National Healthcare Agreement: PI 03–Prevalence of overweight and obesity, 2020

Exported from METEOR (AIHW's Metadata Online Registry)

National Healthcare Agreement: PI 03–Prevalence of overweight and obesity, 2020

Identifying and definitional attributes

Metadata item type:	Indicator
Indicator type:	Progress measure
Short name:	PI 03–Prevalence of overweight and obesity, 2020
METEOR identifier:	716275
Registration status:	Health!, Standard 13/03/2020
Description:	Prevalence of overweight and obesity in adults and children.
Indicator set:	National Healthcare Agreement (2020) Health!, Standard 13/03/2020
Outcome area:	Prevention Health!, Standard 07/07/2010

Collection and usage attributes

Computation description:	Body Mass Index (BMI) is calculated as weight (in kilograms) divided by the square of height (in metres). For adults, underweight is defined as a BMI less than 18.5, normal is defined as a BMI of 18.5 to less than 25.0, overweight is defined as a BMI of 25.0 to less than 30.0 and obese is defined as a BMI of greater than or equal to 30.0. For children, underweight is defined as a BMI (appropriate for age and sex) that is likely to be less than 18.5 at age 18, normal is defined as a BMI (appropriate for age and sex) that is likely to be 18.5 to less than 25.0 at age 18, overweight is defined as a BMI (appropriate for age and sex) that is likely to be 25.0 to less than 30.0 at age 18 and obese is defined as a BMI (appropriate for age and sex) that is likely to be greater than or equal to 30.0 at age 18, based on centile curves. See *Australian Health Survey: Users' Guide, 2011-13* (ABS cat. no. 4363.0.55.001) for BMI values. Rates are directly age-standardised to the 2001 Australian population. Excludes pregnant women where identified and people with an unknown BMI. Analysis by remoteness and Socio-Economic Indexes for Areas (SEIFA) Index of Relative Socio-Economic Disadvantage (IRSD) is based on usual residence of person. Presented as a percentage. 95% confidence intervals and relative standard errors calculated for rates.
Computation:	100 × (Numerator ÷ Denominator) Calculated separately for adults and children.
Numerator:	Adults: Number of persons aged 18 and over who are obese or overweight. Children: Number of persons aged 5–17 who are obese or overweight.

Numerator data elements:

┌─ Data Element / Data Set ─────────────────────────────

Adult—Body Mass Index

Data Source

[ABS 2017–18 National Health Survey (NHS)](#)

Guide for use

Data source type: Survey

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┌─ Data Element / Data Set ─────────────────────────────

Child—Body Mass Index

Data Source

[ABS 2017–18 National Health Survey (NHS)](#)

Guide for use

Data source type: Survey

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┌─ Data Element / Data Set ─────────────────────────────

Adult—Body Mass Index

Data Source

[ABS 2018-19 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS)](#)

Guide for use

Data source type: Survey

└──

┌─ Data Element / Data Set ─────────────────────────────

Child—Body Mass Index

Data Source

[ABS 2018-19 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS)](#)

Guide for use

Data source type: Survey

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Denominator:

Adults: Population aged 18 and over

Children: Population aged 5–17

Denominator data elements:	**Data Element / Data Set**

Person—age

Data Source

ABS 2017–18 National Health Survey (NHS)

Guide for use

Data source type: Survey

Data Element / Data Set

Person—age

Data Source

ABS 2018-19 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS)

Guide for use

Data source type: Survey

Disaggregation:

2017–18—For each of adults and children, state and territory, by:

- sex by age (adults only) (not reported)
- Indigenous status
- remoteness (Australian Statistical Geography Standard (ASGS) 2016 Remoteness Structure)
- 2016 Socio-Economic Indexes for Areas (SEIFA) Index of Relative Socio-Economic Disadvantage (IRSD) quintiles (not reported)
- BMI category (underweight, normal, overweight, obese) (not reported)
- disability status (not reported)

2017–18—For adults, nationally, by (all not reported):

- sex by remoteness (ASGS 2016 Remoteness Structure)
- 2016 SEIFA IRSD deciles
- remoteness (ASGS 2016 Remoteness Structure) by 2016 SEIFA IRSD deciles.

Some disaggregation may result in numbers too small for publication.

