

A summary of Fife results from the Scottish Health Survey 2008-09

1. Summary

This paper presents a brief background to the Scottish Health Survey and a summary of the first Fife results under key health and health related headings from the 2008-09 Scottish Health Survey. These are compared to Scotland and other areas where appropriate

2. The Scottish Health Survey

The Scottish Health Survey (SHeS) is a national survey of health and health behaviours which collects information from the population living in private households in Scotland.

It is designed to make a major contribution to the monitoring of health in Scotland by providing estimates of the prevalence of a range of health conditions, information on health related behaviours and data to monitor progress towards local and national health and wellbeing targets not available from other sources.

The main focus of the Scottish Health Survey is to collect information about cardiovascular disease and related risk factors. As such the survey collects through interview and self completion methods information relating to cardiovascular disease, smoking, diet, physical activity, obesity and alcohol consumption. The survey also collects information on mental health and wellbeing, long term conditions (limiting and non-limiting), dental health, socio-demographic factors and personal characteristics.

There have been three previous national surveys (1995, 1998 and 2003) but since 2008 the SHeS has had a new continuous survey design with the sample being built up annually over a four year period (2008-2011). This has provided national results on an annual basis and will produce data collected from adults (aged 16 and over) for all Health Boards after four years.

3. The Scottish Health Survey in Fife

In Fife previous data about health and health related behaviours came from the postal Fife Health and Lifestyle Surveys in 1996 and 2001 and a small Fife sample (524 adults) in the 2003 Scottish Health Survey. The new SHeS, with an annual sample of approximately 400 Fife adults, provided an opportunity to have a larger sample of Fife residents which we could confidently compare to Scotland and other areas.

To benefit from having a larger Fife sample earlier and to provide sub Fife information the Public Health Department together with each of the three Community Health Partnerships (CHPs) commissioned an annual boost of the Fife sample of 200 adults. This will provide Fife results for 2008-09 and 2010-11

and have the relatively unique opportunity to produce CHP results from the 2008-11 surveys.

3.1 Fife 2008-09 Results

3.1.1 The Fife Sample

Data collection from the 2008-09 surveys produced results from **1,322 adults** in Fife (878 adults from the national sample and 444 from the Fife boost). 57% of the sample were women (759) and 43% were men (572).

3.1.2 Alcohol Consumption

The SHeS collects information in relation to usual weekly consumption, daily consumption on the heaviest drinking day in the previous week and indicators of problem drinking (including physical dependence). Alcohol consumption and limits for sensible drinking are most commonly expressed as units, 21 units per week for men and 14 units per week for women.

Women (18%) were more likely to be non-drinkers than men (9%) and also reported lower average weekly alcohol consumption, 7.7 units compared to 17 units for men. 27% of men and 19% of women drank more than the recommended units per week in Fife compared to 29% of men and 19% of women in Scotland.

3.1.3 Smoking

The SHeS collects information on the prevalence of current cigarette smoking, levels of smoking among current smokers, exposure to second-hand smoke and the receipt of medical advice to stop smoking.

In 2008-09 cigarette smoking prevalence among the Fife sample was 26%, 27% among men and 25% among women. This is similar to the 25% reported nationally and lower than the 29% reported for Fife in the 2003 Scottish Health Survey (although sample size was small) Among current smokers the mean number of cigarettes smoked per day was 15.9 within the Fife sample and 14.5 nationally.

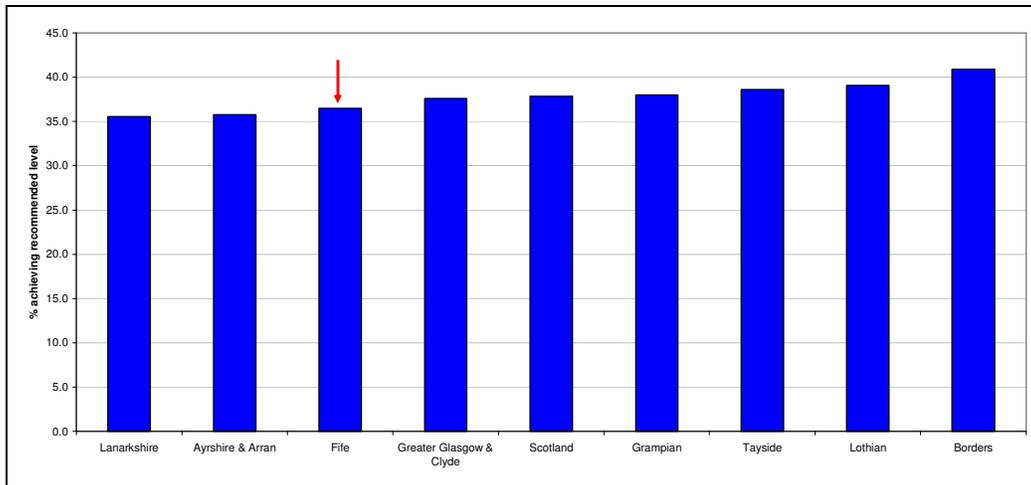
3.1.4 Physical Activity

The national physical activity strategy recommends that adults should take part in 30 minutes of moderate physical activity on most days of the week, with the ability to accumulate 30 minutes from shorter bouts of at least 10 minutes of activity. The SHeS focuses on participation in sports and structured exercise, walking, home based activities and activity at work in the previous four week period.

