

Victorian Population Health Survey 2017



AN OVERVIEW OF WYNDHAM'S SURVEY RESULTS

Wyndham overview

The Victorian Population Health Survey (VPHS) is a bi-annual survey conducted by the Victorian Department of Health and Human Services. An overview of the 2017 Wyndham results are presented below. A detailed analysis is provided from page 2 including a table and chart that summarise Wyndham's results and allows for comparisons with the Victorian population.

Wyndham had results significantly different¹ from the Victorian benchmark in the below areas:

- Lower rate of diagnosed cancers, with 4.1% of Wyndham respondents compared to 8.1% of all Victorians.
- Lower risk of alcohol harm from lifetime drinking and binge drinking: lifetime risk applies to 49.2% of Wyndham respondents compared with 59.5% of all Victorian respondents, and short-term risk from binge drinking to 33% of Wyndham respondents versus 43.3% of Victorian respondents.
- More people who are overweight or obese: 57.9% of Wyndham respondents are overweight compared with 50.8% of all Victorian respondents.
- Higher daily consumption of sugary drinks: 15.8% of Wyndham respondents consume these daily compared with 10.1% of all Victorian respondents.
- Higher levels of daily physical inactivity: 54.5% of Wyndham respondents engage in insufficient physical activity compared with 44.1% of all Victorian respondents.
- Lower daily consumption of fruit and vegetables: 36.6% of Wyndham respondents meet the daily fruit consumption guidelines compared with 43.2% of all Victorian respondents.

Other key results include:

- A higher proportion of people who are daily (15.4%) and current smokers (20.8%) in Wyndham compared to Victoria (14.7% and 16.7% respectively)
- Almost a quarter (23.9%) of Wyndham respondents reported low life satisfaction levels and more than a quarter have been diagnosed with anxiety and/or depression (25.9%)

Differences between 2014 and 2017 are minimal. The only significant differences between 2014 and 2017 are that the rate of people who complete and return the bowel cancer screening test has gone up (from 56.7% in 2014 to 72.7% in 2017), while the proportion of people who are satisfied or very satisfied with life has decreased (from 92.2% in 2014 to 74.5% in 2017).

¹ Statistical significance provides an indication of how likely it is that a result, such as the difference between two values, is due to chance. For example, if Wyndham's wellbeing score is higher than the Victorian estimate, but the difference is not statistically significant, it is possible that the difference is due to chance. Significant difference is indicated when confidence intervals for Wyndham estimates do not overlap with confidence intervals for the Victorian estimate. A confidence interval is a range of values that is expected to contain the true value of an estimate, to a 95% level of probability (in the VPHS). This means that if the same population is sampled 100 times, the expected population estimate will fall within the interval 95 times (95%) and outside the estimate five times (5%).

All VPHS 2017 results

Introduction

The Victorian Population Health Survey (VPHS) is a bi-annual survey conducted by the Victorian Department of Health and Human Services. Initially conducted in 1998, it has been replicated using an established methodology to track the health and wellbeing of Victorians across time. The importance of this survey is realised by many sectors where health and services planning is a core activity. Here at Wyndham City we use the results to inform how our residents are faring by comparing result across the Western Melbourne area and Victoria as a whole.

The information is collected using telephone interviews across a broad section of the Victorian population. A random sample of 34,000 people aged over 18 were interviewed and each of the 79 local government areas (LGA) are represented. The interviews are conducted in English and the major non-English languages to provide coverage of cultural and linguistically diverse communities.

The 2017 survey indicators are grouped into three main categories: modifiable risk factors, chronic disease, and screening tests and treatment.

Modifiable risk factors

Smoking and alcohol consumption

There are two measures of smoking collected, the proportion of daily smokers and the proportion of current smokers (includes daily and occasional smokers). Overall, there is a higher proportion of people who are daily (15.4%) and current smokers (20.8%) in Wyndham compared to Victoria (14.7% and 16.7% respectively). Smoking represents a significant risk to the development of long-term chronic conditions such as Chronic Obstructive Pulmonary Disease (COPD) and certain cancers. It is also a significant financial commitment, with a packet of cigarettes costing well over \$20.

