

Person—height (self-reported), total centimetres NN[N]

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Person—height (self-reported), total centimetres NN[N]

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Height (self-reported)
METEOR identifier:	270365
Registration status:	Health! , Standard 01/03/2005 Tasmanian Health , Standard 20/12/2016
Definition:	A person's self-reported height, measured in centimetres.

Data element concept attributes

Identifying and definitional attributes

Data element concept:	Person—height
METEOR identifier:	269792
Registration status:	Health! , Standard 01/03/2005 Tasmanian Health , Standard 20/12/2016
Definition:	The height of a person.
Context:	Public health and health care:

Stature is a major indicator of general body size and of bone length and of nutritional and health status of the individual and the community at large. It is important in screening for disease or malnutrition, and in the interpretation of weight (Lohman et al. 1988). Shortness is known to be a predictor of all cause mortality and coronary heart disease mortality in middle aged men (Marmot et al. 1984) and of less favourable gestational outcomes in women (Kramer 1988). Self-reported or parentally reported height for children and adolescents should be used cautiously if at all. It enables the calculation of body mass index which requires the measurement of height and weight (body mass) for adults.

Object class:	Person
Property:	Height

Value domain attributes

Identifying and definitional attributes

Value domain:	Total centimetres NN[N]
METEOR identifier:	270871
Registration status:	Health! , Standard 01/03/2005 Tasmanian Health , Standard 20/12/2016
Definition:	Total number of centimetres.

Representational attributes

Representation class:	Total
Data type:	Number
Format:	NN[N]
Maximum character length:	3

	Value	Meaning
Supplementary values:	888	Unknown
	999	Not stated/inadequately described
Unit of measure:	Centimetre (cm)	

Data element attributes

Collection and usage attributes

Collection methods: The method of data collection, e.g. face to face interview, telephone interview or self-completion questionnaire, can affect survey estimates and should be reported.

The data collection form should include a question asking the respondent what their height is. For example, the Australian Bureau of Statistics National Health Survey 1995 included the question 'How tall are you without shoes?'. The data collection form should allow for both metric (to the nearest 1 cm) and imperial (to the nearest 0.5 inch) units to be recorded.

If practical, it is preferable to enter the raw data into the database before conversion of measures in imperial units to metric. However if this is not possible, height reported in imperial units can be converted to metric prior to data entry using a conversion factor of 2.54 cm to the inch.

Rounding to the nearest 1 cm will be required for measures converted to metric prior to data entry, and may be required for data reported in metric units to a greater level of precision than the nearest 1 cm. The following rounding conventions are desirable to reduce systematic over-reporting (Armitage & Berry 1994):

NNN.x where $x < 5$ - round down, e.g. 172.2 cm would be rounded to 172 cm.

NNN.x where $x > 5$ - round up, e.g. 172.7 cm would be rounded to 173 cm.

NNN.x where $x = 5$ - round to the nearest even number, e.g. 172.5 cm would be rounded to 172 cm, while 173.5 cm would be rounded to 174 cm.

Comments:

This metadata item is recommended for persons aged 18 years or older. It is recommended for use in population surveys when it is not possible to measure height.

It is recommended that in population surveys, sociodemographic data including ethnicity should be collected, as well as other risk factors including physiological status (e.g. pregnancy), physical activity, smoking and alcohol consumption. Summary statistics may need to be adjusted for these variables.

Metadata items currently exist for sex, date of birth, country of birth, Indigenous status and smoking. Metadata items are being developed for physical activity.

Presentation of data:

Means, 95% confidence intervals, medians and centiles should be reported to one decimal place. Where the sample permits, population estimates should be presented by sex and 5-year age groups. Estimates based on sample surveys may need to take into account sampling weights.

For consistency with conventional practice, and for current comparability with international data sets, recommended centiles are 5, 10, 15, 25, 50, 75, 85, 90 and 95. To estimate the 5th and 95th centiles, a sample size of at least 200 is recommended for each group for which the centiles are being specified.

For some reporting purposes, it may be desirable to present height data in categories. It is recommended that 5 cm groupings are used for this purpose. Height data should not be rounded before categorisation. The following categories may be appropriate for describing the heights of Australian men and women, although the range will depend on the population. The World Health Organization's range for height is 140-190 cm.

Height <140 cm

140 cm = Height < 145 cm

145 cm = Height < 150 cm

... in 5 cm categories

185 cm = Height < 190 cm

Height => 190 cm

On average, height tends to be overestimated when self-reported by respondents. Data for Australian men and women aged 20-69 years in 1989 indicated that men overestimated by an average of 1.1 cm (SEM* of 0.04 cm) and women by an average of 0.5 cm (SEM of 0.05 cm) (Waters 1993). The extent of overestimation varied with age.

*Note: SEM is the standard error of measurement.

Relational attributes

Related metadata references:

Is used in the formation of [Adult—body mass index \(self-reported\), ratio NN\[N\].N\[N\] Health!](#), Standard 01/03/2005
[National Health Performance Authority \(retired\)](#), Retired 01/07/2016

Is used in the formation of [Child—body mass index \(self-reported\), ratio NN\[N\].N\[N\] Health!](#), Standard 01/03/2005

Is re-engineered from  [Height - self-reported, version 2, DE, NHDD, NHMG, Superseded 01/03/2005.pdf](#) (21.0 KB)
No registration status

Implementation in Data Set Specifications:

[Acute coronary syndrome \(clinical\) DSS Health!](#), Superseded 01/10/2008
[Acute coronary syndrome \(clinical\) DSS](#)

[Health!](#), Superseded 07/12/2005

[Perinatal DSS 2014-15](#)

[Health!](#), Superseded 13/11/2014

Implementation start date: 01/07/2014

Implementation end date: 30/06/2015

Conditional obligation:

It is preferable to collect and record a pregnant woman's height as a measured height. Where a measured height has not been provided or it is not possible to ascertain whether the height has been measured or self-reported, the value 999.9 should be recorded against the measured height data item to indicate this. Data should then be recorded against this conditional self-report height item.

