a strong impact on physical and mental health and wellbeing. Employment in quality work helps to protect health, instilling self-esteem and a positive sense of identity, while providing the opportunity for social interaction and personal development.



The data represent people aged 18 years and over who are seeking employment and yet to find it.

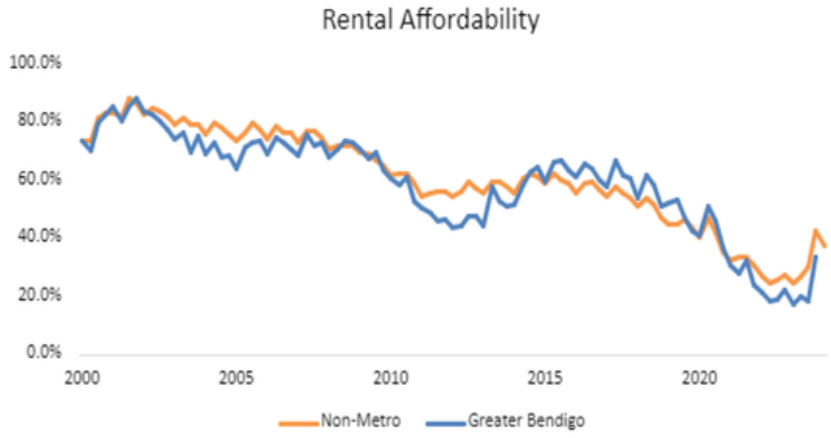
Greater Bendigo's unemployment rate is 4.1%, lower compared to Victoria (4.4%).

Source: Social Health Atlas of Australia: June 2025

3.5 Rental affordability

Median rental prices are continuing to increase and becoming less affordable. The graph below represents affordability of rental homes for lower income households. Greater Bendigo has experienced a decline in rental affordability that was closely related to non-metro areas. Greater Bendigo rental affordability in June 2023 was 19.8% which was lower than Victorian non-metro area (26.9%) in 2023.

In Greater Bendigo, the proportion of low-income households under financial stress from mortgage or rent was lower (23%), compared to non-metro Victoria (27.8%). [1]



Source: Rental Report - Quarterly: Affordable Lettings by LGA - Dataset - Victorian Government Data Directory
The affordability benchmark used is that no more than 30% of gross income is spent on rent
Lower income households are defined as those receiving Centrelink incomes

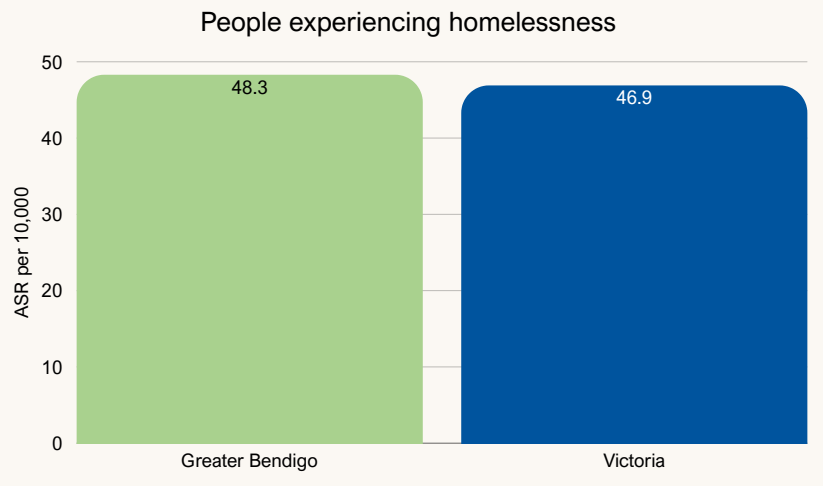
[1] Social Health Atlas of Australia: Victoria, 2021

3.6 Homelessness

Access to safe, adequate housing is central to the health and wellbeing of individuals and families. Secure and affordable housing is the basis for social connectedness and a contributor to the social determinants of health and wellbeing. These data includes:

- living in improvised dwellings, tents or sleeping out
- living in supported accommodation for the homeless
- staying temporarily with other households
- living in boarding houses
- living in 'severely' crowded dwellings.

The age standardised rate of homelessness in Greater Bendigo was 48.3/10,000 population (n=571) while the rate in Victoria was 46.9/10,000 population. [1] This indicates the rate of homelessness was higher in Greater Bendigo compared to the broader state of Victoria. While the overall rate is different between Greater Bendigo and Victoria, the specific challenges and characteristics of homelessness may vary between regions.



Source: Social Health Atlas, 2021

[1] Social Health Atlas of Australia: Victoria, 2021

3.7 Family composition

Couple families without children constitute the largest proportion in Greater Bendigo, accounting for 40.7% of all families, which was higher than the state average of 37.6%. Couple families with children make up 39.7% of all families in Greater Bendigo, which was lower than the state average of 45.5%.

One-parent families represent 18% of all families in Greater Bendigo, which was higher than the state average of 15.2%.

Other families, which may include non-traditional family structures, account for a small percentage (1.6%) in Greater Bendigo, slightly lower than the state proportion of 1.7%.

All families	Greater Bendigo (n)	Greater Bendigo (%)	Victoria (%)
Couple family without children	13,134	40.7	37.6
Couple family with children	12,826	39.7	45.5
One parent family	5,796	18	15.2
Other family	521	1.6	1.7

Source: Australian Bureau of Statistics, 2021

Single (or lone parents)

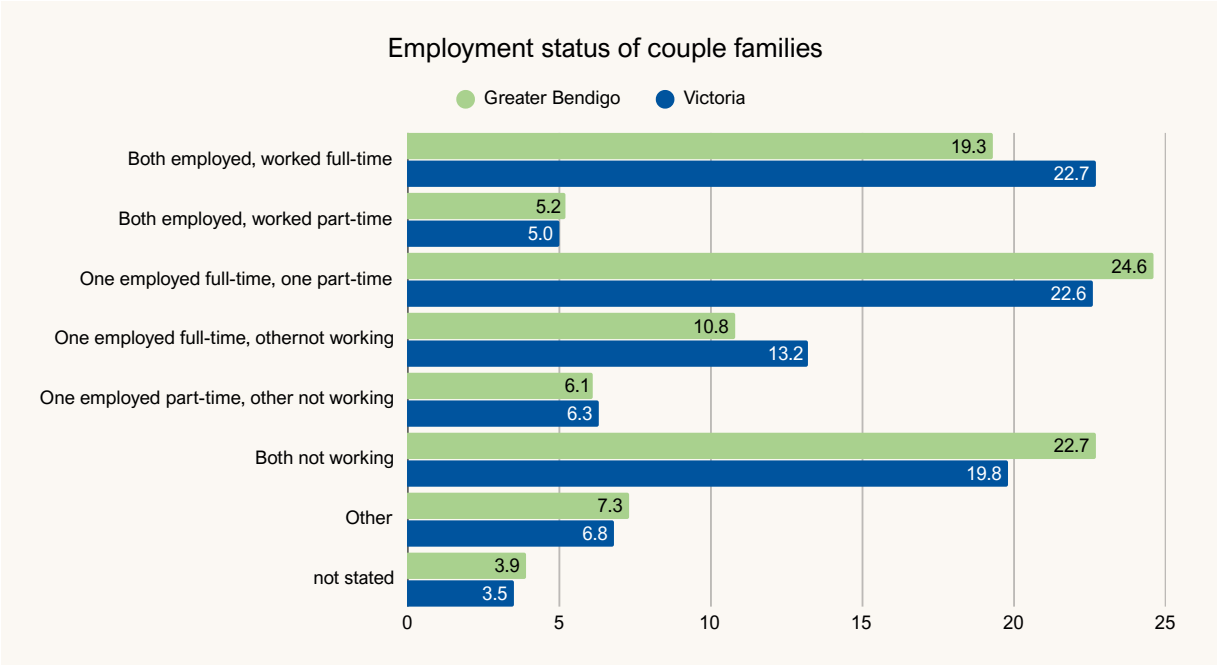
The data indicate the majority of single (or lone) parents in Greater Bendigo were female, constituting a substantial 81.8% of the total single parent population. This percentage was slightly higher than the proportion of female one parent families in Victoria, which was 80.9%.

Proportion of the total single (or lone) parents	Greater Bendigo (%)	Greater Bendigo (%)
Male	18.2	19.1
Female	81.8	80.9

Source: Australian Bureau of Statistics, 2021

Employment status of couple families

In Greater Bendigo, the two most common employment statuses for couple families were one employed full-time, one part-time (24.6%) and both not working (22.7%), both were higher than the Victorian proportion. The high prevalence of parents not working could indicate that they were retired, a lack of employment opportunities but may also be due to caregiving responsibilities, study or other reasons.



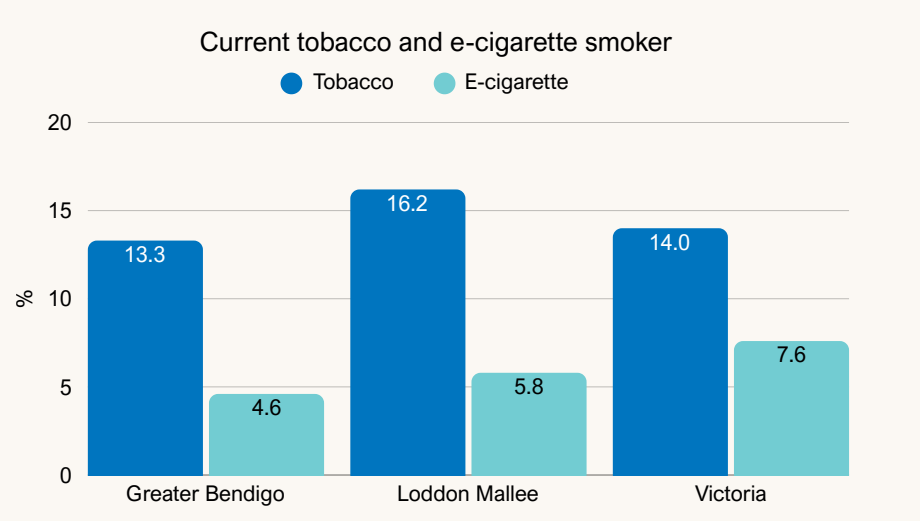
Source: Australian Bureau of Statistics, 2021

