

Tasmanian Population Health Survey 2013

Results for Tasmanians 65 years and over

This fact sheet summarises key health and lifestyle behaviours and health status for Tasmanians aged 65 years and over from the Tasmanian Population Health Survey 2013.

As in 2009, the Tasmanian Population Health Survey 2013 was conducted as a CATI telephone survey. The survey took place during 28 October to 13 December 2013. During this time, 6,301 Tasmanians aged 18 years and over participated in answering a series of questions on their health and lifestyle.

All data for 2013 are presented alongside 2009 data to allow for trend analysis. Confidence intervals (95% CI) have been included for statistical significance testing. Please note that when the 95% CI of two estimates do not overlap, the estimates are statistically significantly different. When the 95% CI of the estimates do overlap, the estimates are deemed to be not significantly different.

Health and Well Being

Health status generally declines with older age, with noticeable increases in the proportion of Tasmanian adults rating their health as fair/poor first evident at about the age of 45-54 years.

For the 65 plus age group, the rate of self-assessed excellent or very good health (41.4%) was slightly higher than for the total population, and the rate of fair/poor health (21.9%) was higher than the Tasmanian rate.

Self-assessed health status, age 65 and over, Tasmania 2013

	Excellent/Very Good		Good		Fair/Poor	
	%	95% CI	%	95% CI	%	95% CI
65+	41.4%	[39.2%,43.5%]	36.2%	[34.1%,38.3%]	21.9%	[20.2%,23.7%]
18 years and over	40.9%	[39.0%,42.7%]	39.8%	[37.9%,41.6%]	19.0%	[17.8%,20.4%]

Tasmanian Population Health Surveys 2013

Psychological distress is assessed with the Kessler 10 Psychological Distress Scale (K10). The K10 is a set of ten questions that categorise the level of psychological distress over a four week period. It covers the dimensions of nervousness, hopelessness, restlessness, sadness and worthlessness. Based on aggregate response scores, psychological distress is categorised into four levels: low, moderate, high, and very high psychological distress. The K10 has been validated as a diagnostic screening tool for the presence of anxiety and depression.

The rate of high levels of psychological distress for Tasmania's older population is lower than for the total Tasmanian population aged 18 years and over. There has been a further decline in the rate of psychological distress from 8.8% to 7.2% in 2013.

High/very high levels of psychological distress, 65 years and over, Tasmania 2009 and 2013

High/very high distress	2009		2013		Significant
	%	95% CI	%	95% CI	
Age					
65+	8.8%	[7.4%,10.6%]	7.2%	[6.1%,8.4%]	N
18 years and over	10.9%	[9.9%,11.9%]	11.4%	[10.1%,12.7%]	N

Tasmanian Population Health Surveys 2009 and 2013

Risk Factors

Smoking

Smoking prevalence in Tasmania has declined for every age group since 2009, including Tasmanians aged 65 years and over, with smoking falling from 8.8% in 2009 to 7.0% in 2013.

Current smokers, 65 years and over, Tasmania 2009 and 2013

Current smokers*	2009		2013		Significant
	%	95% CI	%	95% CI	
Age					
65+	8.8%	[7.4%,10.4%]	7.0%	[6.0%,8.2%]	N
18 years and over	19.8%	[18.5%,21.1%]	15.0%	[13.6%,16.5%]	Y

*includes occasional smoking; Tasmanian Population Health Surveys 2009 and 2013

Smoking rates for males fell state-wide from 21% to 15.5% and for females from 18.6% to 14.5%. Smoking declined for males and females across all age groups, including 65 years and over.

Current smokers* 65 years and over by sex, Tasmania 2009 and 2013

Current smoker	Males				Females			
	2009		2013		2009		2013	
Age	%	95% CI	%	95% CI	%	95% CI	%	95% CI
65+	9.9%	[7.6%,12.7%]	7.1%	[5.6%,9.0%]	7.9%	[6.3%,9.9%]	6.9%	[5.7%,8.5%]
18 years and over	21.0%	[19.0%,23.2%]	15.5%	[13.3%,17.9%]	18.6%	[17.1%,20.3%]	14.5%	[12.8%,16.4%]

*includes occasional smoking; Tasmanian Population Health Surveys 2009 and 2013

Alcohol Harm

Alcohol consumption at lifetime risk (chronic alcohol related harm) has remained stable at around 4.5% for Tasmanians aged 65 years and over since 2009.