The harm experienced from the consumption of alcohol can manifest in physiological injury to internal organs, though injury caused by trauma is more common - let alone harm caused to relationships and negative financial impacts. When looking at the lifetime risk of harm from alcohol, Wyndham's proportion is lower (49.2%), as is binge drinking (33.3%), than across Victoria (59.5% and 43.0% respectively). However, these proportions are still excessively high if you consider almost half of the Wyndham population is at harm from lifetime alcohol consumption and a third from binge drinking.

Healthy eating and sugar drinks

The consumption of a balanced diet low in fats and high in beneficial nutrients and fibre is essential to healthy bodily function and wellbeing. The proportion of Wyndham adults eating more than two pieces of fruit per day (36.6%) is less than the rest of Victoria (43.2%). Likewise, the consumption of five or more serves of vegetables per day is less common in Wyndham (4.2%) than Victoria (6.4%). Moreover, the benchmark is very low and the ideal proportion of people eating the necessary amount of fruit and vegetables should be much higher.

Another source of excess calories is via sugary drinks and take away food. Sugary drinks are often high in calories. In Wyndham, there are proportionally more people consuming sugary drinks (15.8%) compared to Victoria (10.15%). Conversely, there are less people eating take away food in Wyndham (14.3%) more than once per week than the Victoria average (15.3%).

Obesity and physical inactivity

More than half of Wyndham respondents are either overweight or obese (57.4%). As a proportion, this is significantly greater than the 50.8% of Victorians. Being overweight or obese is a significant risk factor other health conditions such as diabetes, heart disease, bone and joint disorders and stroke. It can also have dramatic effect on a person's wellbeing, with anxiety and depression being common amongst people who are overweight/obese.

Another risk factor that is often comorbid with being overweight or obese is lack of physical inactivity. Across Wyndham more than half (55.6%) of residents surveyed reported getting insufficient physical activity, which is higher than the Victorian rate (44.1%). A quarter of the people surveyed also reported sitting for more than 7 hours per day on an average weekday and weekend day, which is marginally less than the proportion of Victorians (26.6%). This reflects the current way of life for many people, who spend much of their work day in sedentary vocations.

Health status and life satisfaction

Wyndham residents (19.8%) have reported the same level of fair or poor health status as the rest of Victoria (20.3%). However, the proportion of Wyndham residents (36.6%) reporting their health as excellent to very good is lower than the rest of Victoria (41.6%). Perception of one's health can greatly influence how one lives their life. A more positive outlook can promote a healthier lifestyle.

Nearly three quarters of Wyndham residents have high to very high satisfaction with life, which is comparable to the rest of Victoria. Similarly, the proportion of people feeling low to medium satisfaction is similar in Wyndham (23.9%) as the rest of Victoria (20.5%).

Chronic disease

Mental health

Mental health covers the spectrum from mild to severe and acute to chronic. The Kessler scale of psychological distress is a 10-item survey (K10) used to gauge the level of distress a person feels at a point in time. Overall, the proportion of people in Wyndham with a high to very high level of distress (15.9%) is comparable to the rest of Victoria (15.4%).

Anxiety and depression are the two most common forms of mental health problems. Over a quarter of the population in Wyndham expressed they have experienced and been diagnosed with an anxiety depressive condition at least once in their life. This rate is slightly lower in Wyndham (25.9%) compared to Victoria (27.4%). When looking more generally at mental health problems, there is a higher proportion of females (19.8%) compared to males (14.8%) who have sought help from a professional in the previous year.

Physical health

The physical health conditions which are lower in Wyndham are arthritis (21.0%) asthma (15.6%), cancer (4.8%) and osteoporosis (3.1%) compared to Victoria (20.5%, 20.0%, 8.1% and 5.7% respectively).

Those conditions that are higher are Type 2 Diabetes (7.1%), heart disease (6.7%) and stroke (3.2%) compared to Victoria (5.5%, 6.7% and 2.4% respectively). These three conditions are linked to the lifestyle factors above (obesity, unhealthy eating and physical inactivity) and present a large burden of disease to the people with them and the health system as a whole. Despite that, the number of people with two or more diseases in Wyndham (23.5%) is lower than Victoria (25.5%).