4. Health risk factors

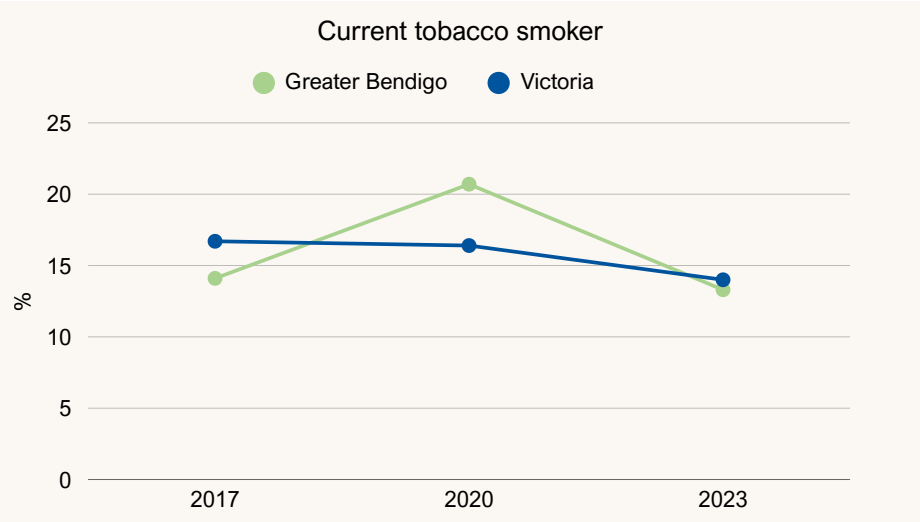
4.1 Smoking and vaping

Smoking increases the risk of chronic diseases such as heart disease, diabetes, kidney disease, eye disease, stroke, dementia, certain cancers (for example, oral cancer), gum disease and respiratory diseases such as asthma, emphysema and bronchitis. Vapes are relatively new compared to cigarettes, so we are yet to see all the long-term effects they may have on the body. What we know now is vaping can damage many parts of the body, including the cardiovascular system, lungs and airways, and the brain and nervous system.[1]

The adult smoking (tobacco) rate in Greater Bendigo was lower, with 13.3% of adults currently smoking compared with 14% in Victoria. The proportion of people currently smoking in Greater Bendigo has declined from 2020 to 2023 by 7.4%.



Source: Victorian Population Health Survey 2023, age-adjusted.



Source: Victorian Population Health Survey, 2023, age-adjusted.
Victorian Population Health Survey, 2020, age-adjusted
Victorian Population Health Survey, 2017, age-adjusted

[1] Quit , effects of vaping on the body

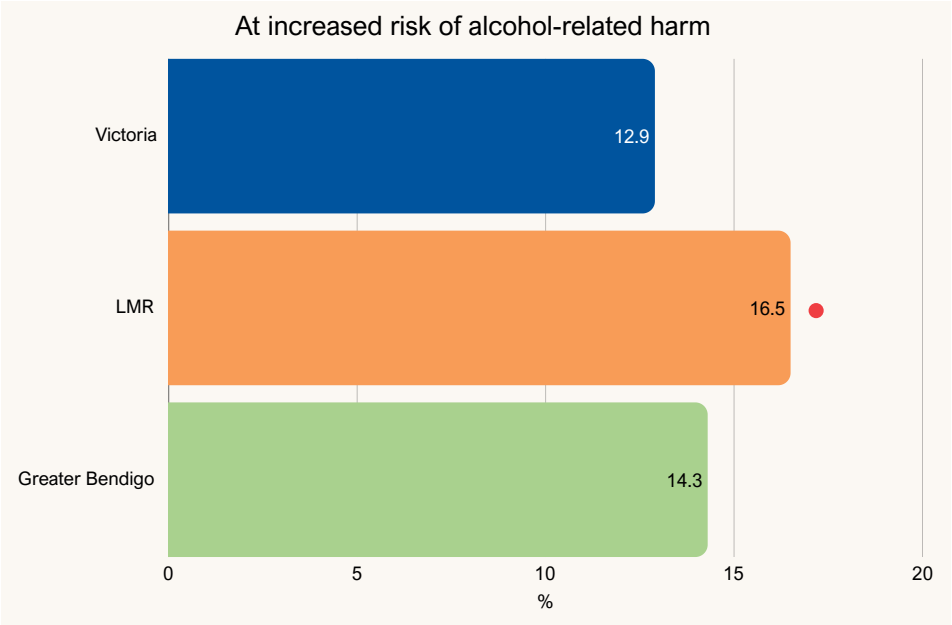
4.2 Alcohol and other drugs

While the impacts of drug use on health and wellbeing can vary, related harms can impact physical health through increased risk of chronic disease, exposure to infectious diseases, and mental health and wellbeing impacts. Adults in the Loddon Mallee region drink alcohol at higher rates than the Victorian average, with 16.5% drinking at levels that increase their risk of alcohol-related harm. Increased risk of alcohol-related harm is greater than 10 standard drinks a week and more than four standard drinks in one day. In Greater Bendigo, the risk of alcohol-related harm was higher at 14.3%, compared to Victoria (12.9%).

In general, it appears Greater Bendigo experiences considerably higher rates of alcohol-related incidents, including deaths and ambulance attendances but lower hospital admissions when compared to Victoria. On the other hand, Victoria has higher rates of deaths and hospital admissions for illicit drug-related issues.

Indicators per 100,000 population	Greater Bendigo	Victoria
Deaths for alcohol-related events, 2021	213.6	141.9
Deaths for illicit drug (any)-related events in, 2021	N/A	0.6
Ambulance attendances for Alcohol Intoxication (w/wo Other Substance), 2022/23	497.2	393.5
Ambulance attendances for Alcohol Only (Intoxication), 2023	407.4	319.7
Ambulance attendances for Illicit Drugs (Any), FY-2022/23	198.7	204.6
Hospital admissions for Alcohol, 2021	443.0	577.9
Hospital admissions for Illicit Drugs (Any), 2022/23	222.7	242.9

Source: Alcohol and other drug statistics in Victoria - AODstats

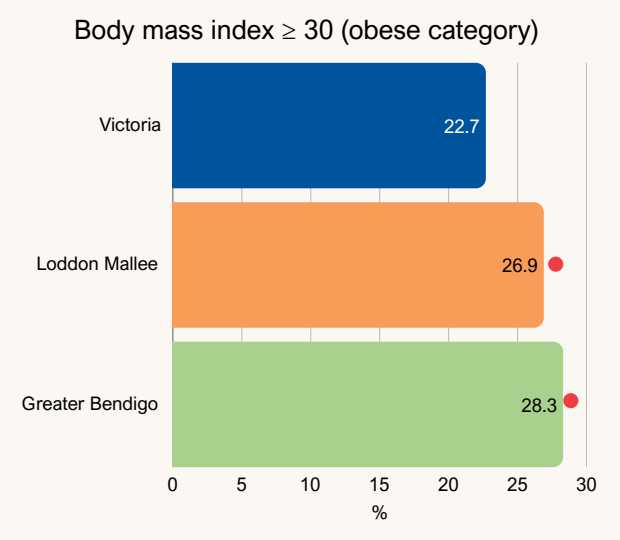


Source: Victorian Population Health Survey 2023, age-adjusted.

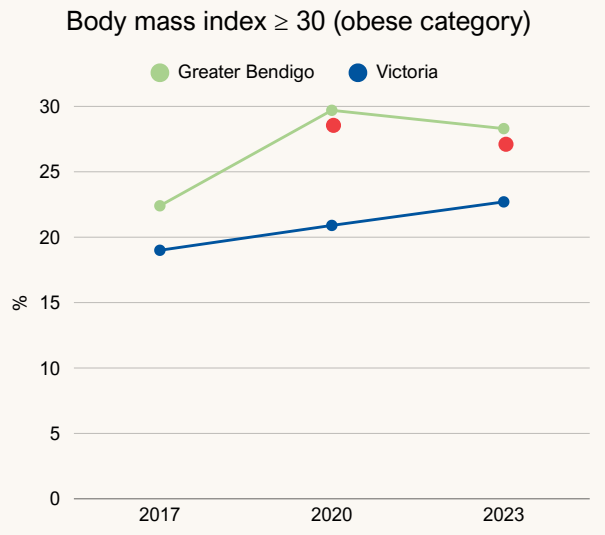
● Statistically significantly higher, compared to Victoria

4.3 Obesity

Obesity contributes to cardiovascular disease, type 2 diabetes, musculoskeletal disorders and some cancers. Recent evidence shows the prevalence of obesity spiked in 2022, when compared to previous five-year trends.[1] In Greater Bendigo, 28.3% of adults had a Body Mass Index ⩾ 30, statistically significantly higher than Victoria (22.7%), however obesity has declined from 2020 to 2023.



Source: Victorian Population Health Survey, 2023, age-adjusted
● Statistically significantly higher compared to Victoria



Source: Victorian Population Health Survey, 2023, age adjusted
Victorian Population Health Survey, 2020, age-adjusted
Victorian Population Health Survey, 2017, age-adjusted
● Statistically significantly higher compared with Victoria

4.4 Healthy eating and active living

Poor diet and lack of exercise contribute to being overweight and obese, which are leading contributors to chronic disease and premature death in Victoria.[1] Greater Bendigo (30.5%) had lower compliance with fruit consumption guidelines compared to Victoria (34.9%), however Greater Bendigo, while still low, had a higher percentage of people meeting the vegetable consumption guidelines. Greater Bendigo had a higher percentage of people consuming sugar-sweetened beverages daily (22.2%), compared with Victoria (19.3%).

Recommended daily intake of fruit 2 serves: a serve is one medium piece or two small pieces of fruit or one cup of diced fruit.

Recommended daily intake of vegetables is 5-6 serves for adults: a serve is half a cup of cooked vegetables or one cup of salad leaves.

