

A HEALTH BEHAVIOUR OVERVIEW – an example from HEALTHeRESOURCE

TOBACCO SMOKING ACROSS THE HUNTER NEW ENGLAND (HNE) HEALTH REGION

Across Australia, tobacco smoking is thought to account for around 15,500 deaths per year and represents an estimated cost of \$31.5 billion per annum to the public health system. Tobacco smoking is the single largest preventable cause of premature death and morbidity in Australia (Dept of Health and Ageing). Tobacco smoking is associated with an increasing risk of lung cancer, cardiovascular disease, numerous cancers of the stomach, oesophagus, mouth and kidney and other conditions including respiratory effects across the life course, foetal death and low bone density (NSW Health).

Population Health Surveillance investigating the prevalence of tobacco smoking in NSW residents aged 16 to 75 is largely limited to the results of the NSW Population Health Survey. This Survey defines tobacco smoking as people who report either smoking tobacco daily or occasionally. This Health Behaviour Overview presents data from the Survey for the HNE health region and NSW between 1997 and 2008. Given the small number of residents surveyed, not all differences between population subgroups could be considered significant.

CURRENT TOBACCO SMOKING

Overall prevalence

Consistent with NSW, the HNE health region has observed a reduction (22%) in the reported rate of tobacco smoking between 1997 (25.5%; CI 23.3-27.6) and 2008 (19.9%; CI 16.7-23.2) [graph 1]. Despite this reduction, a slightly higher

proportion of residents across the HNE health region (19.9%; CI 16.7-23.2) in 2008 reported tobacco smoking when compared to their NSW counterparts (18.4%; CI 17.2-19.7) [graph 2].

Gender breakdown

In 2008, HNE health region (21%; CI 15.9-26.1) and NSW (19.7%; CI 17.8-21.6) males reported greater rates of tobacco smoking when compared to their female counterparts (18.8%; CI 14.7-22.9; 17.2% CI 15.7-18.7, respectively) [graph 1]. In contrast to this general trend, a high rate of tobacco smoking was observed across HNE health region females (32.3%; CI 19.6-45.0) aged 35-44 years, when compared to both NSW females (20.7%; CI 17.1-24.3), and to males of the same age across the HNE health region (23.5%; CI 11.9-35.1) (HealthResource; 2008).

Age breakdown

Consistent with NSW (26.5%; CI 22.4-30.6) trends, 25-34 year olds (28.9%; CI 17.8-40.1) residing in the HNE health region reported the highest rate of tobacco smoking in 2008, followed by 35-44 year olds (28%; CI 19.3-36.7) [graph 2].

CONCLUSION

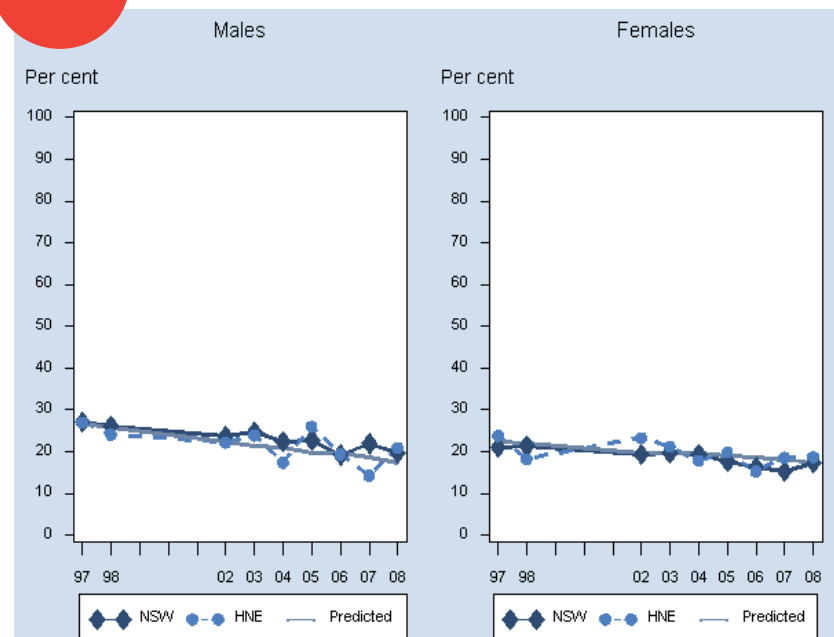
There has been a steady reduction in the reported prevalence of tobacco smoking across the HNE health region and NSW, between 1997 and 2008. Despite this downward trend, nearly 1 in 5 (19.9%) residents across the HNE health region continued to smoke tobacco in 2008. Residents aged 25-44 years and males were more likely to smoke tobacco. The data presented here may be useful for informing the development of Population Health projects which aim to reduce the prevalence of tobacco smoking across the HNE health region.

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Graph 1.

Hunter & New England, current smoking by age, persons aged 16 years and over, NSW, 1997-2008



Graph 2.

Hunter & New England, current smoking by age, persons aged 16 years and over, NSW, 2008