Screening tests and treatment

Bowel cancer screening is consistently low across the country, and the trend is replicated in Wyndham with only 55.3% of people aged over 50 years completing the kit provided by the Federal government. This is, however, higher than the Victorian rate of 50.7%, which is a good result. The situation is different with mammograms, with a high proportion of women getting regularly screened. The outcome for Wyndham (82.5%) is higher than the Victorian rate (79.2%).

Almost a quarter of Wyndham respondents report their dental health as fair or poor (23% of residents), which is a slightly better result than in Victoria (24.4%), even though Wyndham residents are slightly more likely to avoid going to the dentist because of the cost (37.6%) than Victorians (33.9%).

Indicator results

The remainder of this profile presents a table and chart that summarise Wyndham's results and allows for comparisons with the Victorian estimate.

The summary table (Table 1) displays, for each indicator, the value for that indicator in Wyndham and in Victoria (as the proportion of the population).

The summary chart (Figure 1) displays four pieces of information for each indicator:

1. The range of scores across Victoria is indicated by the length of the grey bar. Note that the bars have been scaled to fit within the chart.
2. The dark red vertical line on the grey bar indicates where the Victorian estimate is located.
3. The position of the coloured circle indicates the location of Wyndham's value within the range of values for all 79 LGAs.
4. Whether the LGA value was significantly different to the Victorian estimate is shown by the colour of the circle. Where Wyndham is different from Victoria, and the difference is favourable (e.g. a lower cancer rate), the circle is green. If Wyndham is different from Victoria in a non-favourable way (e.g. a higher obesity rate), the circle is red.

Table 1: Summary of all VPHS 2017 indicators for Wyndham and Victoria

	Wyndham %	Victoria %
Smoking & alcohol consumption		
Current smokers	20.8	16.7
Daily smokers	15.4	14.7
Increased lifetime risk of alcohol-related harm	49.2	59.5
Increased risk of alcohol-related harm from a single occasion of drinking	33.3	43
Healthy eating		
Consumed sugar-sweetened beverages daily	15.8	10.1
Ate take-away meals or snacks	18	15.3
Did not meet dietary guidelines for either fruit or vegetable consumption	57.4	51.7
Met vegetable consumption guidelines only	3.9	5.4
Met fruit consumption guidelines only	36.6	43.2
Obesity & physical activity		
Pre-obese	32.8	31.5
Obese	25	19.3
Overweight (pre-obese or obese)	57.9	50.8
Sedentary lifestyle	2.5	2.5
Insufficient physical activity	55.6	44.1
Health status & life satisfaction		
Self-reported health status - Fair/poor	19.8	20.3
Satisfaction with life - Low or medium (0-6)	23.9	20.5
Life being worthwhile - Low or medium (0-6)	18.8	16.7
Mental health		
High/very high levels of psychological distress	15.9	15.4
Ever diagnosed with anxiety or depression	25.9	27.4
Sought help for a mental health related problem*	17.9	17.6
Physical conditions		
Arthritis*	21	20.5
Asthma*	15.6	20
Cancer*	4.8	8.1
Type 2 diabetes*	7.1	5.5
Heart disease*	6.5	6.7
Osteoporosis*	3.1	5.7
Stroke*	3.2	2.4
Doctor diagnosed hypertension*	28.1	25.4
Screening & treatment		
Blood pressure check in the last two years	77.1	79.6
Blood lipids check in the last two years	60.6	56.8
Blood glucose check in the last two years	54.4	50.7
Bowel cancer screening and detection - Completed and returned the NBCSP FOBT kit for testing	55.3	60.1
Had an examination to detect bowel cancer in the previous five years	49.6	46.8
Ever had a mammogram	90	88
Had a mammogram in the previous two years	82.5	79.2
Dental health		
Self-reported dental health status - Fair/poor	23	24.4
Avoided or delayed visiting a dental professional because of the cost	37.6	33.9

Note: indicators denoted with an asterisk are not age-standardised, meaning that differences between LGAs may be due, in part, to differing age profiles between LGAs.

Figure 1: Modifiable risk factors



Legend: Grey bar: range of results across all LGAs; dark red line: Victorian estimate; yellow dot: Wyndham value not significantly different from Victorian estimate; green dot: LGA value significantly more favourable than Victorian estimate; red dot: LGA value significantly less favourable than Victorian estimate