LGA	Compliance with fruit consumption guidelines (%)	Compliance with vegetable consumption guidelines (%)	Daily consumption of sugar-sweetened beverages (%)	Moderate to vigorous physical exercise greater than 150mins/day (%)
Victoria	34.9	5.5	19.3	34.9
LMR	31.3	5.3	24.6	34.2
Greater Bendigo	30.5	5.9	22.2	34.6

Source: Victorian Population Health Survey, 2023, age-adjusted

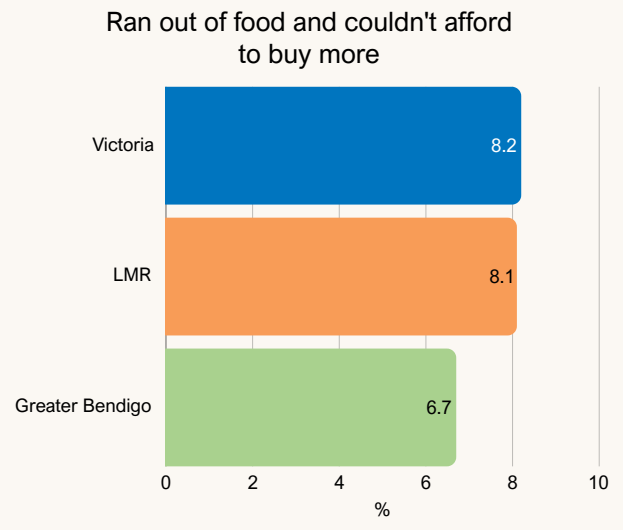
[1] Victorian Population Health and Wellbeing Plan 2023-27

4.5 Food insecurity

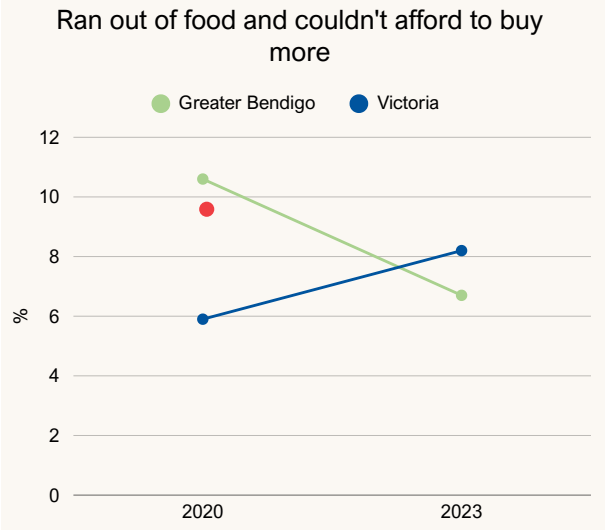
Food security is defined as access by all people at all times to enough food for an active, healthy life and includes at a minimum:

- the ready availability of nutritionally adequate and safe foods
- the assured ability to acquire food in socially acceptable ways.

Food insecurity in Greater Bendigo has decreased from 2020. In 2023, 6.7% of people in Greater Bendigo reported food insecurity, which was lower than Victoria (8.2%).



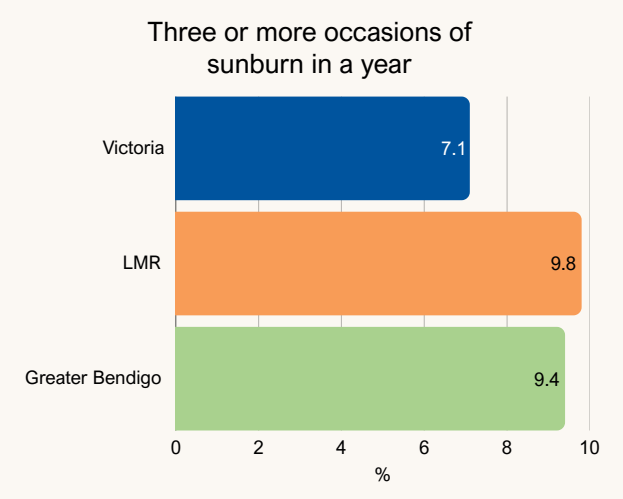
Source: Victorian Population Health Survey, 2023, age-adjusted



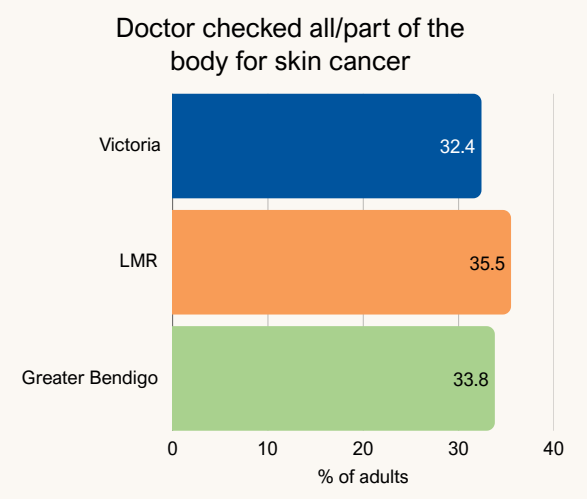
Source: Victorian Population Health Survey, 2023, age-adjusted
Victorian Population Health Survey, 2020, age-adjusted
● Statistically significantly higher than Victoria

4.6 Sun exposure

Australia has one of the highest rates of skin cancer in the world. Skin cancer occurs when skin cells are damaged, for example by overexposure to ultraviolet radiation from the sun. Greater Bendigo had a higher proportion (9.4%) of people reporting three or more occasions of sunburn in a year, compared with Victoria (7.1%). Greater Bendigo had a higher percentage of people seeking skin checks by a doctor for skin cancer (33.8%), compared with Victoria (32.4%)



Source: Victorian Population Health Survey, 2023, age-adjusted

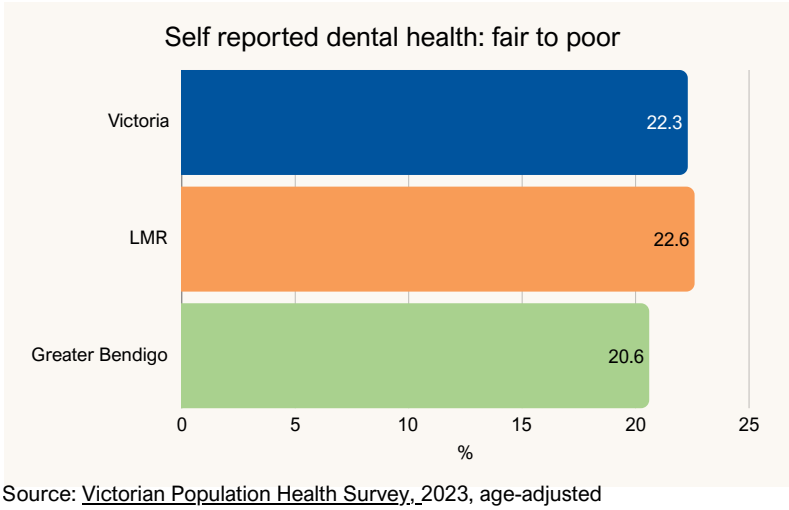


Source: Victorian Population Health Survey, 2023, age-adjusted

[1] Australian Institute of Health and Welfare

4.7 Dental health

Oral disease can destroy the tissues in the mouth, leading to lasting physical and psychological disability. Tooth loss can make chewing and swallowing more challenging, which can then compromise nutrition. Poor oral health is also associated with a number of chronic diseases including stroke and cardiovascular disease. Dental disease can also impair a person's appearance and speech, impacting their self-esteem, which can lead to restricted participation at school, the workplace and other social settings.



The proportion of adults in the Loddon Mallee region (22.6%) reporting fair to poor dental health was comparable to the whole of Victoria (22.3%). Greater Bendigo (20.6%) was lower compared to Victoria.

Source: Victorian Population Health Survey, 2023, age-adjusted

4.8 Childhood development

The Australian Early Development Census (AEDC) is a nationwide census of early childhood development that shows how young children have developed as they start their first year of full-time school. There are five domains, which are physical, social, emotional, language and communication. In 2024, 1,428 children in Greater Bendigo underwent developmental assessment. Overall, 24.7% (n=325) of children in Greater Bendigo were vulnerable on one or more domains, compared with 22.3% across Victoria.

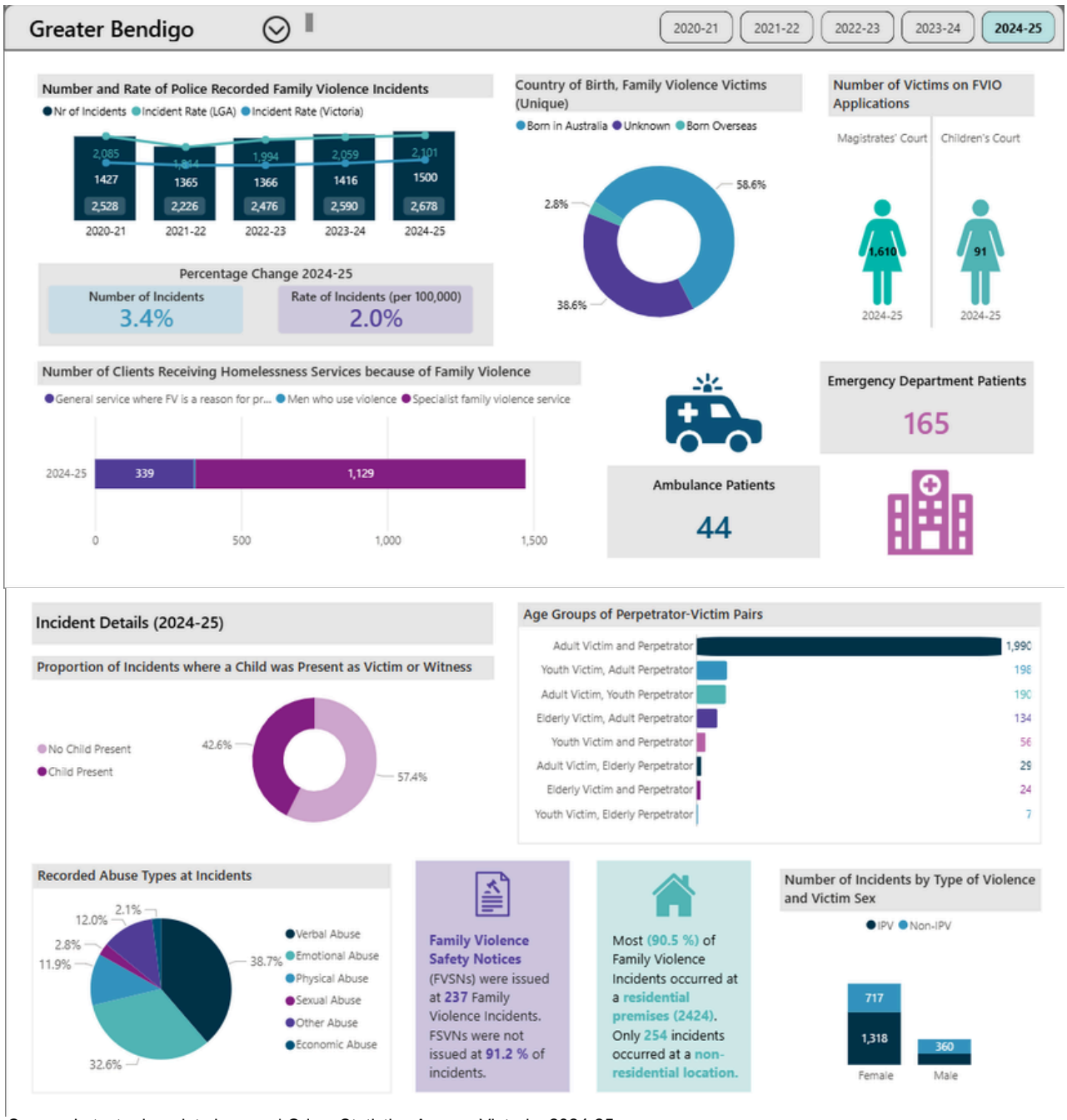
		Vulnerable (1,428) children assessed)		
Indicator	**Indicator description**	**Greater Bendigo (n)**	**Greater Bendigo (%)**	**Victoria (%)**
Physical	Child is healthy; independent; excellent gross and fine motor skills	142	10.7	8.5
Social	Gets along with others; shares; self-confident	144	10.9	10.6
Emotional	Able to concentrate; help others; patient, not angry or aggressive	147	11.2	9.9
Language	Interested in reading or writing; can count; recognises numbers and shapes	96	7.3	7.3
Communication	Can tell a story; communicate with adults and children; articulate themselves	106	8	8.2
Vulnerability 1	Developmentally vulnerable in one or more domains	325	24.7	22.3
Vulnerability 2	Developmentally vulnerable in two or more domains	160	12.1	11.8

Source: Australian Early Development Census, 2024

4.9 Family violence

A family violence incident is an incident attended by Victoria Police and a police report has been completed.

