

# Selected health characteristics for regional populations, Queensland 2017–18

September 2019



## About this report

The objective of this report is to provide data from the 2017–18 National Health Survey to characterise the health of regional populations in Queensland by Primary Health Networks (PHNs) and most Hospital and Health Services (HHSs). This is the first time such information has been reportable for HHSs.

This report includes data for a wide range of long-term chronic conditions and selected risk factors, not collected in the annual Queensland Preventive Health Survey.

There are limits in the reporting. Not all HHSs were included in the survey as the survey design does not include households in very remote locations. Not all indicators are reportable due to small sample sizes for low prevalence conditions. All data tables including margin of error are available on the Queensland Health website (see below) due to their size and complexity.

All the data was provided to Queensland Health by the Australian Bureau of Statistics (ABS). The investment and expertise associated with the data collection and analysis undertaken by the ABS is acknowledged.

This report was prepared by Preventive Health Branch (Margaret Bright and Danielle Herbert).

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An electronic version of this document and associated tables are available at

<https://www.health.qld.gov.au/research-reports/population-health/reports>

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# Summary

## Prevalence of long-term chronic conditions

- Overall about 1 in 2 Queenslanders (48%) reported at least one chronic condition in 2017–18
  - Prevalence varied from 30% in young people to 79% in older people
- One in 5 people (22%) reported two or more chronic conditions
  - Prevalence increased from 6% in young people to 51% in older people
- These patterns were evident in all Hospital and Health Services (HSSs) and Primary Health Networks (PHNs).

## Prevalence of all long-term conditions

For children and young people (0–24 years), the leading long-term conditions were:

- anxiety-related problems
- allergies
- asthma.

For younger adults through to middle age (25–64 years), the leading conditions were:

- sight-related problems
- back problems
- hayfever and chronic rhinitis
- mood and anxiety problems.

For older adults (65 years and older), the leading conditions were:

- sight-related problems
- arthritis
- hypertension
- deafness
- back problems.

These patterns were evident across the HSSs and PHNs.

Many of the common health problems in children, young people and in adult life are managed outside the hospital system, requiring services provided by GPs and allied health practitioners. Many of these conditions persist into the older years, diminishing a person's quality of life and wellbeing.

## Selected risk factors

The National Health Survey collects data on a range of risk factors and in 2017–18:

- Almost 30% of Queensland adults reported chronic bodily pain—19% with moderate pain and 8% with severe or very severe pain.
- 1 in 7 adults reported high or very high psychological distress, a likely indicator of mental health problems.
- 1 in 5 adults met the recommendation to undertake strength and toning exercises twice a week.
- 1 in 10 adults and 1 in 12 children consumed sugar sweetened beverages daily.
- 1 in 5 Queensland had high blood pressure when measured, putting them at higher risk of cardiovascular disease.

The Queensland prevalence of these risks was similar to national. There was variation among the PHNs and HSSs which will help to inform prevention strategies and improve health outcomes. For example, daily consumption of sugar sweetened drinks is likely to contribute to poorer dental outcomes for children and cause weight gain across the whole population. These are significant health challenges affecting wellbeing outcomes for individuals, and the sustainability of the health system.

# Contents

<b>Summary.....</b>	<b>3</b>
<b>Background .....</b>	<b>5</b>
<b>Long-term health conditions .....</b>	<b>6</b>
<b>Selected risk factors .....</b>	<b>12</b>
<b>References.....</b>	<b>15</b>

# Background

A national health survey is conducted by the Australian Bureau of Statistics (ABS) every three years to collect information on the prevalence of conditions, diseases and selected risk factors. Interviewers from the ABS visit people in their homes to conduct personal interview components of the survey. The sample frame was based on SA4 geographic areas and respondents later assigned to Hospital and Health Services (HHSs) and Primary Health Networks (PHNs) for Queensland.<sup>1</sup> This resulted in variable sample sizes for HHSs and PHNs (Table 1). Limited data is available for remote areas of Australia due to geographical limitations of interviewing.

Queensland Health funded an over-sampling of households to increase the representation of the state population in the National Health Survey 2017–18.<sup>1,2</sup> As a result, for the first time a range of indicators including measured weight status and blood pressure were reportable for most HHSs. A separate report on measured weight status was released by Queensland Health in May 2019.