Disaggregation data elements:

Data Element / Data Set

Person—age

Data Source

ABS 2017–18 National Health Survey (NHS)

Guide for use

Data source type: Survey

Data Element / Data Set

Person—area of usual residence

Data Source

ABS 2017–18 National Health Survey (NHS)

Guide for use

Data source type: Survey
Used for disaggregation by state/territory, remoteness and SEIFA of residence

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Data Element / Data Set

Person—disability status

Data Source

ABS 2017–18 National Health Survey (NHS)

Guide for use

Data source type: Survey

Data Element / Data Set

Person—Indigenous status

Data Source

ABS 2017–18 National Health Survey (NHS)

Guide for use

Data source type: Survey

Data Element / Data Set

Person—sex

Data Source

ABS 2017–18 National Health Survey (NHS)

Guide for use

Data source type: Survey

Data Element / Data Set

Person—age

Data Source

ABS 2018-19 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS)

Guide for use

Data source type: Survey

Data Element / Data Set

Person—area of usual residence

Data Source

[ABS 2018-19 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS)](#)

Guide for use

Data source type: Survey
Used for disaggregation by state/territory, remoteness and SEIFA of residence

Comments: Most recent data available for 2020 National Healthcare Agreement performance reporting: 2017–18 (total population, non-Indigenous: NHS); 2018–19 (Indigenous only: NATSIHS).

2017–18 data are based on measured height and weight, though respondents were also asked to self-report their height and weight. BMI derived from measured height and weight is preferable to that derived from self-reported height and weight.

In 2017–18, 33.8% of respondents aged 18 years and over did not have their height or weight measured. For these people, height and weight were imputed using a range of information including their self-reported height and weight. For more information see [Appendix 2: Physical measurements in the 2017–18 National Health Survey in *National Health Survey: First results, 2017–18*](#) (ABS cat. no. 4364.0.55.001) (ABS 2019)

Representational attributes

Representation class:	Percentage
Data type:	Real
Unit of measure:	Person
Format:	N[NN].N

Indicator conceptual framework

Framework and dimensions:

[Health behaviours](#)

[Bio-medical factors](#)

Data source attributes

Data sources:

> **Data Source**
>
> [ABS 2017–18 National Health Survey (NHS)](#)
>
> **Frequency**
>
> Every 3 years
>
> **Data custodian**
>
> Australian Bureau of Statistics

> **Data Source**
>
> [ABS 2018-19 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS)](#)
>
> **Data custodian**
>
> Australian Bureau of Statistics

Accountability attributes

Reporting requirements: National Healthcare Agreement

Organisation responsible for providing data: Australian Bureau of Statistics

Benchmark: [PB d-Better health: by 2018, increase by five percentage points the proportion of Australian adults and children at a healthy body weight, over the 2009 baseline, 2020](#)

Further data development / collection required: Specification: Final, the measure meets the intention of the indicator.

Relational attributes

Related metadata references:

Supersedes [National Healthcare Agreement: PI 03–Prevalence of overweight and obesity, 2019](#)
[Health!](#), Superseded 13/03/2020

Has been superseded by [National Healthcare Agreement: PI 03–Prevalence of overweight and obesity, 2021](#)
[Health!](#), Standard 03/07/2020

See also [Australian Health Performance Framework: PI 1.2.1–Rates of current daily smokers, 2019](#)
[Health!](#), Standard 09/04/2020

See also [Australian Health Performance Framework: PI 1.2.1–Rates of current daily smokers, 2020](#)
[Health!](#), Standard 13/10/2021

See also [Australian Health Performance Framework: PI 1.2.3–Levels of risky alcohol consumption, 2019](#)
[Health!](#), Standard 09/04/2020

See also [Australian Health Performance Framework: PI 1.2.3–Levels of risky alcohol consumption, 2020](#)
[Health!](#), Standard 13/10/2021

See also [Australian Health Performance Framework: PI 1.3.1–Prevalence of overweight and obesity, 2019](#)
[Health!](#), Standard 09/04/2020

See also [Australian Health Performance Framework: PI 1.3.1–Prevalence of overweight and obesity, 2020](#)
[Health!](#), Standard 13/10/2021

See also [Australian Health Performance Framework: PI 2.1.6–Potentially avoidable deaths, 2019](#)
[Health!](#), Standard 09/04/2020

See also [Australian Health Performance Framework: PI 2.1.6–Potentially avoidable deaths, 2020](#)
[Health!](#), Standard 01/12/2020

See also [National Healthcare Agreement: PB d–Better health: by 2018, increase by five percentage points the proportion of Australian adults and children at a healthy body weight, over the 2009 baseline, 2020](#)
[Health!](#), Standard 13/03/2020

See also [National Healthcare Agreement: PI 04–Rates of current daily smokers, 2020](#)
[Health!](#), Standard 13/03/2020

See also [National Healthcare Agreement: PI 05–Levels of risky alcohol consumption, 2020](#)
[Health!](#), Standard 13/03/2020

See also [National Healthcare Agreement: PI 16–Potentially avoidable deaths, 2020](#)
[Health!](#), Standard 13/03/2020