

THE STATE OF AUSTRALIA'S HEALTH

The average Australian adult is overweight, living in a capital city and not eating enough vegetables. But of course that doesn't paint the whole picture. Here are the findings of the latest report into the health of the nation – and what they mean for Australia's fitness professionals.

BY GEMMA CHILTON, WRITER

The current state of Australia's health might be called contradictory – that is, there's good news and there's bad. While most of us are benefiting from improved medical intervention and living longer, healthier lives as a result, chronic lifestyle-related conditions have taken the top spot as the leading cause of death – and a lack of physical activity is partly to blame.

Such was one of the key findings of the Australian Institute of Health and Welfare's (AIHW) 2014 report, *Australia's Health*. Published every two years under the government body's remit, the report provides a statistical overview and analysis of the health of Australia's population. Having an understanding of population demographics is important for fitness professionals as it can assist you to ➡



“A WHOPPING 92% OF US ARE NOT EATING THE RECOMMENDED DAILY INTAKE OF VEGETABLES.”

develop services that meet the needs of your local community, and help to ensure the sustainability and success of your business over the long term.

According to the AIHW report, chronic diseases – “generally associated with risk factors we can largely do something about” – accounted for 90% of all deaths in Australia in 2011. The associated risk factors include smoking, physical inactivity, poor nutrition and harmful consumption of alcohol – and they are contributing to increasingly prevalent health conditions such as obesity, high blood pressure and cholesterol. These in turn lead to the chronic diseases, including diabetes, cancer and cardiovascular disease.

While an ageing population is a contributing factor behind these findings (see ‘Growing old together’,

page 24), age alone doesn’t tell the whole story. According to the report, “70% of all cardiovascular disease mortality in Australia has been attributed to the combined effects of high blood pressure,

“THREE OUT OF FIVE AUSTRALIAN ADULTS ARE NOT MEETING THE RECOMMENDED MINIMUM OF 150 MINUTES OF MODERATE TO VIGOROUS ACTIVITY PER WEEK.

high cholesterol and physical inactivity”. The AIHW also reported that almost three out of five Australian adults are not meeting the recommended minimum of 150 minutes of moderate to vigorous activity per week, while a

whopping 92% of us are not eating the recommended daily intake of vegetables. Figures show a staggering 63% of Australian adults and a quarter of our children are also now overweight or obese.

THE SOCIAL GRADIENT OF HEALTH

While the AIHW report provides an overarching snapshot of Australia’s health, it also points to a number of other contributing factors – some of which we have more control over than others.

According to Professor Andrew Wilson, Director of the Menzies Centre for Health Policy at the University of Sydney, the report shows the health of Australians is improving by many measures – including longer life expectancy, fewer heart attacks and better cancer survival rates. “What stood

out for me was the difference between the richer and poorer parts of our society, between urban and rural populations and for Australian Aboriginal and Torres Strait Islanders,” he says.

For example, 66% of people living in the most disadvantaged areas were reported as not getting enough exercise, compared to 54% of those living in the wealthiest areas. Similarly, in 2010, the smoking rate in people aged 14 and over in the lowest socioeconomic areas was 25% – double that of their more socially advantaged counterparts. (See ‘Smoke signals’, page 25.)

ARE WE GETTING HEALTHIER?

When it comes to life expectancy, the outlook for most Australians is very good. Not only do we have ➡

Counting the costs

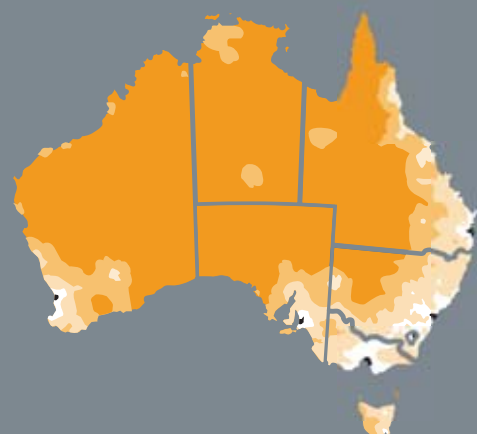
In 2011-12, health spending in Australia was estimated to be \$140.2 billion – 9.5% of the national GDP. Health expenditure is growing faster than the population, up from \$4276 per person in 2001-02, to \$6230 in 2011-12. This increase can be attributed to a number of factors, including an ageing population, the increasing prevalence of chronic diseases, higher patient expectations, new expensive medical technologies as well as broader economic trends.