Table 1. Number of persons surveyed by HHS and PHN, Queensland, 2017–18

	All ages	Children 2–17 years	Adults 18+ years
<b>Queensland</b>	<b>4,400</b>	<b>914</b>	<b>3,362</b>
<b>Hospital and Health Services (HHSs)</b>			
Cairns and Hinterland	161	25	136
Central Queensland	216	43	173
Darling Downs	300	50	250
Gold Coast	403	89	314
Mackay	166	43	123
Metro North	934	204	730
Metro South	852	202	650
North West	180	49	131
Sunshine Coast	353	58	295
Townsville	240	51	189
West Moreton	264	67	197
Wide Bay	168	27	141
<b>Primary Health Networks (PHNs)</b>			
Central Queensland, Wide Bay, Sunshine Coast	737	128	609
Brisbane North	934	204	730
Brisbane South	852	202	650
Darling Downs and West Moreton	564	117	447
Gold Coast	403	89	314
Northern Queensland	567	119	448
Western Queensland	219	55	164

Note: Data not publishable for Central West, South West and Torres and Cape HHSs.

# Long-term health conditions

This section reports the prevalence of selected long-term conditions for regional Queensland populations. Data are presented in tabular form with minimal interpretation. All data tables are available on the Queensland Health website for greater useability (see page 2). Access to the full Queensland dataset for research and population health reporting is available by application to ABS.<sup>3</sup>

A long-term health condition was defined by the ABS as a medical condition (illness, injury or disability) which has lasted at least six months, or which the respondent expects to last for six months or more. The suite of reported conditions has been used to characterise the health of the Australian population over many years. Any change in definition from survey to survey is published by the ABS. However, this report only includes data from the 2017–18 collection.

The prevalence of multimorbidity of selected chronic conditions is also included, consistent with the ABS definition which includes arthritis, asthma, back problems, cancer, COPD, diabetes, heart stroke and vascular disease, kidney disease, mental and behavioural conditions and osteoporosis.

The data was not age-adjusted which may have contributed to higher prevalence in some areas.

A cautionary note on ranking or comparisons between regions:

- PHNs may be compared, based on the relative difference in prevalence after adjusting for margin of error of the proportion. Tables of margin of error are provided on the Queensland Health website.
- HHSs may not be compared as smaller populations have resulted in higher levels of uncertainty.

Long-term condition data are presented as follows:

- Number of selected chronic conditions by age group, PHN and Queensland (Table 2)
- Prevalence of all long-term conditions by age group, PHN and Queensland
  - 0–24 years (Table 3)
  - 25–64 years (Table 4)
  - 65 years and older (Table 5)
  - Total population (Table 6)

## Long-term health conditions by HHS

### Data not publishable for Central West, South West and Torres and Cape HHSs.

Number of selected chronic conditions by 12 HHSs, and prevalence of long term conditions for persons aged 0–24 years, 25–64 years, 65 years and older, and all persons, by HHS, Queensland and Australia, with margins of error, were reported on the Queensland Health website (Tables 9–11). Note: use A3 paper size to maximise the print layout.

<https://www.health.qld.gov.au/research-reports/population-health/reports>

## Number of long-term chronic conditions by PHN, age group, and Queensland

As people age they are more likely to report multiple chronic conditions. This section reports on the frequency of multiple selected chronic conditions by age group and PHN (Table 2). The included chronic conditions were arthritis, asthma, back problems, cancer, COPD, diabetes, heart stroke and vascular disease, kidney disease, mental and behavioural conditions and osteoporosis. Similar data is reported for HHSs, Queensland and Australia (on the Queensland Health website for HHSs and on the ABS website for Queensland and Australia).

Considering all persons in Queensland in 2017–18 (Table 2):

- 52% reported no chronic condition
- 27% reported one chronic condition
- 22% reported two or more chronic conditions.

The frequency of such reporting varied by age group. For Queensland the proportion of people reporting two or more chronic conditions increased with age in 2017–18 (Table 2):

- 6% of those aged 0–24 years
- 23% of those aged 25–64 years
- 51% of those aged 65 years and older.

Generally, patterns of multimorbidity were similar across the PHNs with some of variation which may be due to differing age structures, recognising the data was not age-adjusted (Table 2 and web release, with margins of error. Note: use A4 paper size to maximise the print layout.).

