



# Patterns of smoking and alcohol consumption across Victoria

2003

Department of Human Services

## Victorian Population Health Survey

The Victorian Population Health Survey is an annual statewide survey that the Department of Human Services (Health Surveillance and Evaluation Section, Public Health Group) undertakes in the second half of each calendar year to collect a wide range of information on the health and lifestyle of the adult Victorian population (aged 18 years or over).

The 2003 survey followed a method established over several years to collect relevant, timely and valid information for policy makers, planners and decision makers.

This fact sheet complements the fact sheets for each of the departmental regions by summarising major findings from the Victorian Population Health Survey 2003 that relate to smoking and alcohol consumption across the regions. The results reported represent a snap-shot for one year (2003).

## Comparisons across regions

The power of the survey to detect significant differences across the regions is limited by the sample size at the regional level. Prevalence rates are reported with 95 per cent confidence intervals to indicate the role of sampling error. The value of the survey data reported at statewide and regional levels will increase over time as it becomes possible to comment on trends in selected survey estimates.

## Sample stratification

Five rural and three metropolitan departmental regions cover Victoria. The 2003 survey sample included a total of 7500 households and was stratified by departmental region. Table 1 gives a breakdown of the number of respondents interviewed by region.

Table 1: Victorian Population Health Survey 2003, by Department of Human Services region

	Region	Completed interviews
<b>Rural</b>	Barwon-South Western	828
	Grampians	800
	Loddon Mallee	1,011
	Hume	892
	Gippsland	918
<b>Metro</b>	North and West metropolitan*	1,385
	Eastern Metropolitan	835
	Southern Metropolitan	831
	<b>Total</b>	<b>7,500</b>



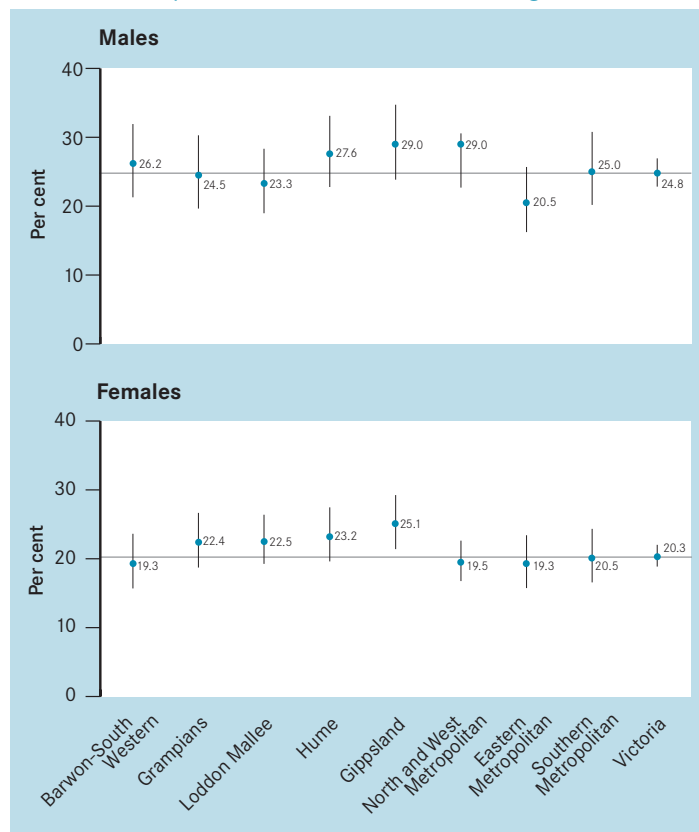


## Tobacco Smoke

### Smoking status

Figure 1 shows the proportion of males and females across the regions who reported that they were current smokers. Current smoking includes 'daily' and 'occasional'<sup>1</sup> smoking.

Figure 1: Proportion of current smokers, by sex and Department of Human Services region



