

Women and Girls in Tasmania – Fact Sheet 3

HEALTH AND WELLBEING

Good health and wellbeing positively impacts the lives of women and girls in many ways, enhancing quality of life, education, and the ability to participate socially and economically in the community.

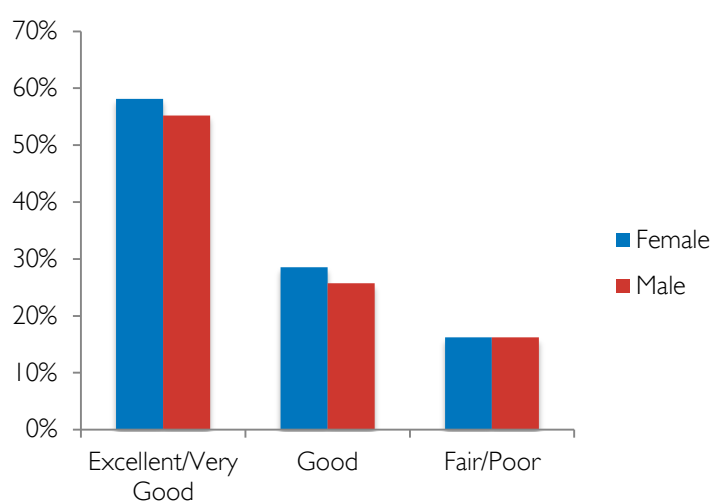


Self-assessed health status

In 2014, the General Social Survey revealed that, overall, women and men in Tasmania had similar rates in the self-assessed health status categories of 'excellent or very good', 'good' and 'fair or poor' health.

Figure 1 shows that a slightly higher percentage of women rated their personal health to be 'excellent to very good' (**58.1 per cent**), than men, (**55.2 per cent**). Men were slightly less likely to rate their personal health as 'good' (**25.7 per cent**) than women (**28.5 per cent**). Women and men were equally likely to report 'fair or poor' personal health, with both genders sitting at **16.2 per cent**.

Figure 1. Self-assessed health status by sex, Tasmania (by percentage), 2014



Data source: Australian Bureau of Statistics, 2015 *General Social Survey Tasmania*, Cat No 4159.0, Table 1.1, Persons aged 18 years and over, selected personal characteristics by sex, 2006-2010 and 2014, ABS, Canberra.

Mental Health

From 2007 to 2008 there were an estimated **54 000** people in Tasmania who identified as having mental health and behavioural disorders. Of these, **30 400 (56.3 per cent)** were female.

In the 'mood affective disorder' category, including all types of depression such as post-natal depression and bipolar disorder, there were **35 500** persons. Of these, **21 500 (60.6 per cent)** were female.

Of the **19 500** persons who experienced 'anxiety related disorders', including generalised anxiety disorders as well as post-traumatic stress and panic attacks, **12 000 (61.5 per cent)** were female.¹

¹ Australian Bureau of Statistics, 2011 *National Health Survey: Summary of Results; State Tables (Tasmania)*, 2007-2008, Cat No. 4362.0, Table 3.1, ABS, Canberra.

Disability

In 2011 there were **28 726** persons with profound or severe disability in Tasmania, defined as in need of assistance for core activities of self-care, mobility or communication. Of these, **15 323 (53.3 per cent)** were female.²

Table 1 shows that the sex ratio for those with disability varied with age. Between the ages of 0 and 24 years there are notably fewer females than males with profound or severe disability. The gender balance was roughly equal between the ages of 25 and 64 years, but from 65 years onwards the proportion of females with profound or severe disability progressively increased.

Table 1. Core activity need for assistance by age and sex, Tasmania, 2011

Age (years)	Female	Male	% Female
0-14	695	1 423	32.8
15-24	493	762	39.3
25-44	1 578	1 556	50.4
45-64	3 819	4 055	48.5
65-84	5 096	4 202	54.8
85+	3 642	1 405	72.2

Data source: Australian Bureau of Statistics, 2011 *Census of Population and Housing Basic Community Profile Tasmania*, Cat No 2001.6, Table B 18, Canberra.

The next release of Census data will yield more up-to-date whole of population data on people with disability in Tasmania. Tasmania's participation in the National Disability Insurance Scheme (NDIS) can provide some more recent data on the Tasmanian NDIS trial cohort (15 to 24 year olds). As at December 2015, 36 per cent (or 383) of Tasmania's 1 065 participants in the Tasmanian NDIS Trial were female (64 per cent were male, which is partly due to the higher prevalence of some disabling conditions such as autism and intellectual disability in males). This reflects the 2011 figures outlined above, allowing for changes in the last five years and differing definitions and eligibility criteria between census collection and the NDIS.