Table 2. Number of selected long-term health conditions by age group, crude prevalence by PHN, Queensland and Australia, 2017–18

	Brisbane North				Brisbane South				Gold Coast			
	0–24	25–64	65 years and over	All persons	0–24	25–64	65 years and over	All persons	0–24	25–64	65 years and over	All persons
PROPORTION (%)												
<b>Number of selected chronic conditions</b>												
None	70.4	44.6	13.5	48.3	73.2	52.2	20.3	54.8	72.1	55.7	#29.1	57.7
One	24.5	30.3	26.7	27.8	20.1	32.5	28.0	27.6	#22.3	23.5	#37.8	24.5
Two or more	6.4	25.5	62.7	23.4	6.7	16.2	55.5	17.3	#7.2	17.4	#31.8	16.6
<i>One or more</i>	30.6	55.8	89.5	51.8	27.9	49.3	80.6	45.0	#27.9	42.2	#65.6	42.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
	Darling Downs and West Moreton				Western Queensland				Central Queensland, Wide Bay, Sunshine Coast			
	0–24	25–64	65 years and over	All persons	0–24	25–64	65 years and over	All persons	0–24	25–64	65 years and over	All persons
PROPORTION (%)												
<b>Number of selected chronic conditions</b>												
None	71.6	40.5	19.9	47.5	#64.3	#56.7	#9.1	#54.8	64.5	44.9	23.6	47.1
One	20.6	29.6	25.1	25.2	#29.4	20.6	#42.4	#26.5	#32.2	27.5	27.1	28.3
Two or more	10.5	30.6	63.5	27.6	#6.3	#20.3	#30.3	18.3	#3.6	26.1	#48.3	24.3
<i>One or more</i>	29.0	58.8	82.8	52.1	#31.9	#42.6	#84.8	#45.2	#35.5	53.8	#74.9	53.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
	Northern Queensland				Queensland				Australia			
	0–24	25–64	65 years and over	All persons	0–24	25–64	65 years and over	All persons			65 years and over	All persons
PROPORTION (%)												
<b>Number of selected chronic conditions</b>												
None	69.6	53.3	#24.4	53.4	70.1	48.8	20.9	51.6	(b)	(b)	20.1	52.7
One	25.4	23.7	#29.1	25.2	23.5	28.7	27.3	26.8			29.3	27.0
Two or more	5.5	22.2	52.2	20.9	6.4	22.7	51.4	21.5			50.8	20.2
<i>One or more</i>	31.7	46.1	78.5	46.5	30.2	51.4	78.5	48.3			80.1	47.2
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0			100.0	100.0

# Proportion has a high margin of error and should be used with caution.

Cells in this table containing data have been randomly adjusted to avoid the release of confidential data. Discrepancies may occur between sums of the component items and totals.

(a) Selected chronic condition consists of arthritis, asthma, back problems (dorsopathies), cancer (malignant neoplasms), chronic obstructive pulmonary disease (COPD), diabetes mellitus, heart, stroke and vascular disease, kidney disease, mental and behavioural conditions and osteoporosis. Includes persons who have a current medical condition which has lasted, or is expected to last, for 6 months or more; except for persons reporting diabetes mellitus and/or heart, stroke and vascular disease which are included irrespective of whether the condition is current and/or long-term. Multiple conditions belonging to the same condition type (eg Mental and behavioural conditions) are treated as the one condition. For example, a person with anxiety and depression (and no other chronic condition) is treated as having one selected chronic condition. For more information see Glossary (ABS 2019).

(b) Additional age groups for Australia available on request to ABS.

## Prevalence of long-term conditions for persons aged 0–24 years by PHN and Queensland

The six most frequently reported long-term conditions for children and young people aged 0–24 years in Queensland in 2017–18 were:

- anxiety-related problems (15%)
- allergies (12%)
- asthma (12%)
- hayfever and allergic rhinitis (11%)
- short sighted/myopia (11%)
- long sighted/hyperopia (10%).

These six leading conditions were common to most PHNs and HHSs although the relative ranking differed a little (Table 3).

Most of the common conditions experienced by children and young people are managed outside the hospital system by a range of practitioners including GPs, allied health and mental health practitioners. Many of these conditions are likely to persist into adulthood.

Table 3. Long-term health conditions for persons aged 0–24 years, crude prevalence by PHN and Queensland, 2017–18

Due to the size of Table 3, please refer to the web release including margins of error.

Note: use A3 paper size to maximise the print layout.