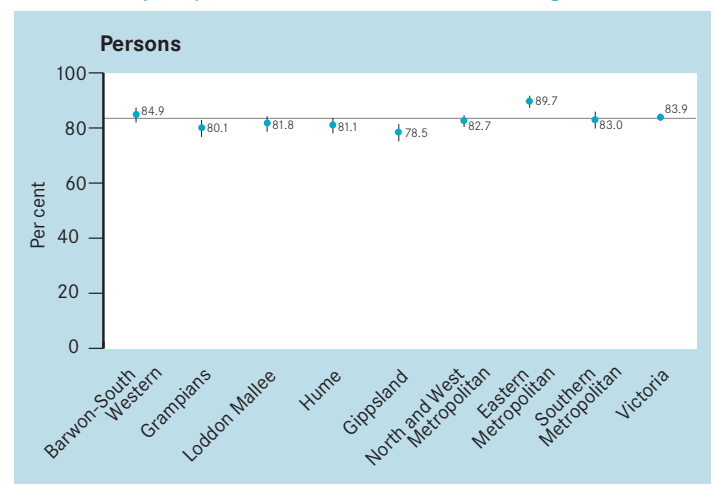
- The proportion of males who were current smokers ranged from 29.0 per cent in both the Gippsland and North and West Metropolitan regions to 20.5 per cent in the Eastern Metropolitan Region (figure 1).
- The proportion of females who were current smokers ranged from 19.3 per cent in both the Barwon–South Western and Eastern Metropolitan regions to 25.1 per cent in the Gippsland Region.
- There were no significant differences between regions and Victoria as a whole in terms of the proportion of males who were current smokers. The proportion of females in the Gippsland Region who were current smokers was significantly greater than the Victorian average (20.3 per cent).

- After adjusting for age and sex (results not presented), those persons more likely to be classified as current smokers were unemployed, resided in a rural area of the state, were Australian-born, were non-professionals, and had an annual household income of less than \$40,000. Adjusting for age and sex differences in the population also showed that those who were physically inactive (sedentary), those who had experienced non-specific psychological distress in the previous four weeks and those who consumed alcohol at levels associated with short-term risk of harm were more likely to be current smokers.

### Environmental tobacco smoke

The home is a significant source of exposure to environmental tobacco smoke, particularly for children. The Victorian Population Health Survey 2003 asked respondents about the frequency with which people smoke in their houses. Specifically, they were asked whether their home situation is best described as one in which people smoke frequently, occasionally or not at all (that is, smoke-free). Figure 2 shows the proportion of adults in each region who reported that their home was smoke-free.

Figure 2: Proportion of homes described as smoke-free, by Department of Human Services region



<sup>1</sup> The term 'occasional' does not refer to a specific frequency. It is defined by the respondent who, when asked which of a number of alternative response options (including 'I smoke daily') best describes his or her smoking status, chooses the response option, 'I smoke occasionally'.



- The proportion of individuals who reported that their home was smoke-free ranged from 78.5 per cent in the Gippsland Region to 89.7 per cent in the Eastern Metropolitan Region (figure 2).
- The proportion of individuals who reported that their home was smoke-free was significantly greater in the Eastern Metropolitan Region (89.7 per cent) than the average for Victoria (83.9 per cent).
- In the Gippsland Region, the proportion of individuals who reported that their home was smoke-free (78.5 per cent) was significantly lower than the Victorian average.

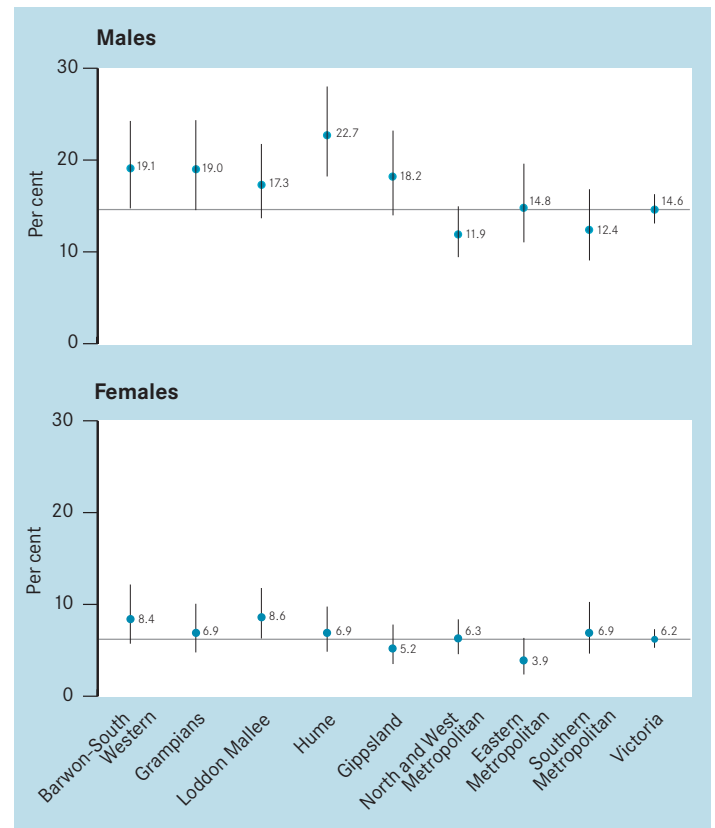
## Alcohol consumption

### Short-term risk of alcohol related harm

A standard drink is equal to one middy (285 ml) of full strength beer, one small serve (100 ml) of wine or one pub-standard nip (30 ml) of spirits—approximately 10 grams or 12.5 millilitres of alcohol. Consuming more than six (if male) or four (if female) standard drinks on any one occasion or day is categorised as risky or high risk in terms of the risk of adverse health outcomes in the short term. (By law, the label on every container of an alcoholic drink has to show how many standard drinks there are in that container).