Chart 1 shows the proportion of respondents who reported 30 or more minutes of moderate physical activity on 5 or more days a week. In Fife the

figure was 37% which is slightly lower than 38% for Scotland and the third lowest of eight NHS boards that have data available.

Chart 1: Recommended physical activity level by NHS Board and Scotland



Source: Scottish Health Survey 2008-09

3.1.5 Fruit and Vegetable Consumption

The recommendation to consume five portions of fruit and vegetables each day has become one of the best known health improvement messages since its inception more than 10 years ago and is still a key message of campaigns such as 'Take Life On'. Survey respondents were asked how many portions they had eaten in the 24 hours prior to interview and were given everyday examples (e.g. 3 tablespoons of vegetables, a medium apple) to facilitate this process.

23% of Fife respondents reported consuming 5 or more portions of fruit and vegetables, the same figure was reported for Scotland. This is lower than the 26% reported for Fife in the 2003 SHeS survey. 9% of respondents in both Fife and Scotland had consumed no fruit or vegetables in the 24 hours preceding the survey.

3.1.6 Obesity

Body Mass Index (BMI) calculated from the height and weight (kg/m^2) of respondents taken by the interviewer is a widely accepted measure that allows for differences in weight due to height. BMI is presented in five categories; underweight, normal weight, overweight, obese and morbidly obese.

In 2008-09 the majority of men (72%) and women (62%) in the Fife sample had a BMI which exceeded the normal weight range so were classed as overweight or obese. 29% of male and 30% of female Fife respondents were obese compared to 26% of male and 27% of female Scottish respondents.

3.1.7 General Health and Mental Wellbeing

Questions in this section cover self assessed health, long term conditions and mental health and provide information to contribute to the monitoring of a number of national strategic objectives including the new adult mental health indicators.

74% of Fife respondents rated their general health to be good or very good. All participants were asked about physical or mental conditions or disabilities that had affected, or were likely to affect them, for at least a year with 26% of adults reported they had a limiting long term condition. WEMWBS is a new scale that has 14 items designed to assess positive affect, satisfying interpersonal relationships and positive functioning. WEMWBS produces a possible score of 14 to 70 with a higher score indicating more positive wellbeing. The 2008-09 results showed that Fife respondents had a mean score of 49.6 compared to results for Scotland of 49.8.

3.1.8 Cardiovascular Disease

The main components of cardiovascular disease (CVD) are coronary heart disease (CHD) and stroke with CVD being the second most common cause of death in Fife after cancer. Many of the targets and initiatives relating to smoking, alcohol consumption diet, physical activity and obesity have the potential to impact on CVD.

Respondents were asked whether they had suffered from a list of conditions classed as cardiovascular disease and had been told this by a doctor. The prevalence of any cardiovascular disorder among Fife respondents to the 2008-09 SHeS was 16% compared to 15% among Scottish respondents. This figures excluded those who reported suffering from diabetes (all types) but when included the prevalence of any CVD condition or diabetes was 19% and 18% for Fife and Scottish respondents respectively.

3.1.9 Dental Health

The Scottish Health Survey looks at dental health in terms of the prevalence of natural teeth, prevention of and problems with teeth, self perception of the need for current dental treatment and access issues. This information is used to inform a number of Scottish Government strategies relating to dental health but due to the modular nature of the survey not all of this information will be available at board level.

From the 2008-09 survey, 14% of respondents reported that they had no natural teeth, 11% of men and 17% of women. These figures are slightly higher than the 9% of men and 14% of women reported nationally. In 2005 a target was set for 90% of all adults to have some of their own teeth by 2010. In both Fife and Scotland this figure was slightly lower in 2008-09 at 86% and 88% respectively.

4. Conclusions

The Scottish Health Survey is a vast resource of information on health and health related behaviours of which only a small selection has been presented here. A full detailed report of these Fife findings will be published in by end of Feb 2012 followed by a series of reports themed in-depth reports focussing on key priority areas. This information has already been used in Fife to provide baseline information for Community Plan and Health and Wellbeing Plan indicators and will be used to create a Fife Mental Health Indicators Dataset and other resources to be used by Fife Partnership. The Fife results from the 2008-09 Scottish Health Survey will be available from the KnowFife Dataset.

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