<https://www.health.qld.gov.au/research-reports/population-health/reports>



## Prevalence of long-term conditions for persons aged 25–64 years by PHN and Queensland

The 10 most frequently reported long-term conditions for adults aged 25–64 years in Queensland in 2017–18 were:

- long sighted/hyperopia (37%)
- short sighted/myopia (31%)
- back problems (22%)
- hayfever and chronic rhinitis (17%)
- anxiety-related problems (17%)
- mood problems (16%)
- allergies (15%)
- arthritis (13%)
- chronic sinusitis (12%)
- asthma (12%).

These leading conditions were common to most PHNs and HHSs although the relative ranking differed a little (Table 4).

Apart from sight-related problems, the most common broad condition groups were musculoskeletal problems such as back problems and arthritis (33%), respiratory conditions such as hayfever, asthma and chronic sinusitis (33%) and mental and behavioural problems such as anxiety and depression (25%). Much of the impact of these conditions on health service demand lies outside the hospital system. Health expenditure reports reflect the impact of such conditions on the broader health system which showed, for example, that mental health conditions were prominent causes of expenditure on GP services and allied health services.<sup>4</sup>

Many of these conditions are likely to persist and will reduce quality of life and wellbeing. International evidence has shown that the more effective strategy to reduce long-term costs associated with an ageing population is to ensure that people enter their later years in a better state of health.<sup>5</sup> Addressing preventable risks in the adult years is a critical strategy to managing the financial impact of ageing.

Table 4. Long-term health conditions for persons aged 25–64 years, crude prevalence by PHN and Queensland, 2017–18

Due to the size of Table 4, please refer to the web release including margins of error.

Note: use A3 paper size to maximise the print layout.

<https://www.health.qld.gov.au/research-reports/population-health/reports>

## Prevalence of long-term conditions for persons aged 65+ years by PHN and Queensland

Long-term conditions are more commonly reported by older people. The 12 most prevalent and frequently reported conditions for older adults aged 65 years and older in Queensland in 2017–18 were:

- long sighted/hyperopia (68%)
- arthritis (47%)
- short sighted/myopia (46%)
- hypertension (38%)
- deafness (35%)
- back problems (28%)
- high cholesterol (19%)
- heart, stroke and vascular disease (19%)
- allergies (18%)
- hayfever and chronic rhinitis (17%)
- osteoporosis (16%)
- mood problems (14%).

These leading conditions were common to most PHNs and HHSs although the relative ranking differed a little (Table 5).

Apart from sight-related problems (reported by 93% of older people), the most common broad condition groups experienced by older people were musculoskeletal problems such as arthritis, back problems and osteoporosis (65%), circulatory conditions such as hypertension, heart, stroke and vascular diseases (56%), and endocrine and metabolic disease such as high cholesterol and diabetes (37%).

Much of the impact of these conditions is on the hospital system. People are likely to experience multiple conditions, complicating their care and outcomes, and sometimes resulting in early death. Although relatively few people report cancer as a long-term condition (7%), incidence rates in this age group are generally high.<sup>6</sup>

The chronic conditions of ageing are likely to persist, require substantial management and reduce quality of life and wellbeing.

Table 5. Long-term health conditions for persons aged 65 years and older, crude prevalence by PHN and Queensland, 2017–18

Due to the size of Table 5, please refer to the web release including margins of error.

Note: use A3 paper size to maximise the print layout.

<https://www.health.qld.gov.au/research-reports/population-health/reports>

## Prevalence of long term conditions for all persons by PHN and Queensland

Considering all persons in the population, the 12 most frequently reported conditions in Queensland in 2017–18 were:

- long sighted/hyperopia (33%)
- short sighted/myopia (26%)
- back problems (17%)
- anxiety problems (16%)
- hayfever and chronic rhinitis (15%)
- allergies (14%)
- arthritis (14%)
- mood problems (13%)
- asthma (12%)
- deafness (12%)
- chronic sinusitis (10%)
- hypertension (10%).

These leading conditions were common to most PHNs and HHSs although the relative ranking differed a little (Table 6).

These conditions are among the most frequent at each stage of life. For example, about 1 in 10 people report asthma regardless of age. Allergies are reported by about 1 in 7 people, again regardless of age.

In contrast, circulatory diseases are much more prevalent in older people—at least 1 in 2 older people compared with about 1 in 50 children and young people (0–24 years).

Problems with eyesight are prevalent in children but increase with age, as do problems with hearing.