The most costly disease reported by the AIHW was cardiovascular disease, which attracted \$7.7 billion in funds in 2008-09 – that is, 10.4% of total disease expenditure that year. However, the AIHW cautioned against reading too much into cost figures. “Disease expenditure information, while useful in its own right, does not necessarily give an indication of the loss of health due to that disease, the priority for intervention, or the need for additional expenditure,” the report stated.

Health snapshot

AUSTRALIA’S POPULATION
23 MILLION

of which... 
27% were **BORN OVERSEAS** and
3% are **OUR FIRST NATION PEOPLES**



KEY FOR MAP

-  Major cities
-  Inner regional
-  Outer regional
-  Remote
-  Very remote

Where we live

WE ARE CITY DWELLERS.

70%
of Australians live in
MAJOR CITIES (Australian
capital cities, excluding
Hobart and Darwin)

18%
in **INNER REGIONAL** areas
9%
in **OUTER REGIONAL** areas

1%
in **REMOTE AND
VERY REMOTE** areas



one of the longest life expectancies in the world, we are also living more years free of disability. At the same time, most of us feel healthy – the AIHW reported that 55.1% of Australians aged 15 and over considered themselves to be in ‘excellent’ or ‘very good’ health, 30.3% in ‘good’ health.

However, do these findings adequately address the question ‘are we getting healthier?’ As the AIHW highlights in the report, “assessing the health of Australians involves looking at multiple aspects of health, including both physical and mental health”. Almost half of all Australians will experience some sort of mental health condition in their lifetime. While mental health conditions are not a major cause of death, they do contribute to ill health and disability. With such a high rate of prevalence, this is an issue that Australia’s fitness professionals need to know more about. See ‘Exercise and mental health’.


Commenting on the AIHW report in an article published by *The Conversation*, Sharon Friel, a Professor of Health Equity at the Australian National University in Canberra, pointed out that

broad-brush statistics can be misleading. “Averages mask inequities,” she said. “It’s good to see the report shine a spotlight on the stubborn, and in some cases worsening, health inequities in Australia.”

For example, our First Nation Peoples still have significantly lower life expectancies and poorer health outcomes than the national average (see ‘Closing the gap’), as do Australians living in rural and remote areas and those with lower income and education levels. As previously mentioned, the burden of chronic, often lifestyle-related, diseases on the healthcare system

paints a less optimistic picture than other measures such as life expectancy might suggest.

Australia’s fitness professionals can play a significant role by helping their clients make better lifestyle choices and increase levels of physical activity. Developing services that meet the needs of disadvantaged groups in our society as well as older people (see ‘It’s never too late to start’) continues to be both a challenge and an opportunity for fitness providers.

“I am very optimistic about Australia’s future health, provided we take the gaps seriously,” says Professor Wilson. 



Ageing population

As a population, we are getting older.



3.3 million

The number of people aged 65 and over living in Australia in 2013 – three times the population of that age group in 1973. By comparison, the number of children and young people (aged under 25) rose by just 22% over the same period.

Fertility

The birth rate is increasing, while more women are choosing to start having children later in life.



1.9 The current birth rate (number of births per woman). This is up from 1.7 in 2001.



28 The average age of first-time mothers in 2010.

14.2%

The proportion of Australian women giving birth to their first child later in life (aged 35 or older) – up from 11.2% in 2002.

How long do we live?

We have one of the highest life expectancies in the world.



79.9 The age to which a baby boy born in Australia between 2010 and 2012 can expect to live.



84.3 The age to which a baby girl born in Australia between 2010 and 2012 can expect to live.

Closing the gap

The above figures are 10.6 years lower for Indigenous baby boys and 9.5 years lower for Indigenous baby girls.

What do we die of?

Top three causes...



Coronary Heart Disease
15% of all deaths.

Three-quarters of these deaths were in people aged 75 and over.



Stroke
8% of all deaths.

82% occurred in people aged 75 and over.



Dementia
(inc. Alzheimer’s disease)
7% of all deaths.

Twice as many women die from dementia.



By 2053 @ABSStats projects
Australians aged 65+ will
make up 21% of population.
#exerciseresearch #seniors

Growing old together

By 2053, the Australian Bureau of Statistics projects that Australians aged 65 and over will make up 21% of the total population – that's up from 14% today, and just 9% back in 1971. There is a clear trend towards an ageing population, and with that comes challenges to the health system as many common health conditions increase in prevalence with age – including chronic diseases, dementia and cancer.

However, as the report points out “health and social trends are changing the circumstances of our

older population, redefining what it means to be ‘old’. In other words, by aiming to improve the overall health and fitness of Australia’s older population – and therefore increasing their disability- and disease-free years – an ageing population doesn’t have to mean a disproportionate burden on the health system.

