

Conclusion

The New South Wales Population Health Survey began as a continuous survey in 2002, following adult health surveys in 1997 and 1998, and an older people's survey in 1999. Most indicators are collected and reported annually but some are collected and reported biennially and triennially. Data are collected on demographics, health behaviours, health status, use of and satisfaction with health services, and social capital. Some of these indicators are highlighted below for people aged 65 years and over.

Trends in health behaviours

Health behaviours influence health and wellbeing. There have been significant changes in some indicators of health behaviour, while other indicators have not changed significantly.

There have been increases in bowel cancer screening (faecal occult blood test), influenza immunisation, pneumococcal immunisation, smoke alarms in the home, adequate fruit consumption, adequate vegetable consumption, smoke-free households, and smoke-free cars.

There have been decreases in risk alcohol drinking, and current smoking.

There have been no changes in consumption of low fat milks, consumption of potato crisps or salty snacks, consumption of cereals or breads or pasta or rice or noodles, and consumption of processed meat products.

Trends in health status

Monitoring the health status of a population helps detect emerging patterns of illness and disease and provides information to inform health policy and planning of health services. There have been significant changes in some indicators of health status, while other indicators have not changed significantly.

There have been increases in high blood pressure, cholesterol measured in the last 2 years, high cholesterol, diabetes or high blood glucose, ever had hearing tested, and eyesight tested in the last 2 years.

There have been decreases in all natural teeth missing.

There have been no changes in positive self-rated health, ever had asthma, current asthma, blood pressure measured in the last 2 years, urinary incontinence, falls in the last 12 months, falls requiring medical treatment, falls requiring hospitalisation, psychological distress, and visits to a dental professional in the last 12 months.

Trends in health services

Information about the use of health services assists in formulating health policy and health service planning. There have been significant changes in some health service indicators, while other indicators have not changed significantly.

There have been increases in private health insurance, difficulties getting health care, emergency department presentations, and use of community health centres.

There have been no changes in rating of emergency department care, hospital admissions, rating of hospital care, visits to a general practitioner in the last 2 weeks, visits to a general practitioner in the last 12 months, and use of public dental services.

Trends in social capital

Social capital is created from the everyday interactions between people. It is called capital because it can be measured and quantified in a way that can distribute its benefits and avoid its losses. There have been significant changes in some indicators of social capital, while other indicators have not changed significantly.

There have been increases in people who attended a community event in the last 6 months, who felt most people can be trusted, who felt safe walking down their street after dark, and who said their area had a reputation for being safe.

There have been no changes in people who helped out at a local group or organisation in the last 3 months, who were active members of a local organisation or church or club, who visited neighbours in the last week, who ran into friends and acquaintances while shopping locally, and who would feel sad if they had to leave their neighbourhood.

The future

The collection and reporting plan for the New South Wales Population Health Survey to 2012 can be found at www.health.nsw.gov.au/public-health/survey/hsurvey.html. The continued monitoring of indicators via the Survey will provide information to assist health professionals, health service planners and those involved in development of health policy for persons aged 65 years and over.