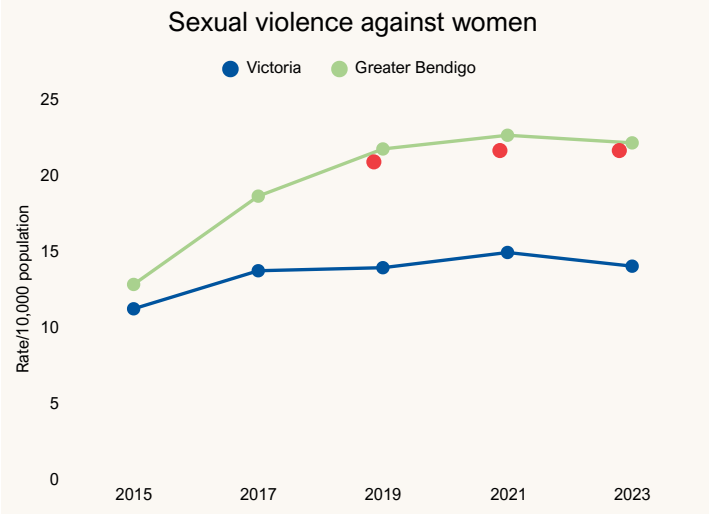
Greater Bendigo recorded a family violence incident rate of 2,101/100,000 population, considerably higher than the Victorian rate of 1,500/100,000 population. In nearly half of reported family violence incidents in Greater Bendigo (42.6%), a child was present either as a victim or a witness. Of the recorded abuse types in Greater Bendigo, verbal abuse was most common (38.7%), followed by emotional abuse (32.6%). There were 165 presentations to emergency departments related to family violence in Greater Bendigo.



Source: Latest crime data by area | Crime Statistics Agency Victoria, 2024-25

4.10 Sexual assault

According to Victoria Police, **sexual offences** occur when someone does not or cannot consent to a sexual behaviour, act or acts. These sexual behaviours can include: rape, sexual or inappropriate touching, sexual assault, child sexual abuse, elder sexual abuse, sexual exposure of genitalia, image-based sexual offending, stealthing (non-consensual condom removal), stalking and grooming. Greater Bendigo's rates were high and have been ranked in the top ten highest LGAs in Victoria since 2019.

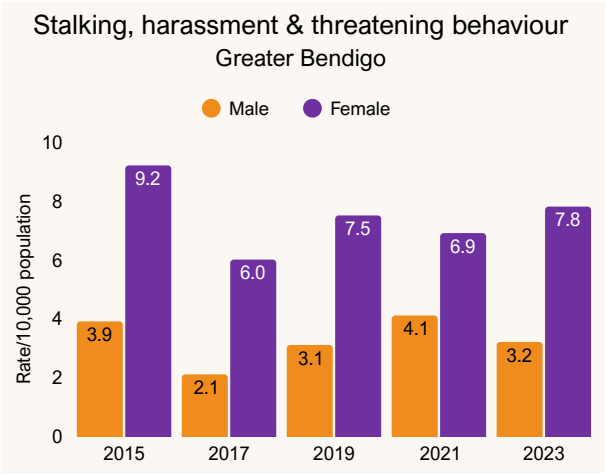


Source: Victorian Women's Health Atlas, victim reports received where the woman is the victim

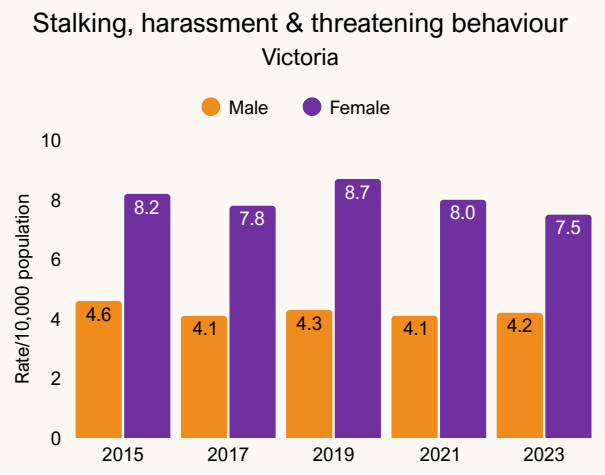
● Ranked in the top ten highest LGAs in Victoria

The Victorian Crime Statistics Agency reports on stalking, harassment, and threatening behaviours as a group. This category includes repeated acts of unreasonable conduct intended to: cause physical or mental harm; arouse apprehension or fear; threaten or invade privacy; create nuisance or offend someone based on personal characteristics.

In Greater Bendigo, the rate of male and female victims of stalking, harassment and threatening behaviour indicates that reports from female victims were considerably higher than those from males. This aligns with Victoria, where female victim reports of stalking, harassment and threatening behaviour outnumber male victim reports by a ratio of almost 2 to 1.



Source: Victorian Women's Health Atlas, victim reports received by police

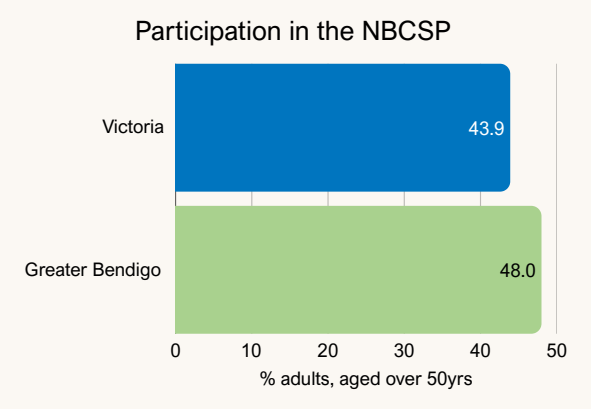


Source: Victorian Women's Health Atlas, victim reports received by police

5. Health screening

5.1 Bowel screening

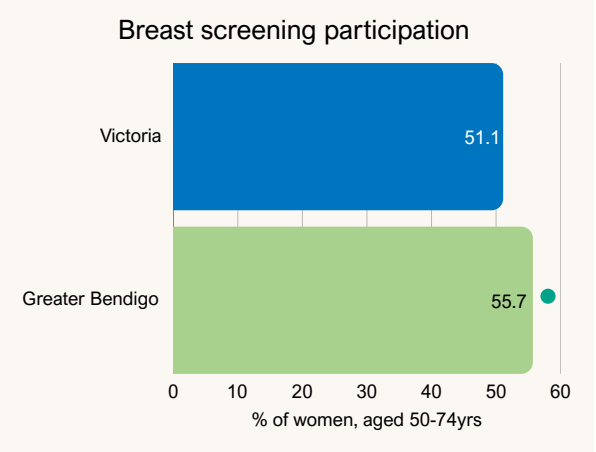
Bowel cancer is the third most common type of newly diagnosed cancer in Australia. The National Bowel Cancer Screening Program (NBCSP) aims to reduce deaths from bowel cancer by detecting early signs of the disease. If found early, more than 90% of cases can be successfully treated. Greater Bendigo has a higher participation (48%) in the NBCSP compared with Victoria (43.9%)



Source: Social Health Atlas , 2020-21

5.2 Breast screening

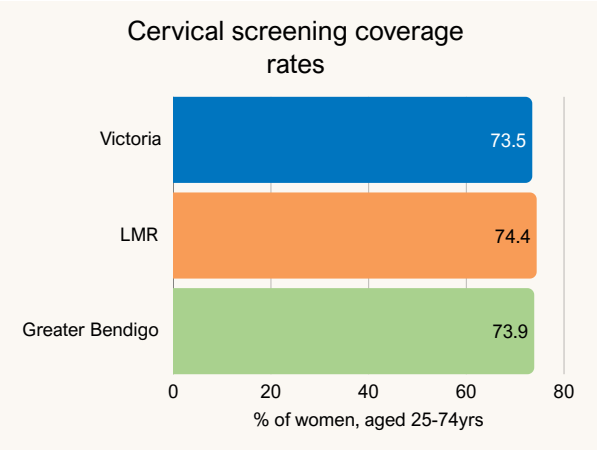
Research has shown that screening mammography is currently the most effective tool for the early detection of breast cancer in asymptomatic women in the target age group of women aged 50 to 74 years; and, that having a screening mammogram every two years, reduces the chance of dying from breast cancer by up to 40%. Greater Bendigo (55.7%) had higher participation in breast screening, compared with Victoria (51.1%)



Source: Social Health Atlas , 2021-22
● Ranked top ten highest participation proportion

5.3 Cervical screening

The National Cervical Screening Program reduces illness and death from cervical cancer. Women and people with a cervix aged 25 to 74 years are invited to have a cervical screening test every 5 years through their healthcare provider. Greater Bendigo has a similar coverage of cervical screening (73.9%) compared with Victoria (73.5%).



Source: National Cervical Screening Program, 2020 -2024

6. Health conditions

6.1 Life expectancy

The median age at death for both males and females in Greater Bendigo remained stable from 2016 to 2022, showing only an increase of one year for males (78 to 79 years). This suggests that, on average, individuals in Greater Bendigo were experiencing a similar life expectancy as their counterparts in the broader state.

Examining premature mortality (deaths occurring before the age of 75 years), Greater Bendigo demonstrated positive trends. For males, there was a substantial reduction from an average annual aged standardised rate (ASR) of 418.7/100,000 population to a rate of 336.2, indicating a percentage decrease of 19.7%. Similarly, for females, there was a decrease from 272.8 to 216.5/100,000 population, reflecting a percentage decrease of 20.6%. These figures signify progress in reducing premature deaths in Greater Bendigo, however, they were still statistically higher than expected (based on Australian data) and higher than the Victorian rates.