“Good health is itself a resource, enabling older people to contribute socially, culturally and economically to the community – and evidence suggests that many are,” the AIHW report states.

Common health conditions

Most of us could eat healthier diets, and almost 3 in 5 Australians are not getting enough exercise.

92%

The proportion of Australian adults who are not eating enough vegetables for optimum nutrition.



57%

The proportion of Australians who fail to meet the recommended minimum of 150 minutes per week of moderate or vigorous physical activity.



Most of us are overweight or obese.

63%

of Australian adults are either overweight or obese (up from 56% in 1995).



25%

of Australian children (aged 2-17) are overweight or obese.



As a result, type 2 diabetes is becoming an increasingly common health condition.

1 million

The number of Australians who have diabetes (85% of those have type 2 diabetes).



49,800

The number of new cases of diagnosed type 2 diabetes (2011-12).



Almost half of us will experience a mental health condition.

45% of Australians aged 16-85 will experience a common mental health condition, such as depression, anxiety or substance abuse disorder in their lifetime.



11%

of Australians aged 16-85 have both a mental and physical disorder (called ‘comorbidity’). Most represented in this group are socially disadvantaged women aged in their early 40s.



Leading causes of health inequalities

You are likely to have poorer health prospects than the national average if you are:

An Aboriginal or Torres Strait Islander
3% of all Australians.



Living in a rural or remote area
1% of all Australians.



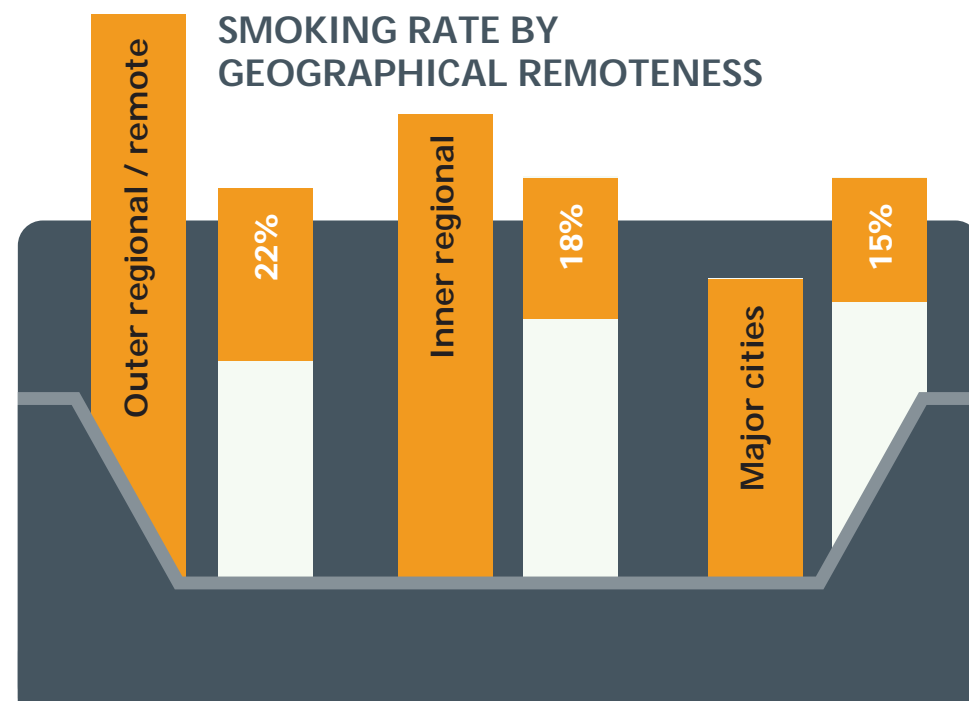
Living with a disability
20% of all Australians.



From a low socioeconomic status group
Lower income and education.



It has been suggested that socioeconomic factors have the largest impact on health – called the “social gradient of health”. The social gradient in health refers to the relationship between socioeconomic status and the quality of a person’s health. What this means is that the poorest people across the globe statistically have the worst health. According to the World Health Organization, this is a global phenomenon, seen in low-, middle- and high-income countries.