The Victorian Population Health Survey asked respondents how frequently they consumed alcohol at levels that are risky or high risk in terms of the possible impact on their health and that of others. Responses are categorised in terms of whether the threshold for risky or high risk drinking behaviour is exceeded on a daily, weekly, monthly or yearly basis or not at all. Figure 3 reports the proportion of adults who reported consuming alcohol at risky or high risk levels *at least weekly* (i.e., on one or more days or occasions in a week).

Figure 3: Proportion of adults who reported consuming alcohol at risky or high-risk levels *at least weekly*, by sex and Department of Human Services region



- The proportion of males who consumed alcohol at risky or high-risk levels at least once per week ranged from 22.7 per cent in the Hume Region to 11.9 per cent in the North and West Metropolitan Region (figure 1).
- The proportion of males in the Hume Region who consumed alcohol at levels above those specified in the national alcohol guidelines was significantly greater than the Victorian average (22.7 per cent). There were no significant differences between regions and Victoria as a whole in terms of the proportion of females who consumed alcohol at risky or high-risk levels on at least one occasion per week.
- For each of the regions and for Victoria, the proportion of males who consumed alcohol at risky or high-risk levels at least weekly was significantly greater than the proportion of females who did so.

### Smoking and alcohol consumption

Smoking and alcohol consumption are health behaviours for which individuals have a degree of control and that act directly to cause disease. Table 2 provides a breakdown of the proportion of smokers, ex-smokers and non-smokers in each region who were at risk of short-term harm due to alcohol consumption at least once per week (see also figure 4).





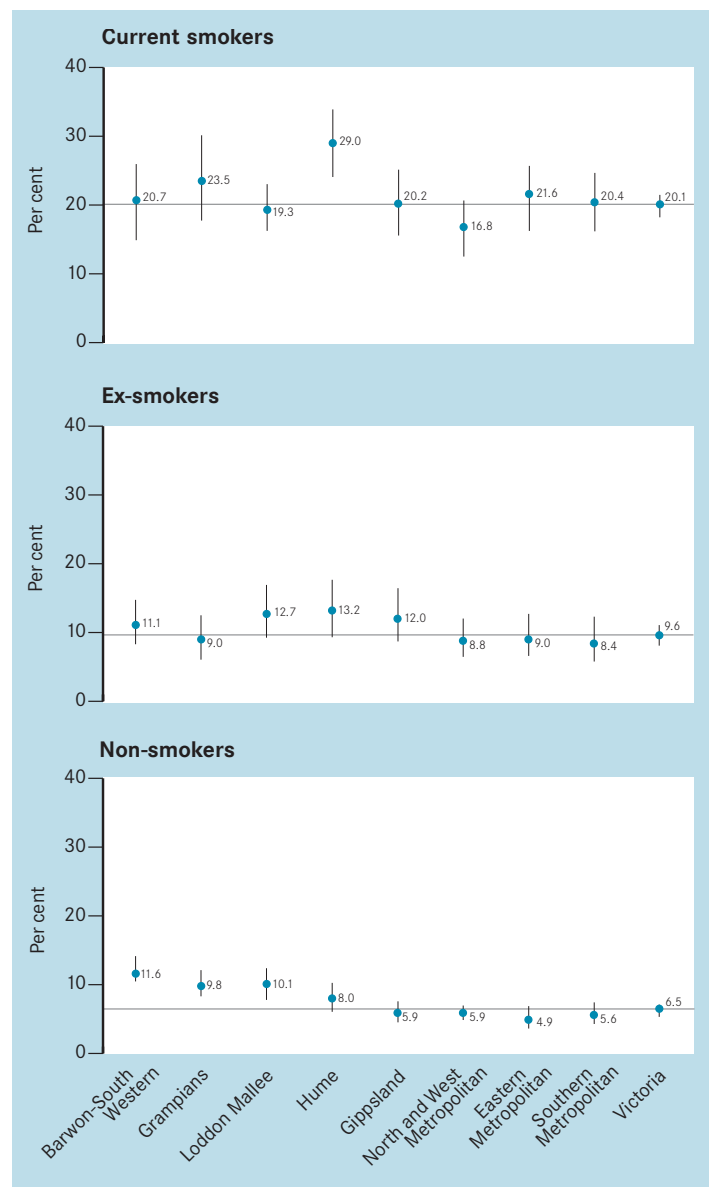
Table 2: Proportion of smokers, ex-smokers and non-smokers who are at risk of short-term harm from alcohol consumption *at least weekly*, by Department of Human Services region