² Australian Bureau of Statistics, 2011 *Census of Population and Housing, Basic Community Profile (Tasmania)*, Cat No 2001.6, Table B18, ABS, Canberra.

Causes of death

In 2013 there were **4 444** deaths in Tasmania, **49.2 per cent** of these were women.

The primary cause of death for Tasmanian women and men in 2013 was due to neoplasms, or cancer, with **602** female deaths and **717** male deaths. Cancers of the digestive organs were the largest cause of deaths in this category. The second largest cause of death in that period was due to diseases of the circulatory system, which resulted in **655** male and **672** female deaths. Women in Tasmania were more likely than men to die from mental and behavioural disorders.

Table 2. Causes of death by sex, Tasmania, 2013

All causes of death	Females (#)	Males (#)
1. Neoplasms	602	717
2. Diseases of the circulatory system	672	655
2.1 Ischaemic heart diseases	242	334
3. Diseases of the respiratory system	164	198
4. Mental and behavioural disorders	169	102
5. Endocrine, nutritional and metabolic diseases	111	108
6. External causes of morbidity and mortality*	102	183

Data source: Australian Bureau of Statistics, 2015 *Causes of Death, Australia, 2013*, Cat No 3303.0, Table 7.1, ABS, Canberra.

* Deaths due to causes external to the body (for example suicide, transport accidents, falls, poisoning etc).

Tobacco, alcohol and illicit substances

Tobacco

Between 2014 and 2015, Tasmania had a daily smoking rate of **17.9 per cent**; which was higher than the national average of **14.5 per cent**.³

In Tasmania in 2013, the daily smoking rate for females over 14 years of age was **13 per cent**, compared to **19.2 per cent** for men.⁴ This has reduced from the 2011-2012 period when the daily smoking rate for females was **16.2 per cent**.

In 2012, Tasmania had the second highest proportion of women who smoked during their pregnancy, after the Northern Territory.

In 2013, maternal smoking continued to be more prevalent among younger women, particularly those aged less than 20 years).⁵



³ Australian Bureau of Statistics, 2015 *National Health Survey: First Results 2014-15*, Cat No 4364.0.55.001, Tables 2.3, ABS, Canberra.

⁴ Australian Institute of Health and Welfare, 2013 *National Drug Strategy Household Survey 2013*, Cat. No PHE 183, Online Tables, Online State and Territory tables, Table 7.1.

Alcohol

According to the National Drug Strategy Household Survey 2013, **31.8 per cent** of women residing in Tasmania aged 15 years and over consumed alcohol in the week prior to completing the survey. This was **14.3 per cent** less than the proportion of Tasmanian men who did so (**46.1 per cent**), and slightly above the national average for women (**31.5 per cent**).⁶

Women in Tasmania were statistically less likely than men to consume alcohol excessively, defined as “consumption exceeding levels associated with long-term harm to health”, according to the National Health Medical Research Council (NHMRC) 2009 guidelines. More than three times as many men in Tasmania exceeded lifetime risk levels from alcohol consumption (**34 per cent**) than women (**9.8 per cent**).⁷

Cannabis

In 2013, men in Tasmania were more likely than women to have used Cannabis in the last 12 months. Tasmanian use of Cannabis was higher than the national average.

Table 3. Cannabis use by sex in the last 12 months, 2013

Sex	Tasmania	Australia
Female	9.4%	7.6%
Male	14.3%	12.8%

Source: Australian Institute of Health and Welfare, *National Drug Strategy Household Survey 2013*, Cat. No. PHE 183, Online Tables, Online State and Territory tables, Table s7.10.

Other drugs

Of those Tasmanians aged 12 years or more who had used an illicit substance in the previous 12 months, females (**12.9 per cent**) had lower rates of use than males (**17.5 per cent**).⁸

⁵ Department of Health and Human Services, 2015 (*Information Sheet: Smoking and Pregnancy in Tasmania 2013* citing the Australian Institute of Health and Welfare, National Perinatal Statistics Unit, Australia's Mothers and Babies and the Council of Obstetric and Paediatric Mortality and Morbidity Annual Report.

⁶ Australian Institute of Health and Welfare, 2013 *National Drug Strategy Household Survey 2013*, Cat. No. PHE 183, Online Tables, Online State and Territory tables, Table 7.4.