DSS specific information:

It is acceptable for a self-reported height to be rounded to the nearest whole centimetre.

[Perinatal DSS 2015-16](#)

[Health!](#), Superseded 04/09/2015

Implementation start date: 01/07/2015

Implementation end date: 30/06/2016

Conditional obligation:

It is preferable to collect and record a pregnant woman's height as a measured height. Where a measured height has not been provided or it is not possible to ascertain whether the height has been measured or self-reported, the value 999.9 should be recorded against the measured height data item to indicate this. Data should then be recorded against this conditional self-reported height item.

DSS specific information:

It is acceptable for a self-reported height to be rounded to the nearest whole centimetre.

[Perinatal NBEDS 2016-17](#)

[Health!](#), Superseded 05/10/2016

Implementation start date: 01/07/2016

Implementation end date: 30/06/2017

Conditional obligation:

It is preferable to collect and record a pregnant woman's height as a measured height. Where a measured height has not been provided or it is not possible to ascertain whether the height has been measured or self-reported, the value 999.9 should be recorded against the measured height data item to indicate this. Data should then be recorded against this conditional self-reported height item.

DSS specific information:

It is acceptable for a self-reported height to be rounded to the nearest whole centimetre.

[Perinatal NBEDS 2017-18](#)

[Health!](#), Superseded 02/08/2017

Implementation start date: 01/07/2017

Implementation end date: 30/06/2018

Conditional obligation:

It is preferable to collect and record a pregnant woman's height as a measured height. Where a measured height has not been provided or it is not possible to ascertain whether the height has been measured or self-reported, the value 999.9 should be recorded against the measured height data item to indicate this. Data should then be recorded against this conditional self-reported height item.

DSS specific information:

It is acceptable for a self-reported height to be rounded to the nearest whole centimetre.

[Perinatal NBEDS 2018-19](#)

[Health!](#), Superseded 12/12/2018

Implementation start date: 01/07/2018

Implementation end date: 30/06/2019

Conditional obligation:

It is preferable to collect and record a pregnant woman's height as a measured height. Where a measured height has not been provided or it is not possible to ascertain whether the height has been measured or self-reported, the value 999.9 should be recorded against the measured height data item to indicate this. Data should then be recorded against this conditional self-reported height item.

DSS specific information:

It is acceptable for a self-reported height to be rounded to the nearest whole centimetre.

[Perinatal NBEDS 2019-20](#)

[Health!](#), Superseded 20/11/2019

Implementation start date: 01/07/2019

Implementation end date: 30/06/2020

Conditional obligation:

It is preferable to collect and record a pregnant female's height as a measured height. Where a measured height has not been provided or it is not possible to ascertain whether the height has been measured or self-reported, the value 999.9 should be recorded against the [Person—height \(measured\), total centimetres NN\[N\].N](#) data element. Data should then be recorded against this conditional self-reported height data element.

DSS specific information:

It is acceptable for a self-reported height to be rounded to the nearest whole centimetre.

[Perinatal NBEDS 2020-21](#)

[Health!](#), Superseded 03/12/2020

Implementation start date: 01/07/2020

Implementation end date: 30/06/2021

Conditional obligation:

It is preferable to collect and record a pregnant female's height as a measured height. Where a measured height has not been provided or it is not possible to ascertain whether the height has been measured or self-reported, the value 999.9 should be recorded against the [Person—height \(measured\), total centimetres NN\[N\].N](#) data element. Data should then be recorded against this conditional self-reported height data element.

DSS specific information:

It is acceptable for a self-reported height to be rounded to the nearest whole centimetre.

[Perinatal NBEDS 2021-22](#)

[Health!](#), Superseded 17/12/2021

Implementation start date: 01/07/2021

Implementation end date: 30/06/2022

Conditional obligation:

It is preferable to collect and record a pregnant female's height as a measured height. Where a measured height has not been provided or it is not possible to ascertain whether the height has been measured or self-reported, the value 999.9 should be recorded against the [Person—height \(measured\), total centimetres NN\[N\].N](#) data element. Data should then be recorded against this conditional self-reported height data element.

DSS specific information:

This data element is recorded for the mother only.

It is acceptable for a self-reported height to be rounded to the nearest whole centimetre.

[Perinatal NBEDS 2022–23](#)

[Health](#), Standard 17/12/2021

Implementation start date: 01/07/2022

Implementation end date: 30/06/2023

Conditional obligation:

It is preferable to collect and record a pregnant female's height as a measured height. Where a measured height has not been provided or it is not possible to ascertain whether the height has been measured or self-reported, the value 999.9 should be recorded against the [Person—height \(measured\), total centimetres NN\[N\].N](#) data element. Data should then be recorded against this conditional self-reported height data element.

DSS specific information:

This data element is recorded for the mother only.

It is acceptable for a self-reported height to be rounded to the nearest whole centimetre.

[Tasmanian Perinatal Data Set - 2016](#)

[Tasmanian Health](#), Standard 30/01/2017

Implementation start date: 01/07/2016

Implementation end date: 30/06/2017

[Tasmanian Perinatal Data Set - 2019](#)

[Tasmanian Health](#), Superseded 23/06/2020

Implementation start date: 01/07/2019

Implementation end date: 30/06/2020