Avoidable mortality (deaths that could have been prevented) also showed improvement in Greater Bendigo. For males, there was a decline from an average annual ASR of 222.4 to 171.9/100,000 population, representing a percentage reduction of 22.7%. For females, the average annual ASR decreased from 134.6 to 99.1/100,000 population, indicating a percentage reduction of 26.4%. Once again, Greater Bendigo demonstrates positive strides in addressing avoidable causes of death, but remains statistically higher than expected (based on Australian data) and higher than the Victorian rate.

	2016 - 2020				2018-2022				% Difference between reports			
	Greater Bendigo		Victoria		Greater Bendigo		Victoria		Greater Bendigo		Victoria	
	M	F	M	F	M	F	M	F			M	F
Median age at death (yrs)	78	84	79	85	79	84	79	85	1.2	0	0.0	0.0
Premature mortality, 0-74yrs of age^	418.7	272.8	269.5	171.2	336.2	216.5	281.8	176.8	-19.7	-20.6	4.6	3.3
Avoidable mortality, 0 to 74yrs of age^	222.4	134.6	138	80.5	171.9	99.1	142.1	80.8	-22.7	-26.4	3.0	0.4

Source: Social Health Atlas of Australia: Victoria, 2018-2022

^Average annual ASR per 100,000. Age-standardised rate (ASR) is used to remove the effect of the differing age distributions that we can make conclusions about the relative decreases or increases in mortality over time.

Statistically significantly higher than expected (based on Australian data)

6.2 Avoidable deaths

Avoidable deaths are deaths from conditions that are potentially preventable through individualised care and/or treatable through existing primary or hospital care. The highest rates of avoidable deaths (0-74yrs) for 2018-2022 in Greater Bendigo were for circulatory system disease (39.8/ 100,000 population) and cancer (34/100,000 population). Greater Bendigo had statistically significantly higher than expected (based on Australian data) avoidable deaths for circulatory system disease, cancer, respiratory system disease, obstructive pulmonary disease and external causes.

The highest percentage increase of avoidable deaths for Greater Bendigo from 2017/2021 to 2018/2021 was transport accidents (47.6%). The highest percentage decrease of avoidable deaths for Greater Bendigo from 2017/2021 to 2018/2021 was diabetes (13%) and cancer (5.8%).

Avoidable deaths by cause	2018-2022		2017-2021		%Difference between the reports	
	Greater Bendigo	Victoria	Greater Bendigo	Victoria	Greater Bendigo	Victoria
Circulatory system	39.8	33.3	39.7	32.7	0.2	1.8
Ischaemic heart disease	24	21	23.7	20.6	1.3	1.9
Cancer	34	27.5	36.1	27.8	-5.8	-1.8
Transport accidents	6.2	4.1	4.2	4	47.6	2.5
Respiratory system disease	14.7	9.1	14	9	5	1.1
Obstructive pulmonary disease	13.4	8.5	12.8	8.3	4.7	2.4
Cerebrovascular disease	8.5	7.7	8.7	7.6	-2.2	1.3
Breast cancer	18.5	15.2	18.9	15.6	-2.1	-2.5
Diabetes	4	5.5	4.6	5.2	-13	5.8
Colorectal cancer	12.8	10.7	12.8	10.1	0	5.9
External causes (falls, burns, suicide, self-inflicted injuries etc)	18.6	14	18.7	13.5	-0.5	3.7
Suicide and self-inflicted injuries	14.9	10.9	14.9	10.6	0	2.8

Source: Social Health Atlas, 0-74 years, ASR/100,000 population

Statistically significantly higher than expected (based on Australian data)

Statistically significantly lower than expected (based on Australian data)

6.3 Physical health conditions

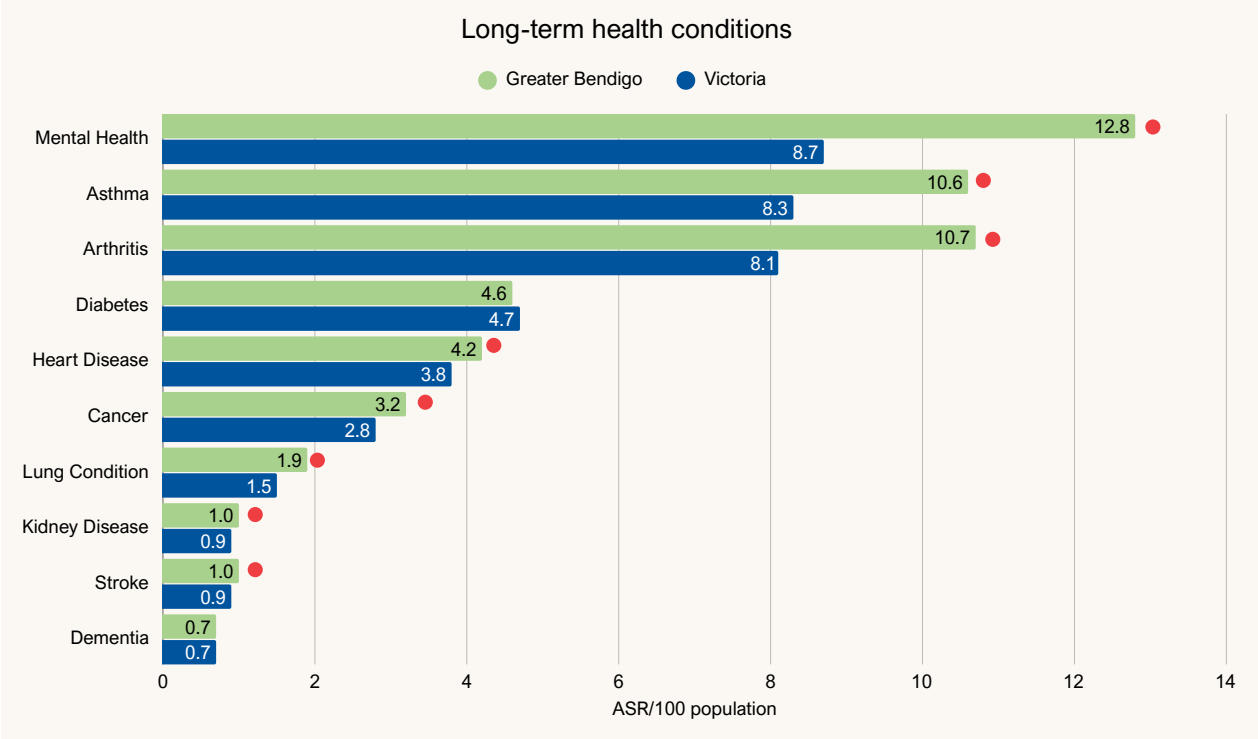
In the census, people were asked to indicate long-term conditions (six months or more) diagnosed by a doctor or nurse. Selected long-term health conditions include arthritis, asthma, cancer (including remission), dementia (including Alzheimer disease), diabetes (excluding gestational diabetes), heart disease (including heart attack or angina), kidney disease, lung condition (including COPD or emphysema), mental health condition (including depression or anxiety) and stroke. Other long-term health conditions were not included in this count.

In Greater Bendigo, 4.3% of people reported having three or more long-term conditions, compared with 2.9% across Victoria. High levels of multiple long-term health conditions place significant strain on individuals, communities and health systems, reducing quality of life, increasing service demand and widening health inequities.

Long-term health conditions	Greater Bendigo (n)	Greater Bendigo (%)	Victoria (%)
None of the selected long-term conditions	69,094	56.9	65
One condition	27,256	22.4	18.8
Two conditions	9,566	7.9	5.7
Three or more conditions	5,206	4.3	2.9

Source: Australian Bureau of Statistics, 2021, all people

In Greater Bendigo, self-reported mental health (12.8/100 population), asthma (10.6/100 population), arthritis (10.7/100 population), heart disease (4.2/100 population), cancer (3.2/100 population), lung conditions (1.9/100 population), kidney disease (1.0/100 population) and stroke (1.0/100 population) were all statistically significantly higher than expected (based on Australian data) and higher compared with Victoria.



Source: Social Health Atlas , 2021, all people
●Statistically significantly higher than expected (based on Australian data)

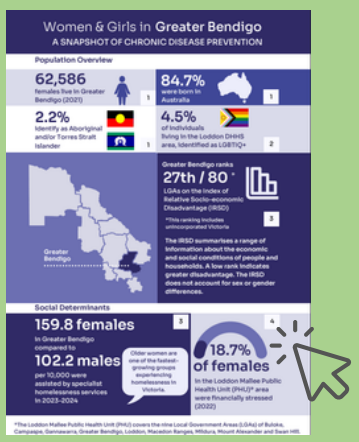
More recent data, using a different collection methodology and a smaller cohort shows the proportion of people in Greater Bendigo reporting the long-term conditions in the table below were all higher compared with Victoria, with the exception of heart disease.

LGA	COPD*	Asthma	Osteoarthritis	Diabetes (type 2)	Heart disease	Cancer
Victoria (%)	3.6	20.1	13.8	6.2	8.3	8.3
LMR (%)	4.6	23.5	15.5	6.2	8.6	11.3
Greater Bendigo (%)	5.1	24.1	16.1	6.6	7.5	11.1

Source: Victorian Population Health Survey, 2023, age-adjusted
*COPD: Chronic Obstructive Pulmonary Disease

Women's Health Loddon Mallee has developed a series of chronic disease infographic data snapshots for each LGA in the Loddon Mallee region using local sex-disaggregated data, where available.

These infographics highlight conditions more common among women and girls in the Loddon Mallee, such as osteoporosis and dementia, and snapshots of the individual, economic, social and structural factors which interact to influence the development and management of chronic conditions.