Alcohol consumption causing life time risk, 65 years and over, Tasmania 2009 and 2013

Life time risk*	2009		2013		Significant
Age	%	95% CI	%	95% CI	
65+	4.6%	[3.5%,5.9%]	4.5%	[3.7%,5.6%]	N
18 years and over	5.9%	[5.2%,6.7%]	4.6%	[3.9%,5.3%]	N

Tasmanian Population Health Surveys 2009 and 2013; >2 drinks daily males/females

The prevalence of alcohol consumption at levels causing short term harm (single occasion risk) has fallen for Tasmanians aged 65 years and over, from 6.1% to 5.2%.

Alcohol consumption causing single occasion risk, 65 years and over, Tasmania 2009 and 2013

Single occasion*	2009		2013		Significant
Age	%	95% CI	%	95% CI	
65+	6.1%	[4.9%,7.6%]	5.2%	[4.2%,6.4%]	N
18 years and over	26.7%	[25.2%,28.1%]	20.4%	[18.8%,22.1%]	Y

Tasmanian Population Health Surveys 2009 and 2013; *> 4 standard drinks for males/females on a single occasion

BMI status – self-reported

The prevalence of higher body mass index (BMI) continues to increase for all age groups. Using self-reported height and weight, the rate of overweight BMI in people aged 65 years and over increased from 38.7% to 40.2% in 2013.

Self-reported overweight BMI, 65 years and over, Tasmania 2009 and 2013

Overweight	2009		2013		Significant
	%	95% CI	%	95% CI	
65+	38.7%	[36.1%,41.5%]	40.2%	[37.9%,42.5%]	N
18 years and over	36.3%	[34.8%,37.9%]	37.6%	[35.7%,39.6%]	N

Tasmanian Population Health Surveys 2009 and 2013

Self-reported obese BMI for older Tasmanians increased from 16.7% in 2009 to 20.4% in 2013 and rates increased more for females than males. Rates in 2013 were the highest in the North with 24.4% followed by the North West with 23.2% and 16.5% in the South.

Self-reported obese BMI, 65 years and over, Tasmania 2009 and 2013

Obese BMI	2009		2013		Significant
	%	95% CI	%	95% CI	
65+	16.7%	[14.7%,18.8%]	20.4%	[18.6%,22.2%]	N
18 years and over	20.4%	[19.2%,21.7%]	23.6%	[22.0%,25.2%]	Y

Tasmanian Population Health Surveys 2009 and 2013

For females aged 65 years and over, obesity rates increased from 17.3% in 2009 to 21.7% in 2013.

Self-reported obese BMI for females 65 years and over, Tasmania 2009 and 2013

Obese BMI	2009		2013		Significant
	%	95% CI	%	95% CI	
65+	17.3%	[14.7%,20.1%]	21.7%	[19.4%,24.1%]	N
18 years and over	19.9%	[18.4%,21.6%]	24.1%	[22.1%,26.1%]	Y

^Relative Standard Error > 25% but < 50% (small number) use with caution; Tasmanian Population Health Surveys, 2009 and 2013

Fruit and vegetables

Adequate fruit consumption has declined among most age groups since 2009, with statistically significant reductions in fruit consumption reported by Tasmanians aged 65 years and over.

Adequate fruit consumption*, 65 years and over, Tasmania 2009 and 2013

Adequate Fruit*	2009		2013		Significant
	%	95% CI	%	95% CI	
65+	55.1%	[52.4%,57.7%]	47.7%	[45.6%,49.9%]	Y
18 years and over	49.8%	[48.2%,51.4%]	44.2%	[42.4%,46.1%]	Y

*≥2 serves daily; Tasmanian Population Health Surveys 2009 and 2013

Compared to 2009, vegetable consumption decreased for most age groups, including Tasmanians aged 65 years and over.