Region	Current smoker		Ex-smoker		Non-smoker	
	%	95% CI*	%	95% CI*	%	95% CI*
Barwon–South Western	20.7	14.2–29.1	11.1	7.1–17.0	11.6	8.5–15.8
Grampians	23.5	17.0–31.6	9.0	5.4–14.5	9.8	6.8–13.9
Loddon–Mallee	19.3	14.1–25.8	12.7	8.8–18.0	10.1	7.4–13.6
Hume	29.0	22.4–36.6	13.2	9.0–19.0	8.0	5.4–11.7
Gippsland	20.2	14.7–27.2	12.0	8.2–17.4	5.9	3.6–9.5
North and West Metropolitan	16.8	12.9–21.7	8.8	5.8–13.0	5.9	4.3–8.2
Eastern Metropolitan	21.6	15.1–29.9	9.0	5.4–14.7	4.9	3.0–7.9
Southern Metropolitan	20.4	14.4–28.1	8.4	5.0–13.7	5.6	3.6–8.7
<b>Victoria</b>	<b>20.1</b>	<b>17.6–22.9</b>	<b>9.6</b>	<b>7.9–11.5</b>	<b>6.5</b>	<b>5.5–7.6</b>

\* CI = confidence interval

- The proportion of current smokers who consumed alcohol at risky or high-risk levels at least once per week ranged from 29.0 per cent in the Hume Region to 16.8 per cent in the North and West Metropolitan Region (figure 2).
- For Victoria as a whole, there was a significant difference in the proportion of adults who reported drinking alcohol at levels associated with short-term harm at least weekly by smoking status. Current smokers were approximately three times more likely to drink at risky or high-risk levels at least once per week compared with non-smokers (20.1 per cent versus 6.5 per cent) and more than twice as likely to do so than ex-smokers (20.1 per cent versus 9.6 per cent).
- The proportion of current smokers in the Grampians, Hume, Eastern Metropolitan and Southern Metropolitan regions who consumed alcohol at risky or high-risk levels at least once per week was significantly greater than the proportion of ex-smokers and non-smokers who did so.

Figure 4: Proportion of smokers, ex-smokers and non-smokers who are at risk of short-term harm from alcohol consumption *at least weekly*, by Department of Human Services region





### Rates

The 2001 Victorian population<sup>2</sup> has been used when specifying population weights to ensure that the adjusted sample distribution is representative of the population by age group, gender and region. Differences between regions in the age and sex distribution of their populations may account, in part, for differences in overall region-specific rates.

### Confidence intervals

The rates reported in this publication are based on information collected from a sample of adults, selected at random by household telephone number. As a result, they are subject to sampling variability. This means that the rates are estimates and may differ from those that would result if all adults in Victoria had been included in the survey.

One measure of the amount of variation associated with an estimate is the confidence interval. If several independent, random samples were drawn from the same population, and 95 per cent confidence intervals were to be calculated, then, on average, 19 of every 20 (95 per cent) such confidence intervals would contain the true population estimate. Estimates with wider confidence intervals reflect a higher degree of unreliability in the estimate and should be used with caution. Confidence intervals that do not overlap are interpreted as representing significant differences.

### Additional information

The method of the Victorian Population Health Survey 2003 and other results may be found in the report, *Victorian Population Health Survey 2003: selected findings*. This report and other useful resources may be viewed or downloaded from the website [www.health.vic.gov.au/healthstatus](http://www.health.vic.gov.au/healthstatus)

VicHealth provided support for the Victorian Population Health Survey data analysis. Information about VicHealth's initiatives to promote the health of Victorians is available at the website [www.vichealth.vic.gov.au](http://www.vichealth.vic.gov.au)

For media enquiries please contact Bram Alexander, Department of Human Services Media Unit: (03) 9616 8803.

**Source:** *Victorian Population Health Survey 2003*, Public Health Group, Rural and Regional Health and Aged Care Services Division, Victorian Government Department of Human Services, Melbourne, Victoria.



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<sup>2</sup> Department of Infrastructure, 2001, *Population projections 2001*, Government of Victoria, Melbourne.