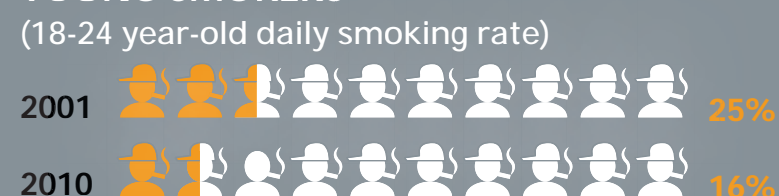
NATIONAL AVERAGE SMOKING RATE (Adult daily smokers)



SOCIAL GRADIENT OF SMOKING RATE

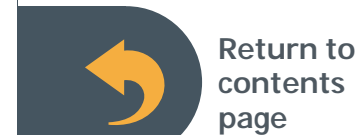
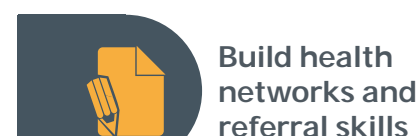


YOUNG SMOKERS (18-24 year-old daily smoking rate)



SMOKE SIGNALS

Australians have one of the lowest smoking rates in the world, and it's getting lower. There are, however, inequities that still need to be addressed.



INSPIRING GREATNESS

10 TO 12 APRIL 2015

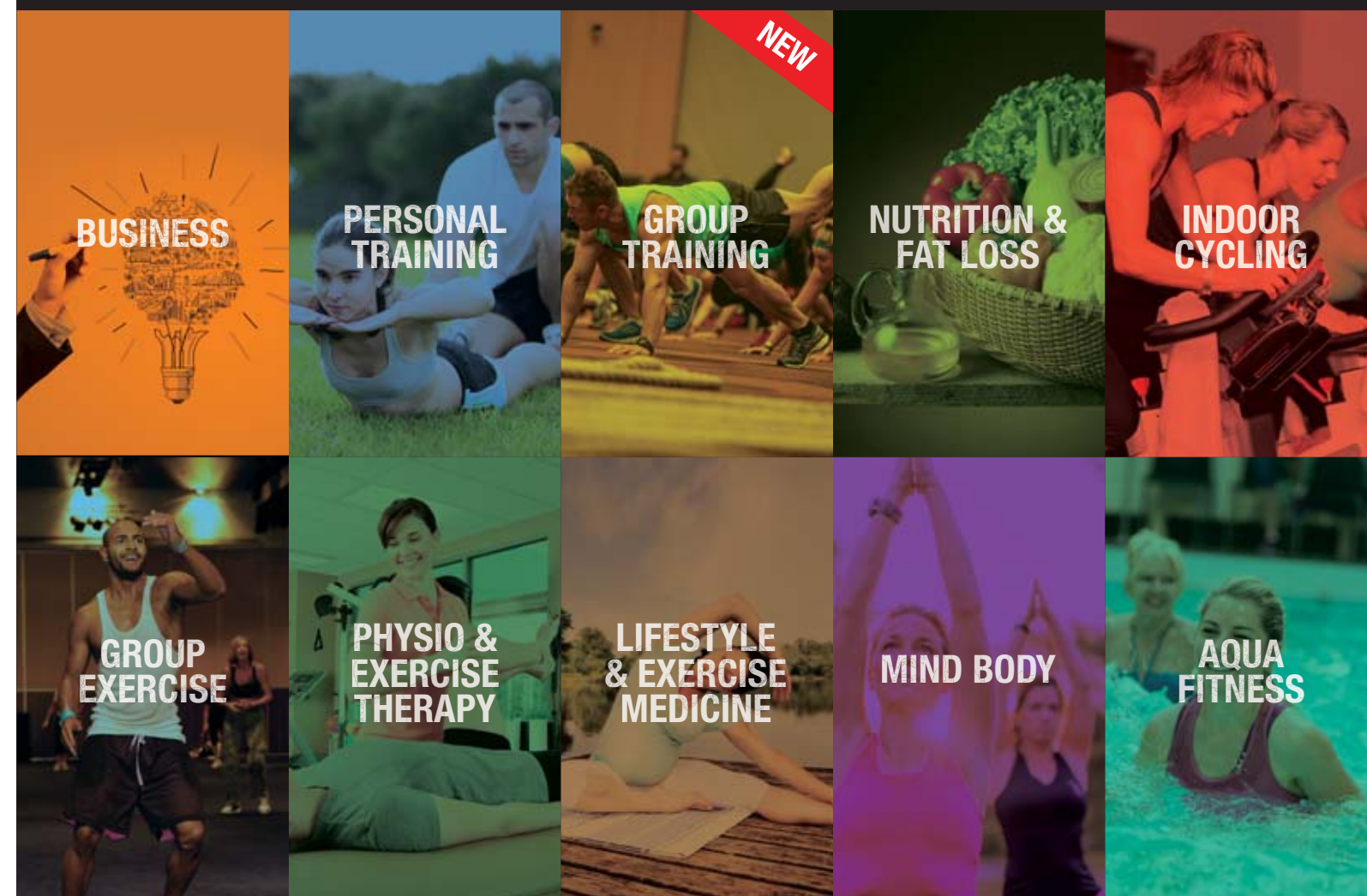
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