Adequate vegetable consumption* by age, Tasmania 2009 and 2013

Adequate vegetal	2009		2013		Significant
	%	95% CI	%	95% CI	
Age					
65+	14.2%	[12.4%,16.2%]	11.7%	[10.4%,13.1%]	N
Total	10.9%	[10.1%,11.9%]	9.8%	[8.8%,10.8%]	N

* ≥5 serves daily; ^RSE =25%<-50% (small number) use with caution, Tasmanian Population Health Surveys 2009 and 2013`

Physical activity

The proportion of older Tasmanians reporting insufficient levels of physical activity has increased since 2009, from 42.1% to 43.4% in 2013, but this is not statistically significant.

Insufficient physical activity, 65 years and over, Tasmania 2009 and 2013

Insufficient Activity	2009		2013		Significant
	%	95% CI	%	95% CI	
65+	42.1%	[39.5%,44.8%]	43.4%	[41.3%,45.6%]	N
18 years and over	27.5%	[26.1%,28.9%]	31.0%	[29.3%,32.7%]	Y

Tasmanian Population Health Surveys 2009 and 2013

Chronic conditions

There has been an increase in the prevalence of all chronic conditions included in the TPHS, except for stroke. Statistically significant differences were found for cancer, from 7.8% in 2009 to 9.4% in 2013, arthritis up from 25% to 28.1%, heart disease from 6.9% to 8.5%, and depression/anxiety from 21.8% in 2009 to 25% in 2013.

For Tasmanians aged 65 years and over, the lifetime prevalence of most chronic conditions has increased since 2009, but stroke and asthma saw a small reduction. Changes in the lifetime prevalence of chronic conditions between 2009 and 2013 were not statistically significant.

Self-reported ever diagnosed chronic conditions, 65 years and over, Tasmania 2009 and 2013

Chronic conditions (<u>ever</u> diagnosed) age 65+	2009		2013		Significant
	%	95% CI	%	95% CI	
Asthma	17.5%	[15.5%,19.6%]	15.8%	[14.2%,17.4%]	N
Diabetes	13.9%	[12.2%,15.8%]	15.4%	[13.9%,17.0%]	N
Hypertension	57.5%	[54.9%,60.1%]	59.8%	[57.7%,61.9%]	N
Heart*	21.3%	[19.2%,23.6%]	22.1%	[20.4%,24.0%]	N
Stroke	9.6%	[8.1%,11.3%]	7.7%	[6.6%,8.9%]	N
Cancer	18.6%	[16.5%,20.8%]	20.5%	[18.8%,22.3%]	N
Arthritis	56.3%	[53.6%,58.9%]	59.1%	[57.0%,61.2%]	N
Osteoporosis	18.4%	[16.4%,20.5%]	19.0%	[17.5%,20.7%]	N
Depression/anxiety	16.9%	[15.0%,19.0%]	18.0%	[16.4%,19.7%]	N
Eye diseases**	40.8%	[38.2%,43.5%]	43.5%	[41.4%,45.7%]	N

*includes coronary heart disease, cardiomyopathy, ischaemic heart disease, heart failure, hypertensive heart disease, inflammatory heart disease, disease affecting heart valves; ** includes cataract, glaucoma, diabetic eye disease/diabetic retinopathy, macular degeneration

Tasmanian Population Health Surveys 2009 and 2013

Of those 65 years and older, males had statistically significantly higher rates than females for heart disease and diabetes. Females had statistically significantly higher rates of arthritis, depression/anxiety, osteoporosis, and eye diseases.

