

Local Health Profile

Ōrākei



The Ōrākei local board area stretches from Remuera, Ellerslie and the Southern Motorway northeast to the Waitemata Harbour.

Suburbs include Remuera, Ellerslie, Meadowbank, St Johns, Ōrākei, Mission Bay, Kohimarama, Saint Heliers, and Glendowie. The area is predominantly residential, with some commercial/light industrial areas in Ellerslie and St Johns. The University of Auckland's Tamaki campus is located in St Johns.

Ōrākei suburb, Ōrākei Bay, and Takaparawhau-Bastion Point are of particular significance for Māori. This area is the home of Ngāti Whātua ō Ōrākei and the location of Ōrākei Marae.

There are many open spaces and recreational areas including the eastern suburb beaches, Waiatarua Reserve, the Ōrākei Basin Walkway, and Churchill Park. There are recreation centres in Ellerslie and Kohimarama (ASB Stadium). The area is also home to the AMI Auckland Netball Centre and the Ellerslie Racecourse.

This area is home to 69 Early Childhood Education Centres and 26 schools.

The People

Ōrākei is home to approximately 86,000 people. About 16,000 (19%) are children aged less than 15 years and 13,000 (15%) are people aged 65 years or more. The population is expected to reach about 109,000 by 2033.

Ōrākei residents identify with a range of ethnic groups. In 2013, 4.5% identified as Māori, 2.3% as Pacific peoples, 18% as Asian people, and 76% as Europeans or other ethnic groups.

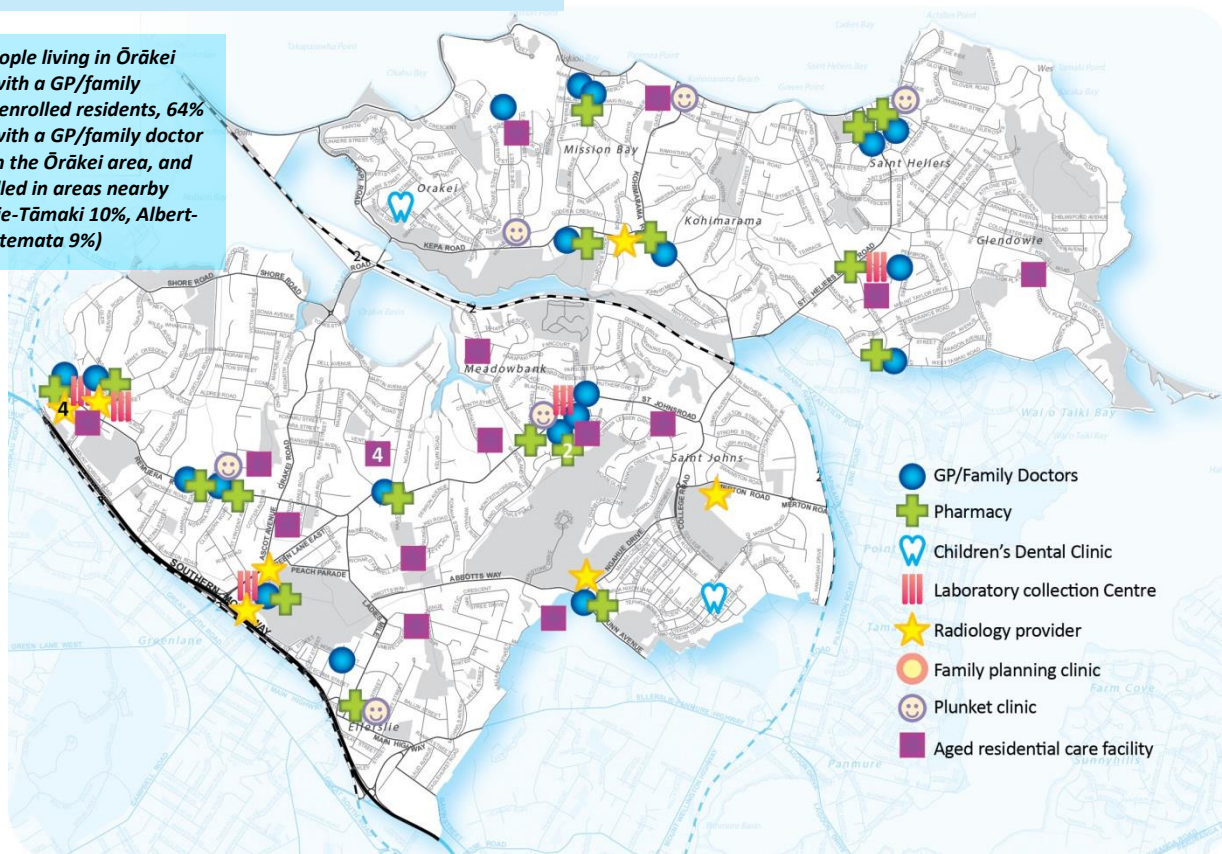
In the 2013 Census:

- 51% of residents aged 15 years or more had a degree or diploma qualification. 8% had no qualification.
- 66% of residents aged 15 years or more were employed. 2,000 residents were unemployed, which was 5% of the labour force.
- 67% of households had income greater than \$70,000 per year and 12% of households had income of \$30,000 or below per year.
- 4% of households were receiving income from sickness or invalids benefits.
- 4% of households were single parent families with dependent children.
- 70% of households owned their own house.