Musculoskeletal problems are common across the age course, but the nature of the prevalent conditions changes—back pain is very common in younger and middle-aged adults while arthritis becomes a significant problem as people age.

Table 6. Long-term health conditions for all persons, crude prevalence by PHN and Queensland, 2017–18

Due to the size of Table 6, please refer to the web release including margins of error.

Note: use A3 paper size to maximise the print layout.

<https://www.health.qld.gov.au/research-reports/population-health/reports>

# Selected risk factors

A wide range of risk factors were assessed as part of the 2017–18 National Health Survey. This included risk factors not otherwise available for the Queensland population and for the first time are now available for regional populations (Table 7, Table 8 and web release, with margins of error. Note: use A4 paper size to maximise the print layout).

## High blood pressure

- By measurement, 1 in 5 Queensland adults (22%) reported high blood pressure, putting them at higher risk of cardiovascular disease.
- The prevalence of high blood pressure rises steeply with age.
- High blood pressure is treated with medication and lifestyle modifications, which would suggest that the 22% of adults with high blood pressure are either undiagnosed cases or not adequately treated.

## Chronic bodily pain

- Almost 30% of adults reported bodily pain in the past month—19% with moderate pain and 8% with severe or very severe pain.
- Chronic bodily pain is associated with a range of chronic conditions.

## Psychological distress

- 1 in 7 adults (14%) reported high or very high psychological distress, likely to indicate mental health problems.
- There has been no change in the prevalence of high psychological distress in Queensland since 2001.

## Strength and toning exercises

- 1 in 5 adults (21%) reported undertaking strength and toning exercises at least twice a week.
- This is a recommendation of the national physical activity guidelines.<sup>7</sup>

## Sugar sweetened beverages

- 1 in 10 adults (10%) and 1 in 12 children (8%) consumed sugar sweetened beverages daily.
- 1 in 20 adults (6%) and 1 in 100 children (1%) consumed diet drinks daily.

The prevalence of these risks varied by PHN (Table 7) and HHS (Table 8).

## Explanatory notes for Tables 7 and 8

# Proportion has a high margin of error and should be used with caution.

Cells in this table containing data have been randomly adjusted to avoid the release of confidential data. Discrepancies may occur between sums of the component items and totals.

Measured high blood pressure excludes self-reported hypertension prevalence rates. In 2017-18, 31.6% of respondents aged 18 years and over did not have their blood pressure measured.

For these respondents, imputation was used to obtain blood pressure. For more information see Appendix 2: Physical measurements in the National Health Survey.

Psychological distress: a score of 22 or more on the Kessler Psychological Distress Scale (K10). For more information see Glossary.

Sugar sweetened drinks includes soft drink, cordials, sports drinks or caffeinated energy drinks. May include soft drinks in ready to drink alcoholic beverages.

Sugar sweetened drinks excludes fruit juice, flavoured milk, 'sugar free' drinks, or coffee / hot tea.

Diet drinks includes drinks that have artificial sweeteners added to them rather than sugar. Includes diet soft drink, cordials, sports drinks or caffeinated energy drinks.

Diet drinks may include diet soft drinks in ready to drink alcoholic beverages.

Diet drinks excludes non-diet drinks, fruit juice, flavoured milk, water or flavoured water, or coffee/tea flavoured with sugar replacements like 'Equal'.

Table 7. Selected risks, crude prevalence by Primary Health Network, adults and children, Queensland and Australia, 2017–18