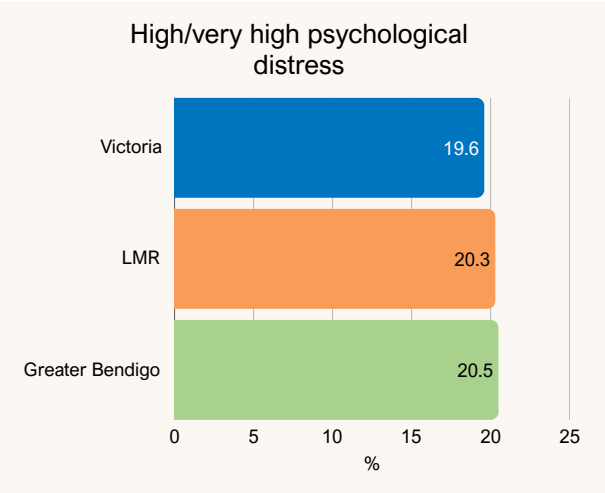
Source: Women's Health Loddon Mallee, 2025

6.4 Mental wellbeing

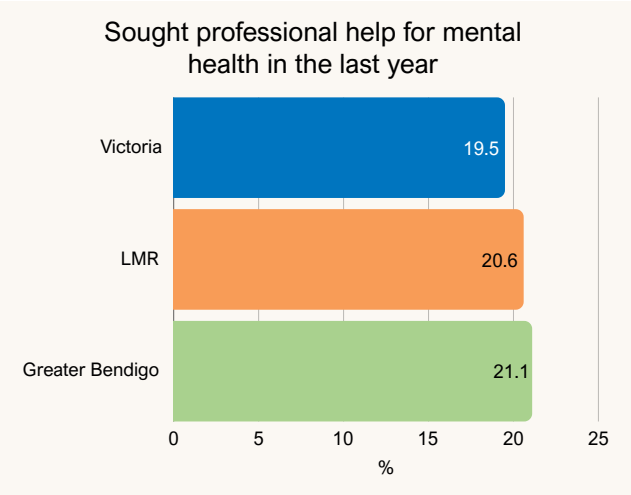
By prioritising good mental health and wellbeing, we reduce stigma, increase social connection, improve physical health, promote productivity and create safer environments. Our mental health and our physical health are linked.

Psychological distress is based on a doctor's diagnosis and measured by the Kessler 10 Psychological Distress Scale (K10), which has been shown to be highly correlated with depressive and anxiety disorders.

Greater Bendigo had a higher proportion of people experiencing high/very high psychological distress (20.5%), compared to Victoria (19.6%). Greater Bendigo also had a higher proportion of people seeking professional help for mental health.

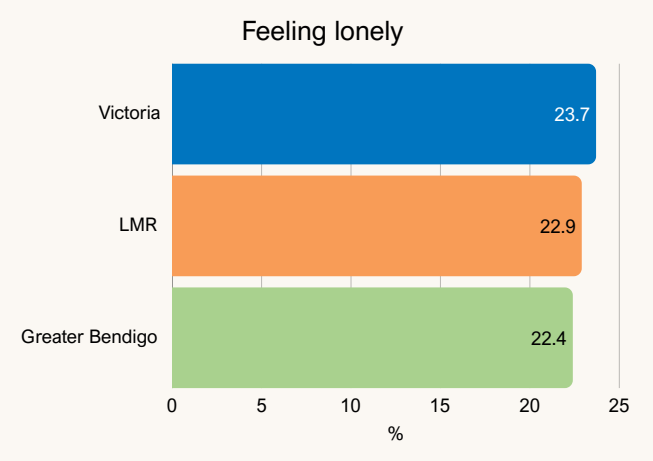


Source: Victorian Population Health Survey, 2023, age-adjusted

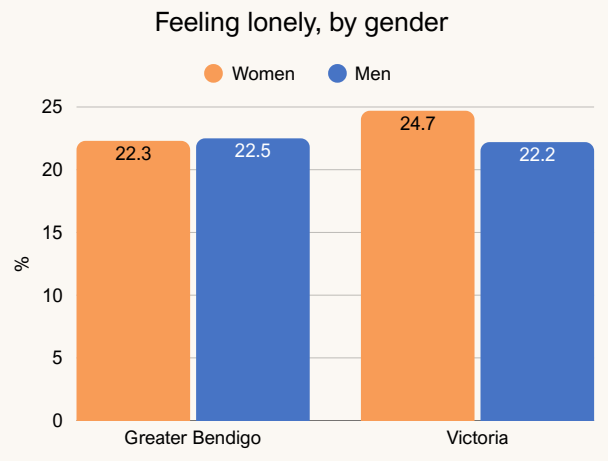


Source: Victorian Population Health Survey, 2023, age-adjusted

Social connection is essential for our health and wellbeing. **Loneliness** is a subjective measure of low social connection and is defined as an 'unpleasant or distressing feeling of a lack of connection to other people, along with a desire for more, or satisfying, social relationships' (Badcock et al, 2022). In the Victorian Population Health Survey, loneliness was measured using the 3-item UCLA Loneliness Scale. Greater Bendigo had a lower proportion of people feeling lonely (22.4%), compared to Victoria (23.7%), with men and women comparable in reporting loneliness.



Source: Victorian Population Health Survey, 2023, age-adjusted

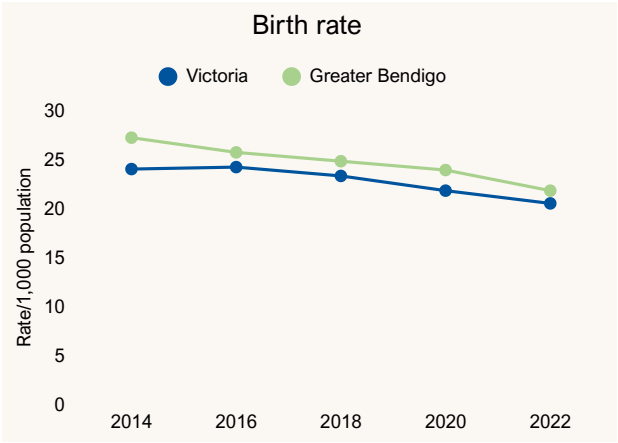


Source: Victorian Population Health Survey, 2023, age-adjusted

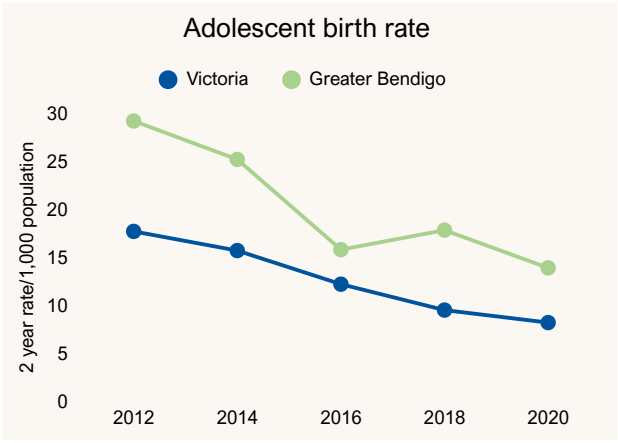
6.5 Sexual and reproductive health

Greater Bendigo shows slightly lower birth rates compared to the Victorian rate, but was following Victoria's declining trend. In 2022, total fertility rate (average number of babies born to a woman in her lifetime) for Greater Bendigo (1.7) was the same as Victoria (1.7).

However, the adolescent birth rate (younger than 20 years of age) in Greater Bendigo (13.9/1,000 population) remained higher than the Victorian rate (8.2/1,000 population).



Source: Victorian Women's Health Atlas



Source: Victorian Women's Health Atlas

In Greater Bendigo (2024), chlamydia infection rate in females (345.2/100,000 population) was higher than Victoria (324.5/100,000 population). However, rates in men were much lower.

Newly acquired	Chlamydia^		Gonorrhoea^		Hepatitis B^		Infectious Syphilis^	
	Female	Male	Female	Male	Female	Male	Female	Male
Victoria	324.5	412.3	60.5	281.1	^^	0.24	7.43	36.7
Greater Bendigo	345.2	252.5	27	61.8	^^	^^	^^	^^

Source: Victorian sexual and reproductive health and viral hepatitis strategy 2022-30: Monitoring indicators dashboard,
^Rate/100,000 population, 2024
^^ fewer than five cases

Women's Health Loddon Mallee (WHLM) has developed a snapshot of sexual and reproductive health in Greater Bendigo. Click the image to view the snapshot.

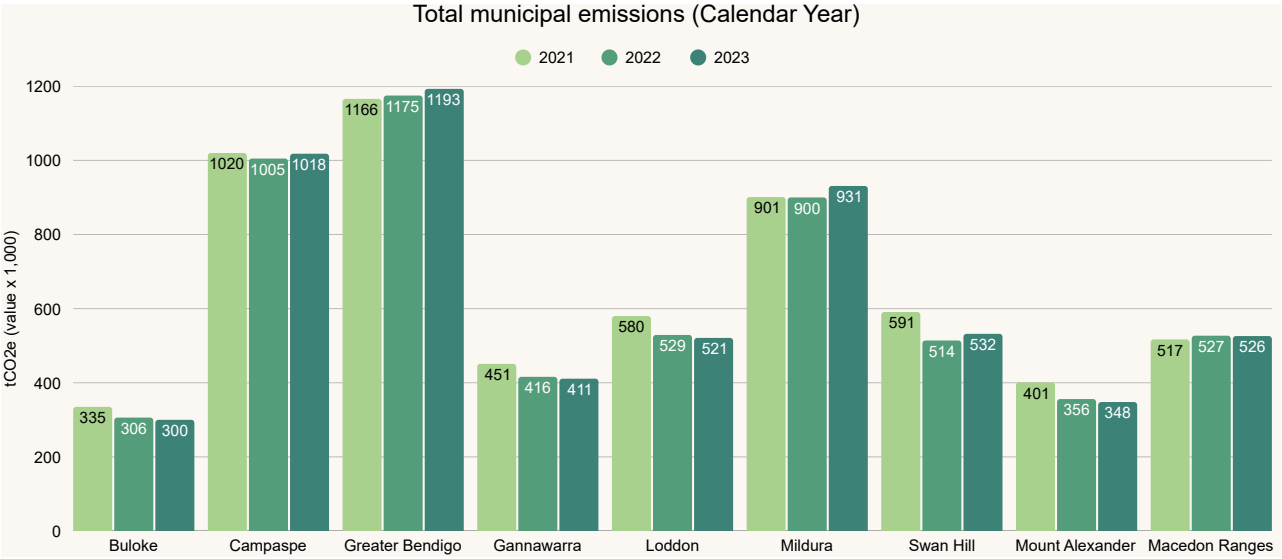
WHLM has also compiled a comprehensive list of sexual and reproductive health services in the Loddon Mallee region

