National Healthcare Agreement: PI 04—Rates of current daily smokers, 2022

| Exported from METEOR (AIHW's Metadata Online Registry) |
|---|
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| © Australian Institute of Health and Welfare 2024 |
| This product, excluding the AlHW logo, Commonwealth Coat of Arms and any material owned by a third party or protected by a trademark, has been released under a Creative Commons BY 4.0 (CC BY 4.0) licence. Excluded material owned by third parties may include, for example, design and layout, images obtained under licence from third parties and signatures. We have |

made all reasonable efforts to identify and label material owned by third parties.

You may distribute, remix and build on this website's material but must attribute the AlHW as the copyright holder, in line with our attribution policy. The full terms and conditions of this licence are available at https://creativecommons.org/licenses/by/4.0/.

Enquiries relating to copyright should be addressed to info@aihw.gov.au.

Enquiries or comments on the METEOR metadata or download should be directed to the METEOR team at meteor@aihw.gov.au.

National Healthcare Agreement: PI 04–Rates of current daily smokers, 2022

Identifying and definitional attributes

Metadata item type: Indicator

Indicator type: Progress measure

Short name: PI 04–Rates of current daily smokers, 2022

METEOR identifier: 740888

Registration status: Health!, Standard 24/09/2021

Description: Proportion of adults who are current daily smokers.

Indicator set: National Healthcare Agreement (2022)

Health!, Standard 24/09/2021

Outcome area: Prevention

Health!, Standard 07/07/2010

Collection and usage attributes

Population group age

from:

18 years

Computation description: Daily smoking: Currently smokes tobacco, including one or more manufactured

(packet) cigarettes, roll-your-own cigarettes, cigars or pipes, per day. This excludes chewing tobacco, electronic cigarettes (and similar), nicotine patches and smoking

of non-tobacco products.

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. Age-standardised percentages are directly age-

standardised to the 2001 Australian population.

95% confidence intervals and relative standard errors are calculated for rates. Rate ratios are derived by dividing the age standardised rate for Aboriginal and Torres Strait Islander people by the age standardised rate for non-Indigenous people.

Computation: Crude rate: 100 × (Numerator ÷ Denominator)

Numerator: Number of persons aged 18 and over who are a current daily smoker

Numerator data elements:

-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—tobacco smoking status

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-age

Data Source

ABS 2017–18 National Health Survey (NHS) and Survey of Income and Housing (SIH) pooled data set (NHIH)

Guide for use

Data source type: Survey

Data Element / Data Set-

Person—tobacco smoking status

Data Source

ABS 2017–18 National Health Survey (NHS) and Survey of Income and Housing (SIH) pooled data set (NHIH)

Guide for use

Data source type: Survey

Denominator: Population aged 18 and over

Denominator data elements:

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—age

Data Source

ABS 2017–18 National Health Survey (NHS) and Survey of Income and Housing (SIH) pooled data set (NHIH)

Guide for use

Data source type: Survey

Data Element / Data Set

Person—Indigenous status

Data Source

ABS 2017–18 National Health Survey (NHS) and Survey of Income and Housing (SIH) pooled data set (NHIH)

Guide for use

Data source type: Survey

Disaggregation:

State and territory, by:

- sex by age (not reported)
- Indigenous status
- remoteness (Australian Statistical Geography Standard (ASGS) 2016 Remoteness Structure)
- 2016 SEIFA IRSD quintiles (not reported)
- disability status (not reported)

Nationally, by:

- remoteness (ASGS 2016 Remoteness Structure)
- sex by remoteness (ASGS 2016 Remoteness Structure) (not reported)
- 2016 SEIFA IRSD deciles (not reported)
- remoteness (ASGS 2016 Remoteness Structure) by 2016 SEIFA IRSD deciles (not reported)

Disaggregation data elements:

Some disaggregations may result in numbers too small for publication.

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

Data Element / Data Set-

Person-age

Data Source

ABS 2017–18 National Health Survey (NHS) and Survey of Income and Housing (SIH) pooled data set (NHIH)

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) and Survey of Income and Housing (SIH) pooled data set (NHIH)

Guide for use

Data source type: Survey

Used for disaggregation by state/territory, remoteness and SEIFA IRSD

Data Element / Data Set

Person—disability status

Data Source

ABS 2017–18 National Health Survey (NHS) and Survey of Income and Housing (SIH) pooled data set (NHIH)

Guide for use

Data source type: Survey

Data Element / Data Set-

Person-sex

Data Source

ABS 2017–18 National Health Survey (NHS) and Survey of Income and Housing (SIH) pooled data set (NHIH)

Guide for use

Data source type: Survey

Comments:

Most recent data available for 2022 National Healthcare Agreement performance reporting: 2017–18 (total population, non-Indigenous: NHIH); 2018–19 (Indigenous only: NATSIHS).