Chronic disease prevalence by sex, 65 years and over, Tasmania 2013

		%	95% CI
Asthma	Male	13.8%	[11.6%,16.4%]
	Female	17.5%	[15.5%,19.7%]
Diabetes	Male	18.0%	[15.6%,20.7%]
	Female	13.0%	[11.3%,15.0%]
Hypertension	Male	57.6%	[54.2%,61.0%]
	Female	61.8%	[59.1%,64.4%]
Heart disease*	Male	27.4%	[24.5%,30.5%]
	Female	17.5%	[15.5%,19.6%]
Stroke	Male	7.5%	[6.0%,9.3%]
	Female	7.9%	[6.5%,9.5%]
Cancer	Male	22.8%	[20.1%,25.8%]
	Female	18.5%	[16.4%,20.7%]
Arthritis	Male	51.0%	[47.5%,54.4%]
	Female	66.3%	[63.7%,68.9%]
Osteoporosis	Male	8.4%	[6.7%,10.5%]
	Female	28.4%	[26.0%,31.0%]
Depression/Anxiety	Male	14.3%	[12.1%,16.9%]
	Female	21.2%	[19.1%,23.5%]
Eye diseases**	Male	36.3%	[33.1%,39.6%]
	Female	49.9%	[47.1%,52.7%]

*includes coronary heart disease, cardiomyopathy, ischaemic heart disease, heart failure, hypertensive heart disease, inflammatory heart disease, disease affecting heart valves; ** includes cataract, glaucoma, diabetic eye disease/diabetic retinopathy, macular degeneration
Tasmanian Population Health Surveys 2009 and 2013

Social Integration, Participation, and Economic Security

The majority of Tasmanians aged 65 years and over can rely on assistance from friends, family and neighbours when needed. Responses were similar to those received in 2009, with neighbours less likely than family and friends to provide assistance when needed.

Sources of help when needed, population 65 years and over, Tasmania 2013

	No, not at all	Not often	Sometimes	Yes, definitely
Can you get help from friends when you need it?	4.9%	2.9%	13.1%	77.9%
Can you get help from family members when you need it?	8.0%	3.5%	10.1%	77.6%
Can you get help from neighbours when you need it?	12.0%	4.5%	13.8%	66.6%

Tasmanian Population Health Surveys 2013

Over 40% of older Tasmanians volunteer at least occasionally, and over 80% have access to community services, but less than half feel valued by society.

Measures of community integration, 65 years and over, Tasmania 2013

	No, not at all	Not often	Sometimes	Yes, definitely
Help out a local group as a volunteer	58.4%	3.3%	9.6%	28.4%
Have access to community services or resources	4.6%	1.8%	6.9%	83.6%
Do you feel valued by society?	11.7%	5.0%	25.1%	49.8%

Tasmanian Population Health Surveys 2013

About one in ten (10.7%) Tasmanians aged 65 years and over experiences financial insecurity by not being able to raise \$2,000 in an emergency, slightly more than in 2009 at 9.6%. Food insecurity was experienced by 1.3% of older persons, similar to 2009 with 1.5%.

Financial and food insecurity, 65 years and over, Tasmania 2013

	yes	no
Whether could raise \$2,000 within 2 days in an emergency	87.0%	10.7%
Any times that you ran out of food, and couldn't afford to buy more	1.3%	98.7%

Tasmanian Population Health Surveys 2013

The great majority of Tasmanians aged 65 years are retired (86.1%), with less than 10% remaining in the workforce, either as employed or self-employed.

Employment status, 65 years and over, Tasmania 2013

Employment status	%
Self employed	4.0%
Employed for wages, salary or payment in kind	4.8%
Retired	86.1%

Tasmanian Population Health Surveys 2013

Of those Tasmanians still employed, the majority (73.4%) reported to have 2 or less chronic conditions.

Number of chronic conditions by employment status, population 65 years and over, Tasmania 2013

	2 or less conditions	3 or more conditions
Employed (inc employed for wages and self-employed)	73.4%	26.6%
Home duties	53.6%	46.4%
Retired	55.3%	44.7%
Unable to work	39.7%	60.3%
Total 65+	56.4%	43.6%

Tasmanian Population Health Surveys 2013