	Brisbane North	Brisbane South	Gold Coast	Darling Downs and West Moreton	Western Queensland	Central Queensland, Wide Bay, Sunshine Coast	Northern Queensland	Queensland	Australia
<b>18 years and over</b>									
<b>Health risk factors</b>									
High blood pressure (≥140/90)	20.6	16.6	19.6	25.3	#25.6	26.9	23.8	21.8	22.8
<b>Bodily pain experienced in last four weeks</b>									
None/Very mild/Mild	74.4	66.6	73.6	62.7	#75.1	67.5	69.5	69.4	70.2
Moderate	16.7	20.1	18.1	22.2	8.1	19.4	18.7	19.0	18.3
Severe/Very severe	6.9	7.2	5.2	8.8	#9.1	10.8	7.9	7.8	7.5
<b>Psychological distress (Kessler K10)</b>									
Low distress level	59.6	55.5	69.3	56.2	#63.3	64.8	56.5	59.9	60.8
Moderate distress level	20.8	26.8	19.7	24.3	15.1	19.5	22.2	22.3	21.9
High/Very high distress level	17.3	11.8	9.0	15.0	18.1	12.5	17.3	13.9	13.0
<b>Number of days undertook strength or toning activities in the last week</b>									
None	74.1	73.1	69.3	79.9	#82.6	75.9	76.3	74.7	71.9
1 day	3.2	3.5	7.8	4.2	#3.3	3.7	3.4	4.2	5.0
2 days	6.7	8.5	4.7	5.0	7.4	6.6	3.1	6.5	7.0
2 or more days	22.1	24.0	22.0	15.4	#15.3	21.2	19.1	21.2	23.1
3 or more days	15.9	14.4	16.2	12.1	6.0	14.8	16.1	14.7	16.1
<b>Consumption of sugar sweetened and diet drinks</b>									
Daily consumption of sugar sweetened drinks	9.8	11.6	7.3	13.3	13	8.3	11.2	10.3	9.1
Daily consumption of diet drinks	5.1	5.9	#1.1	9.1	6.7	5.6	8.0	5.8	4.8
Daily consumption of sugar sweetened or diet drinks	15.3	16.4	10.2	22.0	18.4	13.7	16.7	15.8	13.5
Does not usually consume sugar sweetened or diet drinks	54.4	48.0	57.2	43.2	37.9	57.1	50.0	51.9	52.0
<b>Total 18 years and over</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<b>Children 2-17 years</b>									
<b>Consumption of sugar sweetened and diet drinks</b>									
Daily consumption of sugar sweetened drinks	6.2	10.0	#7.5	11.1	#5.7	#2.8	9.7	8.1	7.1
Daily consumption of diet drinks	#1.1	#1.2	5.7					0.8	1.3
Daily consumption of sugar sweetened or diet drinks	8.3	11.4	#7.8	11.1	#5.7	#2.8	8.9	8.6	8.1
Does not usually consume sugar sweetened or diet drinks	52.2	45.5	#59.7	#48.3	#60.0	#58.5	#55.3	53.9	55.2
<b>Total 2-17 years</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>

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Cells in this table containing data have been randomly adjusted to avoid the release of confidential data. Discrepancies may occur between sums of the component items and totals.

Measured high blood pressure excludes self-reported hypertension prevalence rates. In 2017-18, 31.6% of respondents aged 18 years and over did not have their blood pressure measured.

For these respondents, imputation was used to obtain blood pressure. For more information see Appendix 2: Physical measurements in the National Health Survey.

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Sugar sweetened drinks excludes fruit juice, flavoured milk, 'sugar free' drinks, or coffee / hot tea.

Diet drinks includes drinks that have artificial sweeteners added to them rather than sugar. Includes diet soft drink, cordials, sports drinks or caffeinated energy drinks.

Diet drinks may include diet soft drinks in ready to drink alcoholic beverages.

Diet drinks excludes non-diet drinks, fruit juice, flavoured milk, water or flavoured water, or coffee/tea flavoured with sugar replacements like 'Equal'.

Data not publishable for Central West, South West and Torres and Cape HHSs.

Shading indicates data was not reportable. See page 12 for explanatory notes.

Please refer to the web release for Table 7 including margins of error.

Note: use A4 paper size to maximise the print layout.

<https://www.health.qld.gov.au/research-reports/population-health/reports>

Table 8. Selected risks, crude prevalence by Hospital and Health Service, adults, Queensland, 2017–18