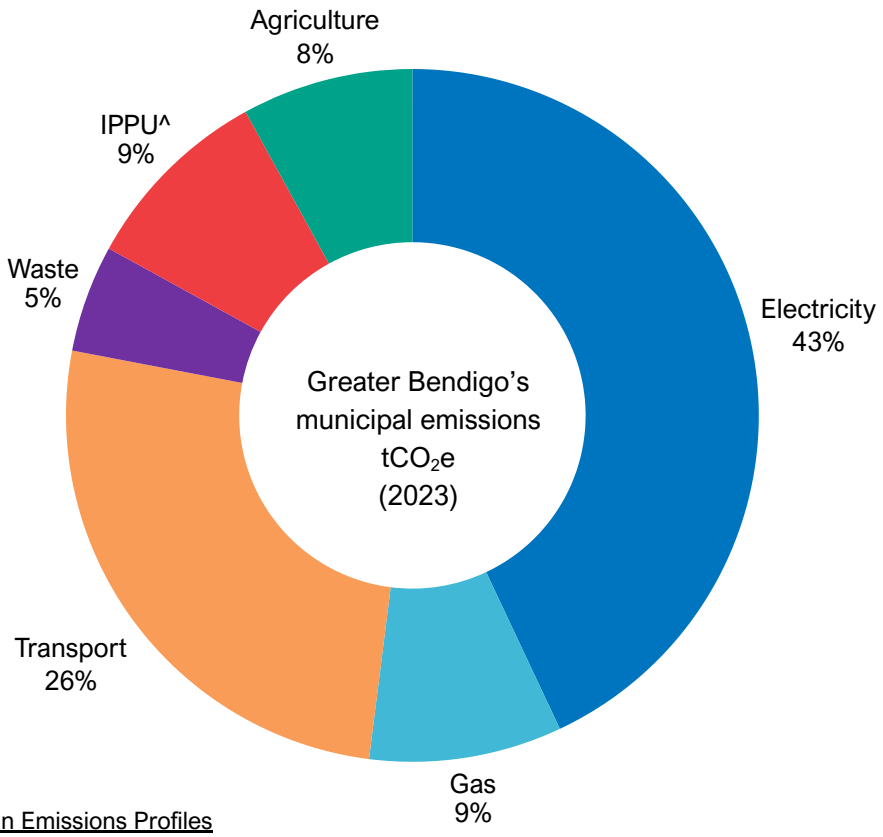
Source: Women's Health Loddon Mallee, 2025

7. Environment

7.1 Municipal emissions

The LMPHU's climate change and health work is guided by the Loddon Mallee Climate Change and Health Framework. Some of the considerations in comparing carbon emissions across local government areas are population, industry mix, geographical area, transport patterns and land use. The total carbon emissions in Greater Bendigo for 2023 were 1,193,000 tCO_2e. The top causes of emissions in Greater Bendigo were electricity (43%) and transport (26%).





Source: Snapshot Climate - Australian Emissions Profiles
tCO2e: Tonnes of Carbon Dioxide Equivalent
^Industrial Processes and product use

7.2 Average temperature

Greater Bendigo experiences an average maximum in summer of 28.2ºC, while the winter average maximum temperature is 13.1ºC. The northern part of the region sees hot summers with an average maximum temperature of 30°C. Meanwhile winters are mild and the temperature stays around 10°C on average. Conversely, the southern part of the region experiences cool and rainy winters and warm and arid summers. In the elevated southern regions, the average maximum temperature is below 25°C. Frosty weather is frequent in the whole region.

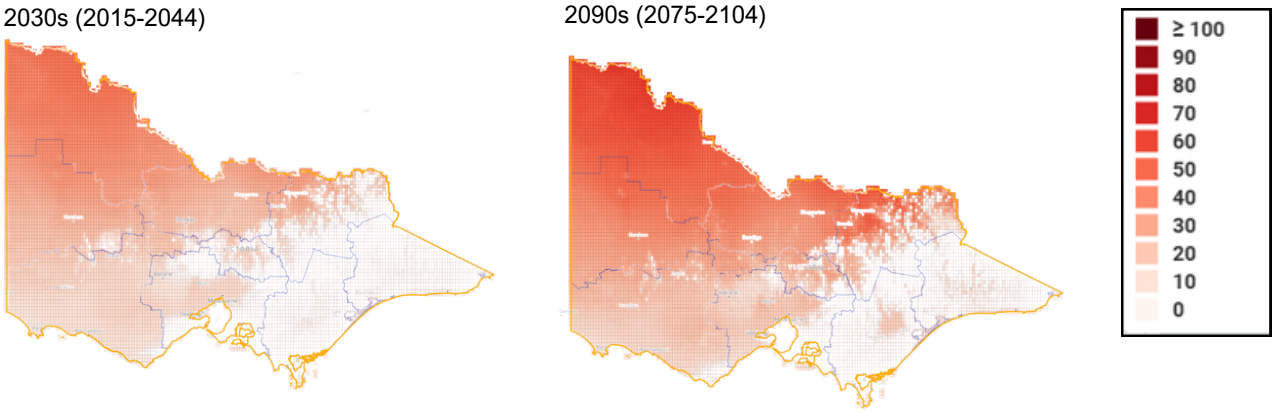
LGA (1961-1990)	Summer (Ave ºC)		Winter (Ave ºC)	
	Maximum	Minimum	Maximum	Minimum
LMR	28.9	13.5	13.7	4.1
Swan Hill	31.2	15	15.6	4.6
Mildura	31	14.8	15.9	5.2
Gannawarra	30.5	14.7	14.8	4.5
Buloke	30	14	14.6	4.4
Loddon	29.4	13.9	13.9	4.2
Campaspe	29.3	14.1	13.9	3.9
Greater Bendigo	**28.2**	**13.4**	**13.1**	**3.9**
Mount Alexander	27	12	12	3.1
Macedon Ranges	24.1	11.2	10.3	3.2

Source: Loddon Mallee Environmental Scan | Emergency Management Victoria (emv.vic.gov.au), 1961-1990

Projected number of days above 35 °C in 2030s and 2090s by Bureau of Meteorology Forecast Districts.

These data demonstrate that the Mallee and Murray areas are projected to experience increasing days above 35°C, which will impact health and wellbeing. Heat kills more Australians than any other natural disaster.

Heat can cause serious and potentially fatal health problems such as heat exhaustion and heatstroke, trigger sudden events like heart attack or stroke, or worsen existing medical conditions like kidney or lung disease. [1]



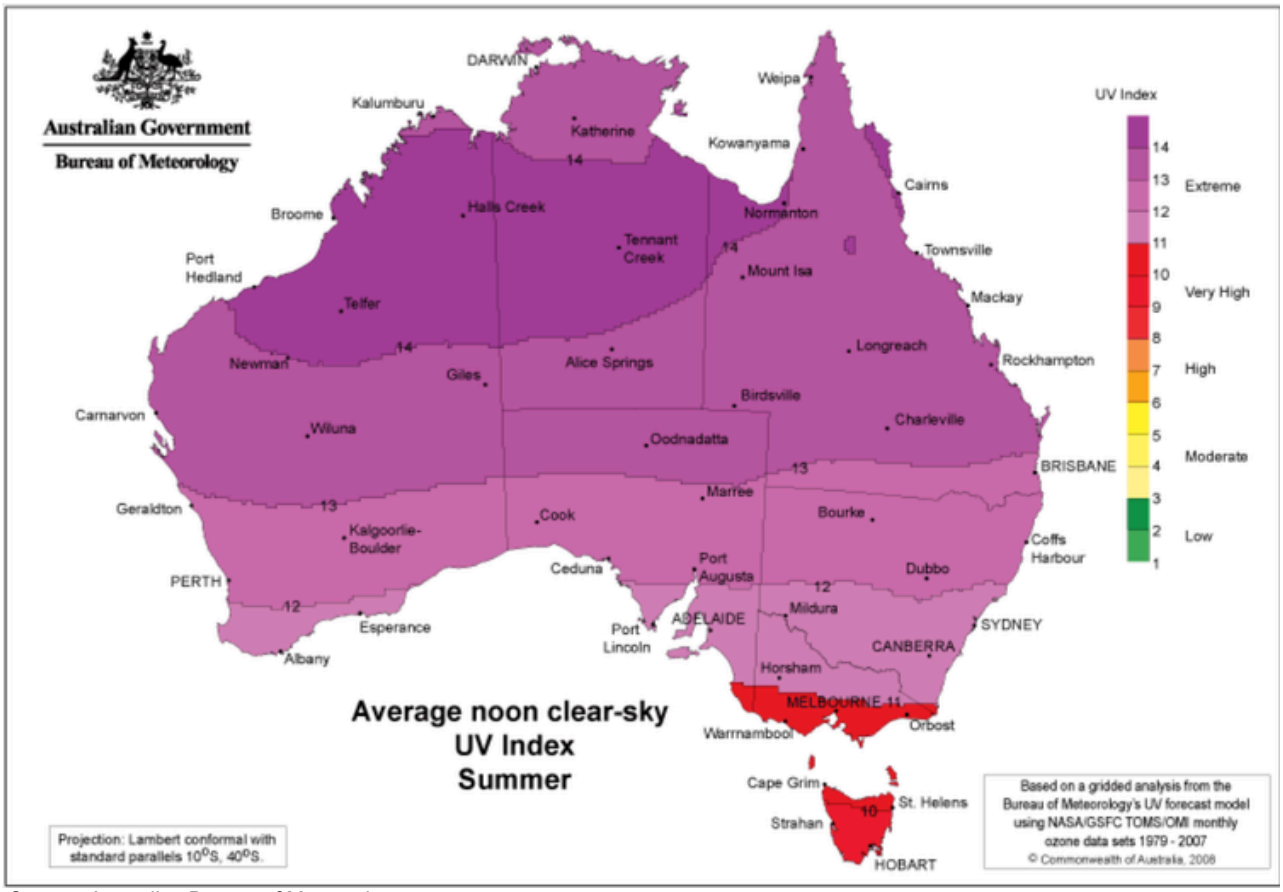
Source: Victorian Government, Energy, Environment and Climate Action

[1] Better Health Channel, Extreme Heat, Victorian Department of Health

7.3 Ultraviolet radiation

Exposure to UV radiation from the sun and other sources, such as solariums, is the major cause of skin cancer. Australia has some of the highest levels of UV radiation in the world. Sun exposure has been estimated to cause around 95% of melanoma cases in areas of high exposure, such as Australia and around 99% of non-melanoma skin cancers in Australia. [1]

The map below shows the average summer (noon clear sky) solar ultraviolet values over Australia. The LMR experiences extreme Ultraviolet index.



Source: Australian Bureau of Meteorology

[1] Australian Government, Cancer Australia

7.4 Bushfire prone areas

There are numerous areas with high bushfire hazards in the Loddon Mallee region, many of which intersect with settlements and areas experiencing growth in rural residential areas and tourism. Greater Bendigo has 97.6% of its area classified as bushfire prone.

The Fire Danger Period in Victoria has become lengthier, indicating a trend towards extended fire seasons. The seasonal fire restriction dates are determined by the municipality and are dependent on factors such as amounts of rain, grassland curing, and other local conditions.

Smoke from fires, including planned burns, can also pose a hazard to people's health. The individuals most at risk from smoke exposure include young children, adults over 65 years of age, people with asthma or existing heart or lung conditions, pregnant women, outdoor workers, and smokers. Bushfire-prone areas are either subject to or likely to be subject to bushfires, and are subject to specific bushfire construction standards.