NO NEW DATA FOR 2022 REPORTING.

National Aboriginal and Torres Strait Islander Health Survey (NATSIHS) or National Aboriginal and Torres Strait Islander Social Survey (NATSISS) data may be used for analysis dependent upon which survey is most recent.

Data for non-Indigenous people are from a pooled data set — the NHIH. For the 2017–18 NHS cycle, the smoking questionnaire module was used in both the NHS and the 2017–18 SIH to produce a larger sample size for more accurate smoker status estimates.

While the NHIH was a national sample, the sample size for the Indigenous population was too small to allow for reliable estimates for the Indigenous population. Thus, for Indigenous and non-Indigenous comparisons, data for the non-Indigenous population are obtained from the NHIH (2017–18) while data for the Indigenous population are obtained from the NATSIHS (2018–19). The non-Indigenous data are obtained by excluding information pertaining to the Indigenous population from the NHIH.

Data for the Northern Territory should be interpreted with caution as the NHS excludes Very Remote areas and discrete Aboriginal and Torres Strait Islander communities. These exclusions are unlikely to affect national estimates, and will only have a minor effect on aggregate estimates produced for individual states and territories, excepting the Northern Territory where around 20% of the population lived in Very Remote areas in the 2017–18 reporting period.

For the 2017–18 NHS and the 2018–19 NATSIHS, age standardised 95% confidence intervals and RSEs are not available. Please refer to associated crude 95 per cent confidence intervals and RSEs.

Further details about smoking among Indigenous Australians are available from the Aboriginal and Torres Strait Islander Health Performance Framework (measure 2.03: Environmental tobacco smoke and measure 2.15: Tobacco use).

Representational attributes

Representation class: Percentage

Data type: Real
Unit of measure: Person

Format: N[NN].N

Indicator conceptual framework

Framework and dimensions:

Health behaviours

Data source attributes

Data sources:

Data Source

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

Data custodian

Australian Bureau of Statistics

Data Source

ABS 2017-18 National Health Survey (NHS) and Survey of Income and Housing (SIH) pooled data set (NHIH)

Data custodian

Australian Bureau of Statistics

Accountability attributes

Reporting requirements: National Healthcare Agreement Organisation responsible Australian Bureau of Statistics

for providing data: Benchmark:

PB e-Better health: by 2018, reduce the national smoking rate to 10 per cent of the population and halve the Indigenous smoking rate over the 2009 baseline, 2022

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

collection required:

Source and reference attributes

Reference documents: Australian Institute of Health and Welfare (AlHW) 2020. Aboriginal and Torres

Strait Islander Health Performance Framework. Canberra: AlHW. Viewed 19

February 2021, https://indigenoushpf.gov.au/

Relational attributes

Related metadata references:

Supersedes National Healthcare Agreement: PI 04—Rates of current daily smokers, 2021

Health!, Standard 03/07/2020

See also <u>Australian Health Performance Framework: PI 1.2.1–Rates of current daily smokers</u>, 2020

Health!, Standard 13/10/2021

See also Australian Health Performance Framework: PI 1.2.3—Levels of risky alcohol consumption, 2020

Health!, Standard 13/10/2021

See also <u>Australian Health Performance Framework: PI 1.3.1–Prevalence of overweight and obesity, 2020</u>

Health!, Standard 13/10/2021

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 e—Better health: by 2018, reduce the national smoking rate to 10 per cent of the population and halve the Indigenous smoking rate over the 2009 baseline, 2022

Health!, Standard 24/09/2021

See also National Healthcare Agreement: PI 03—Prevalence of overweight and obesity, 2022

Health!, Standard 24/09/2021

See also National Healthcare Agreement: PI 05—Levels of risky alcohol consumption, 2022

Health!, Standard 24/09/2021

See also National Healthcare Agreement: PI 16—Potentially avoidable deaths, 2022

Health!, Standard 24/09/2021

See also National Indigenous Reform Agreement: PI 03-Rates of current daily smokers, 2020

Indigenous, Standard 17/11/2019