	Cairns and Hinterland	Central Queensland	Darling Downs	Gold Coast	Mackay	Metro North
<b>18 years and over</b>						
<b>Health risk factors</b>						
High blood pressure (≥140/90)	28.3	19.1	28.3	19.6	18.7	20.6
<b>Bodily pain experienced in last four weeks</b>						
None/Very mild/Mild	#68.3	70.9	#66.3	73.6	72.7	74.4
Moderate	16.6	18.2	21.5	18.1	13.1	16.7
Severe/Very severe	12.1	7.4	9.6	5.2	#5.1	6.9
<b>Psychological distress (Kessler K10)</b>						
Low distress level	#59.6	55.5	#58.3	69.3	#57.9	59.6
Moderate distress level	20.4	25.2	23.8	19.7	#21.9	20.8
High/Very high distress level	18.7	16.2	15.1	9.0	17.3	17.3
<b>Number of days undertook strength or toning activities in the last week</b>						
None	#76.2	69.1	#81.0	69.3	86.2	74.1
1 day	#2.6	5.8	#2.9	7.8	#2.2	3.2
2 days	#2.2	6.3	5.2	4.7	#4.0	6.7
2 or more days	18.7	24.8	16.1	22.0	19.9	22.1
3 or more days	19.1	16.0	9.5	16.2	12.9	15.9
<b>Consumption of sugar sweetened and diet drinks</b>						
Daily consumption of sugar sweetened drinks	8.8	6.8	6.4	7.3	12.9	9.8
Daily consumption of diet drinks	6.7	4.7	9.7	#1.1	7.1	5.1
Daily consumption of sugar sweetened or diet drinks	#19.4	11.6	15.1	10.2	15.4	15.3
Does not usually consume sugar sweetened or diet drinks	#58.8	#43.6	51.7	57.2	#48.4	54.4
<b>Total 18 years and over</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
	Metro South	North West	Sunshine Coast	Townsville	West Moreton	Wide Bay
<b>18 years and over</b>						
<b>Health risk factors</b>						
High blood pressure (≥140/90)	16.6	19.9	28.9	21.4	23.2	28.1
<b>Bodily pain experienced in last four weeks</b>						
None/Very mild/Mild	66.6	80.6	67.6	69.4	#58.9	63.8
Moderate	20.1	12.9	20.0	21.6	22.6	19.6
Severe/Very severe	7.2	7.5	10.7	7.9	6.5	13.0
<b>Psychological distress (Kessler K10)</b>						
Low distress level	55.5	#60.8	66.7	#52.2	#53.9	71.3
Moderate distress level	26.8	17.7	21.5	25.1	22.8	16.8
High/Very high distress level	11.8	17.7	11.5	22.3	14.1	8.6
<b>Number of days undertook strength or toning activities in the last week</b>						
None	73.1	#82.3	#75.6	75.8	78.1	80.3
1 day	3.5	#4.3	4.0	#5.7	#1.8	#2.0
2 days	8.5	#5.4	6.7	5.0	4.2	5.8
2 or more days	24.0	13.4	19.6	20.9	15.8	14.5
3 or more days	14.4	10.2	13.6	15.1	12.0	10.6
<b>Consumption of sugar sweetened and diet drinks</b>						
Daily consumption of sugar sweetened drinks	11.6	#18.8	7.1	9.2	16.1	#12.7
Daily consumption of diet drinks(b)	5.9	4.8	5.6	8.6	11.5	#3.3
Daily consumption of sugar sweetened or diet drinks	16.4	#22.6	11.4	18.2	29.9	18.2
Does not usually consume sugar sweetened or diet drinks	48.0	37.1	68.5	#43.4	36.0	#49.4
<b>Total 18 years and over</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>

# Proportion has a high margin of error and should be used with caution.

Cells in this table containing data have been randomly adjusted to avoid the release of confidential data. Discrepancies may occur between sums of the component items and totals.

Measured high blood pressure excludes self-reported hypertension prevalence rates. In 2017-18, 31.6% of respondents aged 18 years and over did not have their blood pressure measured.

For these respondents, imputation was used to obtain blood pressure. For more information see Appendix 2: Physical measurements in the National Health Survey.

Psychological distress: a score of 22 or more on the Kessler Psychological Distress Scale (K10). For more information see Glossary.

Sugar sweetened drinks includes soft drink, cordials, sports drinks or caffeinated energy drinks. May include soft drinks in ready to drink alcoholic beverages.

Sugar sweetened drinks excludes fruit juice, flavoured milk, 'sugar free' drinks, or coffee / hot tea.

Diet drinks includes drinks that have artificial sweeteners added to them rather than sugar. Includes diet soft drink, cordials, sports drinks or caffeinated energy drinks.

Diet drinks may include diet soft drinks in ready to drink alcoholic beverages.

Diet drinks excludes non-diet drinks, fruit juice, flavoured milk, water or flavoured water, or coffee/tea flavoured with sugar replacements like 'Equal'.

Data not publishable for Central West, South West and Torres and Cape HHSs.

Shading indicates data was not reportable. See page 12 for explanatory notes.

Please refer to the web release for Table 8 including margins of error.

Note: use A4 paper size to maximise the print layout.

<https://www.health.qld.gov.au/research-reports/population-health/reports>

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