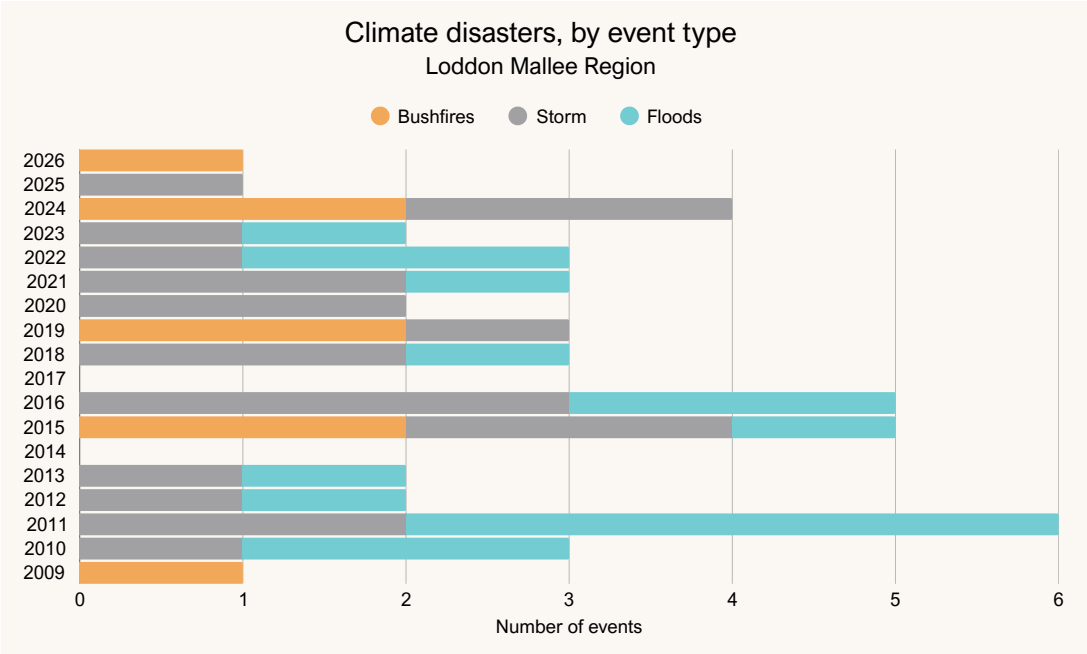
	Bushfire prone area (%)	Bushfire prone area (km^2)	Total area (km^2)
Campaspe	97.7	4,415	4,519
Buloke	97.6	7,807	8,000
Gannawarra	98.7	3,701	3,750
Greater Bendigo	**97.6**	**2,930**	**3,000**
Loddon	100	6,694	6,696
Macedon Ranges	98.6	1,723	1,748
Mildura	98.3	21,710	22,083
Mount Alexander	99.8	1,527	1,530
Swan Hill	92.0	5,625	6,115
Victoria	97.8	5,625	6,115

Source: Loddon Mallee Environmental Scan | Emergency Management Victoria (emv.vic.gov.au)

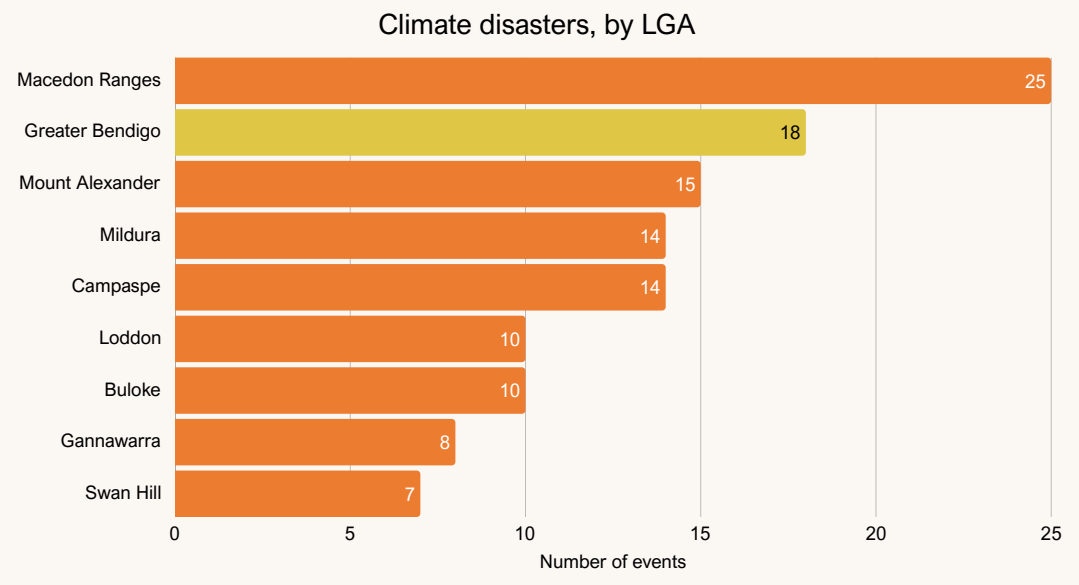
7.5 Climate emergencies

Climate change is increasingly affecting the frequency, intensity, and duration of extreme weather events in our region. Rising temperatures, shifting rainfall patterns, and more severe storm systems are contributing to a greater incidence of natural hazards such as bushfires, floods, and heatwaves. Acting as a risk multiplier, climate change not only amplifies the severity of these disasters, threatening lives, livelihoods, health and property, but also places significant pressure on disaster management systems.

The Disaster Recovery Funding Arrangements (DRFA) provide a framework for joint federal and state cost-sharing of disaster relief and recovery measures. These arrangements are triggered by state government when a natural disaster requires a coordinated multi-agency response and exceeds the small disaster financial threshold. Between 2019 and February 2026, 35 climate-related disaster events (storms, floods, bushfires) in the Loddon Mallee region have activated the DRFA, with multiple climate disaster events most years. The most frequently affected LGAs impacted by climate disasters are Macedon Ranges (25 events) and Greater Bendigo (18 events).



Source: Australian Government Department of Home Affairs, Disaster assist, 2009 -2026



Source: Australian Government Department of Home Affairs, Disaster assist, 2009 -2026

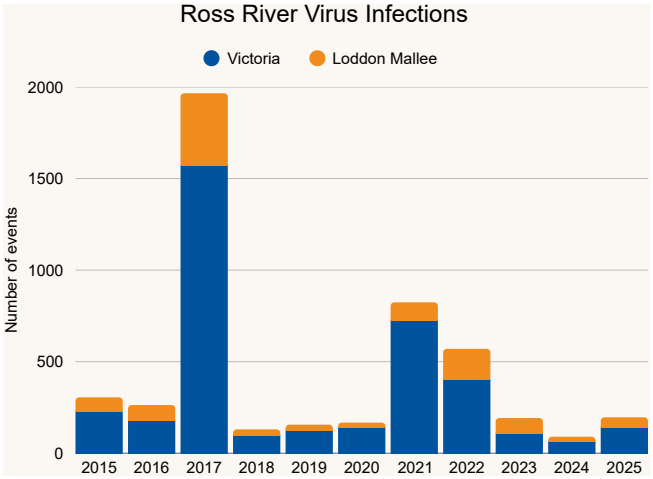
7.6 Mosquito-borne disease

In 2025, there were five mosquito-borne viruses identified across Victoria with the potential for local transmission. These were Japanese encephalitis virus, Murray Valley encephalitis virus, Ross River virus, Barmah Forest virus and West Nile virus Kunjin strain (otherwise known as Kunjin virus).[1]

Mosquito surveillance is conducted throughout the Victorian mosquito breeding season by the Department of Health each year. In inland areas, the mosquito season typically starts from early November through to late April the following year, while in coastal areas it typically starts earlier and ends later. The mosquito trapping sites within the Loddon Mallee are in Campaspe, Gannawarra, Mildura and Swan Hill.

Ross River virus

Ross River virus is a mosquito-transmitted disease that occurs throughout most regions of Australia including regional Victoria, particularly around inland waterways and coastal regions. All 9 LGAs within the Loddon Mallee are considered endemic. Epidemics occur from time to time and are related to environmental conditions that encourage mosquito breeding such as heavy rainfall, floods, high tides and temperature. The number of notifications of Ross River Virus from the Loddon Mallee ranges from 25 to 397 in a year. In 2025 29% of all Victorian notifications were from the Loddon Mallee.



Source: Victorian Department of Health, surveillance summary report

[1] Victorian Department of Health, Mosquito surveillance report

8. Data resources

LMPHU	https://www.bendigohealth.org.au/LMPHU/
ABS Quick Stats	https://abs.gov.au/census/find-census-data/quickstats/2021/POA3523
AEDC	https://www.aedc.gov.au/data-explorer/
AIHW	https://www.aihw.gov.au/about-our-data/aihw-data-by-geography
Crime Statistics Agency	https://www.crimestatistics.vic.gov.au/
PHN Exchange	https://www.phnexchange.com.au/
Social Health Atlas	https://phidu.torrens.edu.au/social-health-atlases
Victorian Population Health Survey	https://vahi.vic.gov.au/reports/victorian-population-health-survey-2023
Victorian Women's Health Atlas	https://victorianwomenshealthatlas.net.au/#!/

9. Notes on statistical significance

Public Health Information Development Unit/Social Atlas

Statistical significance was assessed using indirect age standardisation and standardised ratios (SRs). Expected numbers were calculated by applying age-specific Australian standard rates to the local population age structure. Observed numbers were compared with expected numbers and statistical significance was evaluated using a Z-score calculation, with 95% confidence intervals around the SR to indicate reliability. More information on this calculation is available at the Public Health Information Development Unit.

Victorian Population Health Survey

Statistical significance differences between estimates were deemed to exist where the 95% confidence intervals for percentages did not overlap. More information is available in the Methodology section of the Victorian Population Health Survey.

10. Abbreviations

Abbreviation table	
AEDC	Australian Early Development Census
AIHW	Australian Institute of Health and Welfare
ARI	Average recurrence interval
COPD	Chronic Obstructive Pulmonary Disease
Greater Bendigo	City of Greater Bendigo
IRSD	Index of Relative Socio-economic Disadvantage
LGA	Local government area
LMPHU	Loddon Mallee Public Health Unit
LMR	Loddon Mallee region
LGBTIQA+	Lesbian, gay, bisexual, transgender, intersex, queer, asexual and other sexually or gender diverse people
NBCSP	National Bowel Cancer Screening Program
NDIS	National Disability Insurance Scheme
PHN	Primary Health Network
STI	Sexually Transmitted Infection

BENDIGO HEALTH

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