3. EXECUTIVE SUMMARY

Introduction
In 2003, the NSW Department of Health, in conjunction with the 17 area health services, completed the second year of the NSW Continuous Health Survey, an ongoing survey of the health of people in NSW using computer-assisted telephone interviewing (CATI). The main aims of the NSW Continuous Health Survey are to provide detailed information on the health of the people of NSW, and to support the planning, implementation, and evaluation of health services and programs in NSW. This report describes the New South Wales Adult Health Survey 2003, a major activity of the NSW Continuous Health Survey.

The content of the New South Wales Adult Health Survey 2003 was developed by the Health Survey Program in consultation with key stakeholders, area health services, other government departments, and a range of experts. The content covered the eight priority areas outlined in Healthy People 2005: New Directions for Public Health in NSW. The questionnaire was translated into five languages: Arabic, Chinese, Greek, Italian, and Vietnamese.

Interviews were carried out continuously between February and December 2003. The target population for the New South Wales Adult Health Survey 2003 was all NSW residents aged 16 years and over living in households with private telephones. Households were sampled using list-assisted random digit dialling. When a household was contacted, one person was randomly-selected for interview. Information was collected on a total of 13,088 adults.

Health behaviours
Unhealthy behaviours contribute significantly to the burden of death and ill health in NSW. Health behaviours measured in the New South Wales Adult Health Survey 2003 included alcohol intake, food handling practices, fruit and vegetable consumption, immunisation, physical activity, smoking, and smoking in the home.

More than one-third of the overall population reported undertaking risk-drinking behaviours. More males than females reported risk-drinking behaviours, and young adults of both sexes were more likely to report risk-drinking behaviour than the general population. There was geographic variation, with rural residents reporting higher levels of risk-drinking than urban residents. Encouragingly, there has been a decrease in the proportion of people reporting risk-drinking behaviours since 1997.

Over three-quarters of people aged 65 years and over reported being vaccinated against influenza in the past 12 months. Less than half of people in this age group reported being vaccinated against pneumococcal disease in the preceding five years. However, the proportion of people being vaccinated against both these conditions has continued to increase each year.

Just under half of all respondents reported eating the recommended daily fruit intake, while only one in five respondents reported consuming the recommended daily minimum quantity of vegetables. Under half of respondents reported using low fat milk. A greater proportion of females than males consumed the recommended amount of fruit, vegetables, and used low fat milk each day. Overall, just over six per cent of respondents reported that they had run out of food and could not afford to buy more, on at least one occasion in the previous 12 months.

Under half of all respondents aged 16 years and over reported undertaking adequate levels of physical activity. The proportion of males undertaking adequate physical activity was greater than females.

In 2003, just over one in five adults aged 16 and over reported that they are current smokers. More males than females reported that they currently smoke. More than 80 per cent of respondents reported that their home was smoke-free, while nine per cent reported people ‘occasionally’ smoked inside the house, and just under nine per cent reported that people ‘frequently’ smoked inside the house.

Health status
The New South Wales Adult Health Survey 2003 collected information on a range of health indicators including: self-rated health status, asthma, diabetes, incontinence, falls, oral health, overweight or obesity, and psychological distress.

Over 80 per cent of the population rated their own health as ‘excellent’, ‘very good’, or ‘good’. There was no difference between the proportion of males and females who gave a positive rating of their health status.

Overall, 11 per cent of respondents aged 16 years and over reported current doctor-diagnosed asthma. A greater proportion of females than males reported current asthma.

Approximately six per cent of people aged 16 years and over reported that a doctor had ever told them that they had diabetes. More males than females reported diabetes. The prevalence of diabetes increased with age and has increased since 1997.

Almost one-quarter of people aged 65 years and over reported a fall in the last 12 months, with a significantly greater proportion of females than males reporting a fall. Almost one-third of falls required medical treatment and over one-quarter required hospitalisation.

Almost six per cent of all respondents reported that they had none of their natural teeth.
Just under half of all respondents reported being either overweight or obese, and 16 per cent of people were classified as obese. A significantly greater proportion of males than females were classified as overweight or obese. The proportion of people classified as overweight or obese has risen since 1997.

Overall, one in nine respondents reported either ‘high’ or ‘very high’ levels of psychological distress. Females were more likely than males to report ‘high’ or ‘very high’ levels of psychological distress. Rates of ‘high’ and ‘very high’ psychological distress rose significantly between 1998 and 2003, but dropped between 2002 and 2003.

**Health services**

The *New South Wales Adult Health Survey 2003* collected information on the use of, and satisfaction with, health services including emergency departments, hospitals, and community health centres; and information on difficulties obtaining health care when needed.

Over one in eight respondents reported experiencing difficulties getting health care when needed. Females were more likely to have difficulties getting health care than males, as were rural residents.

One in seven respondents reported attending an emergency department in the previous 12 months; of these, almost four-fifths rated the care received as ‘excellent’, ‘very good’, or ‘good’. Similarly, one in seven respondents had been admitted to hospital and over 90 per cent of these rated the care received as ‘excellent’, ‘very good’, or ‘good’. Just over five per cent of respondents reported attending a community health centre, with over 93 per cent rating the care they received as ‘excellent’, ‘very good’, or ‘good’.

**Social capital**

The term ‘social capital’ refers to the institutions, relationships, and conventions that shape social networks, foster trust, and facilitate coordination and cooperation for mutual benefit. The *New South Wales Adult Health Survey 2003* included questions on social reciprocity and neighbourhood connection, feelings of trust and safety, and participation in the local community.

Nearly three-quarters of respondents stated that they could ask someone in their neighbourhood for help with caring for a child, if they needed to; and that they would be sad if they had to leave their neighbourhood. Over two-thirds of respondents reported feeling safe walking down their street after dark. Males were more likely to report feeling safe than females.

Overall, almost one-third of the population reported that they had helped out a local group or organisation, and more than half of the population had attended a local community event in the past six months.