In 2013, the NZ Disability Survey estimated 19% of people live with a disability.

Primary care providers

90% of the people living in Ōrākei are enrolled with a GP/family doctor. Of all enrolled residents, 64% are enrolled with a GP/family doctor located within the Ōrākei area, and 28% are enrolled in areas nearby (Maungakiekie-Tāmaki 10%, Albert-Eden 9%, Waitemata 9%)



For more information about GP/family doctors, such as opening hours and contact details, go to www.healthpoint.co.nz.

For information about after-hour services in the area, go to <http://afterhoursnetwork.co.nz>.

Health and wellbeing

Many factors contribute to good health and well-being in communities. Examples include:

- Education and employment opportunities.
- High quality physical environment.
- Good quality housing that is not crowded.
- Good urban design and healthy transport options e.g. walkways & cycle pathways, access to public transport.
- Support for people to be smokefree.
- Less alcohol outlets and gambling venues.
- Good access to healthy food.
- People feeling connected in their communities.

In 2012, people living in Ōrākei said the most important health issues facing their communities were: obesity, diet, alcohol problems, aged care, and cost of health services.

In Ōrākei only 2% of residents live in Quintile 5 areas (the most deprived neighbourhoods, 2013 estimation). Across local boards in Auckland the range is 0% to 82% (median is 18%). Quintile 5 means a neighbourhood is among the most deprived 20% of neighbourhoods in New Zealand (according to the New Zealand Deprivation score 2013). Therefore, compared with other communities in New Zealand, most people living in Ōrākei have relatively good social and economic living conditions.

A range of factors related to health and ill-health are listed below. It is important to note that there is limited health information available at the local board level.

Auckland DHB Community Health Survey (2012)

Self-rated health

In the 2012 Auckland DHB community health survey, this is how Ōrākei residents rated their health.

- 51% of residents rated their health as high, 42% rated their health as moderate, and 7% rated their health as low (on a 7 point scale).
- Residents reported that the most positive impacts on health were:
 - Diet and nutrition.
 - Exercise.
 - Access to good healthcare services.
 - Support from family/friends.
 - Health insurance.
 - Genetics/ancestry.
 - Stopping smoking.

Quality of health care

- In the 2012 survey, 77% of residents rated the quality of their health care as high, 21% rated quality as moderate, and 2% rated quality as low (on a 7 point scale).
- For those who rated their quality of health care as low, the main issues were problems with cost of health services, lack of after-hours services, and poor availability of GP appointments.
- The cost of health services was perceived to be higher in Ōrākei than in other areas.

Source: Auckland DHB Community Health Survey, 2012, available online at: <https://www.healthvoice.org.nz/show-reports/community-health-wellbeing-survey-update.aspx>.

Indicator	Ōrākei	Worst	Range for local boards in the Auckland Region	Best
1 Male Life Expectancy at birth (years)	83	75		83
2 Female Life Expectancy at birth (years)	86	80		87
3 Population in overcrowded households	5%	43%		4%
4 People aged 15 years or more who are regular smokers	7%	22%		7%
5 Adults commuting by:	4%	2%		28%
6 - walking, jogging or riding a bike	4%	2%		28%
6 - taking public train or bus	8%	0%		13%
7 Dwellings with more than 1 alcohol off-license within 800m	27%	84%		5%
8 Hospital discharge rate ASR per 1,000	120	209		108
9 Emergency Department Visits ASR per 1,000 population	166	297		116
10 Out patient First Specialist Assessment ASR per 1,000 population	109	226		109
11 Cancer Mortality ASR per 1,000	81	193		64
12 Cardiovascular Mortality ASR per 1,000	67	196		44

*Data sources: 1-2: Statistics NZ, with further analysis by Auckland DHB, 2010-2012 data; 3-5: 2013 Census, data in 5-6 applies to people aged 15 years or more who were employed in the week prior to the Census; 7: Auckland Regional Public Health Service, 2012 data; 8: Ministry of Health National Minimum Dataset with further analysis by Auckland DHB, 2014 data; 9-10 Ministry of Health National Non-Admitted patient collection with further analysis by Auckland DHB, 2014 data; 11-12 Ministry of Health Mortality collection with further analysis by Auckland DHB, 2010-12

For more population-level health information for local board areas, see the Locality Atlas at www.adhb.govt.nz/planningandfunding.

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