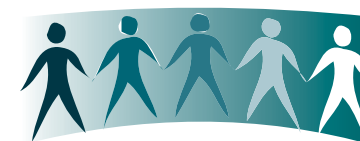


Collection plan to 2012

Modular Topic	Previously Collected	Age Groups	2006	2007	2008	2009	2010	2011	2012
Alcohol (Frequency and Consumption)	1997-1998, 2002-2005	16 plus							
Area Health Service Questions	1997-1998, 2002-2005	Various							
Asthma 1 (Prevalence and Service Use)	1997-1998, 2002-2005	2 plus							
Asthma 2 (Medications and Severity)	1997-1998, 1999, 2001, 2003	2 plus							
Breastfeeding	2001, 2003-2005	0-23 months							
Cancer Screening 1 (Breast and Cervical)	1997-1999, 2002, 2004	20-69 years							
Cancer Screening 2 (Prostate and Bowel)	1997, 1998, 2004	50 plus							
Cardiovascular Disease (Blood Pressure and Cholesterol)	1997-1998, 2002, 2005	16 plus							
Childcare, School Attendance and Reading to Child	1997-1998, 2002-2005	0-15 years							
Childhood Personal Health Record	2001, 2004	0-15 years							
Demographics 1 (Respondent)	1997-1998, 1999, 2001-2005	All							
Demographics 2 (Child Proxy)	2001-2005	0-15 years							
Diabetes 1 (Prevalence and Management)	1997-1998, 2002-2005	16 plus							
Diabetes 2 (Complications Screening)	1997-1998, 1999, 2004	16 plus							
Emergent Issues	2002-2005	Various							
Environmental Risks	2001, 2003-2005	Various							
Environmental Tobacco Smoke	1997-1998, 1999, 2001-2005	All							
Folate and Pregnancy	2001, 2003-2005	0-23 months							
Food Handling	2003	16 plus							
Food Security	1999, 2001-2005	All							
Family Functioning and Parental Support	2001, 2003-2005	0-15 years							
Health Services Access, Use and Satisfaction	1997-1998, 1999, 2001-2005	All							
Healthy Environments	2003-2005	Various							
Height and Weight (BMI)	1997-1998, 2002-2005	16 plus							
Hysterectomy Rate	1997-1998, 2002, 2004	20-69 years							
Incontinence	1999, 2003	40 plus							
Immunisation 1 (Influenza and Pneumococcal)	1997-1998, 1999, 2002-2005	50 plus							
Immunisation 2 (Access-Attitudes to Child Immunisation)	2001, 2004	0-15 years							
Injury 1 (Adult and/or Child Injury and Prevention)	1997-1998, 2002-2005	Various							
Injury 2 (Falls in Older People)	1999, 2003	60 plus							
Chronic Health Conditions		16 plus							
Mental Health 1 (Adult Psychological Distress)	1997-1998, 1999, 2002-2005	16 plus							
Mental Health 2 (Childhood Strengths and Difficulties)	2001, 2003-2005	5-15 years							
Nutrition 1 (Adult Dietary Guidelines)	1997-1998, 1999, 2002-2005	16 plus							
Nutrition 2 (Child Dietary Guidelines)	2001, 2003-2005	0-15 years							
Oral Health	1998, 1999, 2001-2005	All							
Physical Activity 1 (Leisure Time)	1997-1998, 1999, 2002-2005	16 plus							
Physical Activity 2 (Household Chores and Gardening)	1998, 1999, 2002, 2005	16 plus							
Physical Activity 3 (Child Activity and Inactivity)	2001, 2005	0-15 years							
Self Rated Health Status and Disability	1997-1998, 1999, 2001-2005	All							
Sexual Health Risk Behaviours	2004	16 plus							
Sight, Hearing and Speech	1999, 2001, 2004	All							
Smoking 1 (Prevalence)	1997-1998, 1999, 2002-2005	16 plus							
Smoking 2 (During Pregnancy)	2001, 2003-2005	0-23 months							
Smoking 3 (Policy)	1997, 2002-2005	Various							
Social Capital (Safety, Trust, Reciprocity and Participation)	1999, 2001-2003, 2005	All							
Summer Sun Protection	1997-1998, 2001, 2004	All							

New South Wales Population Health Survey



New South Wales Population Health Survey

The New South Wales Population Health Survey is an ongoing telephone survey of state residents that is one of the main mechanisms through which NSW Health monitors population health and reports on performance indicators. Its objectives are to:

- monitor changes over time in self-reported health behaviours, health status, health service use, satisfaction with health services, and other factors that influence health;
- support the planning, implementation, and evaluation of health services;
- collect health information that is not available from other sources;
- respond quickly to emerging needs for health information;
- promote health research.