⁷ Australian Bureau of Statistics, *Australian Health Survey: First Results*, Cat No 4364.0.55.001, Table 8.3 (Australia) and Tables 1-17 Tasmania (Table 8.3), ABS, Canberra.

⁸ Australian Institute of Health and Welfare, 2013 *National Drug Strategy Household Survey 2013*, Cat. No. PHE 183, Online Tables, Online State and Territory tables, Table 7.10.

Sexually Transmitted Infections (STIs)

Chlamydia

Chlamydia accounted for **96.9 per cent** of all sexually transmissible infection disease notifications in Tasmania from 2007-2011. Significantly more females (**400.6 per 100 000**) were identified with chlamydia than males (**221.9 per 100 000**)⁹ in that period. There are higher notification rates for females because they are more likely to be screened when presenting to **primary health care providers**.

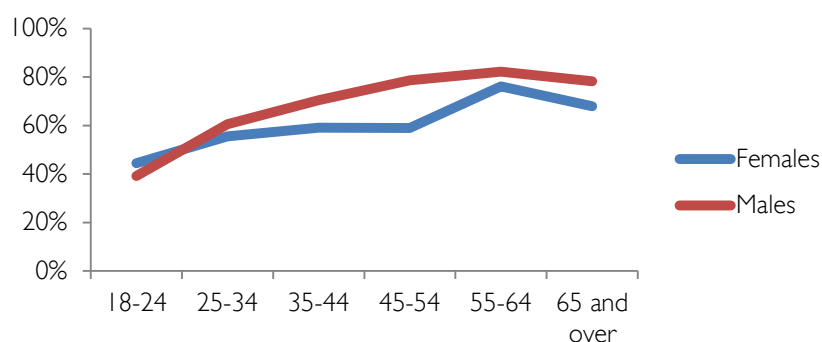
Weight

In the period 2011 to 2012, **61.5 per cent** of all women in Tasmania (over the age of 18) were overweight or obese, compared to **69.8 per cent** of adult men. Women were less likely to be overweight or obese than men at all ages other than between 18 and 24.¹⁰

The number of women in Tasmania who were overweight or obese generally increased with age. However, in the 65 and over age group, the percentage of overweight or obese women decreased.



Figure 3. Tasmanian females with a BMI classification of overweight or obese compared to males by age from 2011 to 2012



Source: Australian Bureau of Statistics, 2012 *Australian Health Survey: First Results*, Cat No 4364.0.55.001, Table 6.3 (Tasmania), October 2012, Canberra.

⁹ Department of Health and Human Services, 2013 *Health Indicators Tasmania*, Population Health Epidemiology Unit.

¹⁰ Australian Bureau of Statistics, 2012 *Australian Health Survey: First Results*, Cat No 4364.0.55.001, Table 6.3 (Tasmania), October 2012, ABS, Canberra.

Sport and Physical Recreation

In the period from 2013 to 2014 there were **276 600** participants in sports and physical recreation in Tasmania. Of these **136 500 (49.4 per cent)** were female.¹¹

Table 4. Tasmanian participation in sport and physical recreation by frequency and sex, 2011-12

Frequency of Participation	% Females	% Males	% Total
None	30.9	31.0	31.0
Up to once per week	13.9	21.3	17.5
One to two times per week	26.1	23.7	24.9
Three to four times per week	11.7	10.1	10.9
Five or more times per week	17.1	13.9	15.5

Data source: Australian Government, Australian Sports Commission, *Participation in Sport and Physical Recreation, Australia 2011-12*, Table 118, 2013, Canberra.

In summary

- Tasmania had a higher percentage of women with profound or severe disability.
- Tasmanian women were less likely than males to smoke daily, and were less likely to consume alcohol at levels risking their health.
- Tasmania had the second highest proportion in the nation of women who smoked during their pregnancy.
- Tasmanian women were less likely than men to be overweight.
- In the period from 2013 to 2014 there were **276 600** participants in sports and physical recreation in Tasmania. Of these, **49.4 per cent** were female; and women participate more regularly in exercise.

¹¹ Australian Bureau of Statistics, 2015, *Participation in Sport and Active Recreation 2013-14*, Cat No 4177.0, February 2015, Table 1, ABS, Canberra.

Special thanks goes to the Gender Policy and Strategy Group at the University of Tasmania who provided input into the development of the Fact Sheet series.

Phone: (03) 6232 7133

Email: csr@dpac.tas.gov.au

Webpage: www.dpac.tas.gov.au/divisions/csr

Communities, Sport and Recreation,
Department of Premier and Cabinet,
Tasmanian Government

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