History

In the early 1990s, a growing need for data to support state, area and local level population health efforts—coincident with the emergence of telephone surveys as a robust and cost-effective method—motivated the introduction of several telephone health surveys in New South Wales.

In 1994, the NSW Department of Health conducted the New South Wales Health Promotion Survey, the largest telephone health survey conducted in Australia to that time, with a sample designed to provide comparable estimates for each of the state's area health services. Between 1997 and 2001, the following surveys were conducted:

- 1997 Adult Health Survey
- 1998 Adult Health Survey
- 1999 Older People's Health Survey
- 2001 Child Health Survey.

In January 2002, the New South Wales Population Health Survey commenced.

Description

The New South Wales Population Health Survey is conducted continuously between February and December each year and covers the whole state population from birth upwards. The target population is all state residents living in households with private telephones. The target sample is approximately 1,500 people in each area health service (a total sample of 12,000).

Households are contacted using list assisted random digit dialling. Up to seven calls are made to establish initial contact

with a household and up to five calls are made to contact a selected respondent. One person from the household is randomly selected for inclusion in the survey. Carers or parents of children aged 0–15 years are interviewed on their behalf.

Respondents are asked questions from modules on demographics, health behaviours, health status, and access to and satisfaction with health services. Additional question modules are added periodically and are reported less frequently. The survey data collection plan is shown on the back of this brochure.

Trained telephone interviewers carry out the interviews. Most interviews are conducted in English but the survey is also conducted in five other languages: Arabic, Chinese, Greek, Italian and Vietnamese.

The sample is weighted to adjust for differences in the probabilities of selection among subjects, and for differences between the age and sex structure of the sample and Australian Bureau of Statistics mid-year population estimates for New South Wales. This enables calculation of prevalence estimates for the state population rather than for the respondents selected.

Reporting

The survey reporting plan includes:

- an annual report on adult health for the whole state;
- a monthly report on adult health for the whole state;
- an annual report on adult health for each health area;
- a biennial report on child health for the whole state;
- a triennial report on adult health for each division of general practice;
- occasional reports on the health of older people, indigenous people, people from culturally and linguistically diverse backgrounds, and other specific populations.

Survey reports, which contain an analysis of the collected data, can be downloaded from www.health.nsw.gov.au.

Quality

All survey components are developed and conducted within the Centre for Epidemiology and Research by staff experienced in questionnaire development, sample generation, data collection, data management, data analysis, and reporting.

The survey uses an in-house computer assisted telephone interviewing (CATI) facility. Telephone interviewers are trained to collect health survey data. In-house interviewing allows effective management of data collection and administration, giving NSW Health the flexibility to respond to urgent information needs relating to population health: for

example, outbreaks of communicable disease and exposures to environmental hazards.

Adding question modules

In order to meet state, area and local priorities, new question modules may be required for specific health issues or disease topics. Development of area-specific or agency-specific modules is the responsibility of the area health service or agency proposing the module in consultation with staff of the NSW Health Survey Program.

A rationale is required of the area health service or agency proposing each new module. This rationale should include: contact details, issue or topic area, proposed frequency of data collection, target population, information needs and uses, links with state and national priorities, and analysis and reporting requirements. Further information on how to add question modules is available from www.health.nsw.gov.au.

A lead time of at least three months is required for the inclusion of question modules, to allow sufficient time for development, submission for ethics approval, CATI programming, field-testing, and piloting.

A shorter lead time is possible when responding to urgent information needs relating to population health: for example, outbreaks of communicable disease and exposures to environmental hazards.

Accessing datasets

Survey datasets are available for further analyses. The NSW Department of Health encourages as many people as possible to access these datasets through the Health Outcomes Information Statistical Toolkit (HOIST). For users who do not have access to HOIST, datasets are available through specific requests to the Chief Health Officer. Any publication that reports survey data must be approved by the Chief Health Officer prior to publication.

Other publications and reports

Several other publications and reports have been produced on survey methods, sample weighting, data quality, the development and uses of the survey, and other surveys. Copies of these can be downloaded from www.health.nsw.gov.

Contact us

If you have any comments, queries or requests contact us by phone (02) 9424 5700, fax (02) 9424 5755, or email catiadmin@doh.health.nsw.gov.au.