



Health of Aboriginal and Torres Strait Islander Males

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INTRODUCTION

In 2004–05, the Australian Bureau of Statistics conducted two nationwide health surveys: the National Aboriginal and Torres Strait Islander Health Survey and the National Health Survey. These surveys were designed to enable comparisons between the health of Aboriginal and Torres Strait Islander people and non-Indigenous people. The following information presents data collected from persons aged 15 years and over.

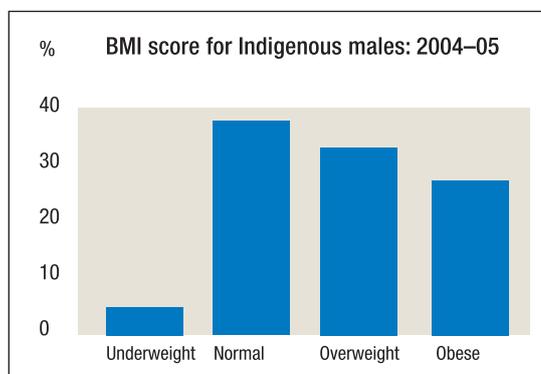
BODY MASS INDEX

The Body Mass Index (or BMI) is a tool used to measure weight relative to height. The weight and height of a person is calculated to produce a score that can then be categorised as one of four types; underweight, normal, overweight or obese.

Obesity increases the risk of developing a range of health problems including Type 2 diabetes, cardiovascular disease, high blood pressure, osteoarthritis and certain cancers. The prevalence of obesity for Indigenous males aged 15 years and over was slightly higher for those living in major cities and regional areas (non-remote) than in remote areas (26% and 27% respectively).

About half (52%) of Indigenous males aged 15 to 24 years were in the normal body range, while a quarter (or 25%) were considered to be overweight. Almost one in ten (9%) were found to be underweight, the highest proportion out of all the age groups. Almost one in four (24%) of Indigenous males aged 55 years and over had a normal BMI rating, while 39% were considered overweight and a further 39% were obese.

After adjusting for age differences between the Indigenous and non-Indigenous population, Indigenous males were twice likely to be classified as underweight. Indigenous males were also twice as likely to be obese than non-Indigenous males.

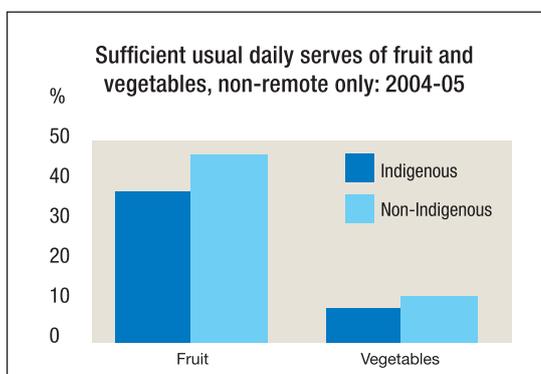


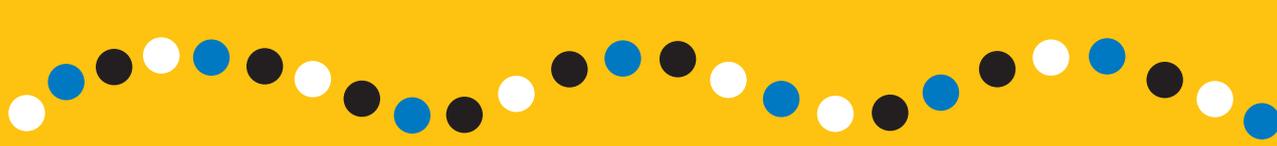
NUTRITION

Food and nutrition have long been recognised as important contributors to health. The National Health and Medical Research Council (NHMRC) have recommended a minimum of two serves of fruit and five serves of vegetables per day.

During 2004–05, the method of collecting nutritional data varied, depending on geography. People from non-remote areas were asked how many serves of fruit and vegetables they usually ate each day. People from remote areas were only asked whether or not they had usual servings.

Sufficient fruit consumption in non-remote areas was lower for Indigenous males (40%) than for non-Indigenous males (48%). The same pattern is seen in vegetable consumption, with over one in 12 (9%) Indigenous males eating recommended amounts.





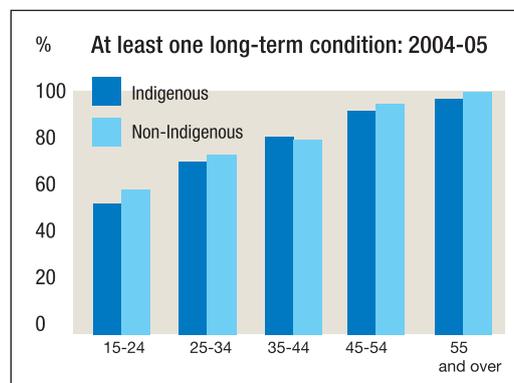
LONG-TERM HEALTH CONDITIONS

A long-term health condition is one that is medical in origin and lasts for six months or more. Long-term health conditions that are responsible for much of the ill health experienced by Indigenous people include circulatory diseases, diabetes, respiratory diseases, musculoskeletal conditions, kidney disease, and also eye and ear problems.

Among Indigenous males, the pattern for reporting at least one long-term health condition increased with age and was highest for the 55 and over age group (96%).

Indigenous males living in remote areas were less likely to report a long-term health condition than Indigenous males living non-remote (53% compared to 66%).

When comparing Indigenous males to non-Indigenous males, the rates for reporting at least one long-term health condition were similar. Non-Indigenous males had only slightly higher rates than Indigenous males for most ages, except for the 35 to 44 group.



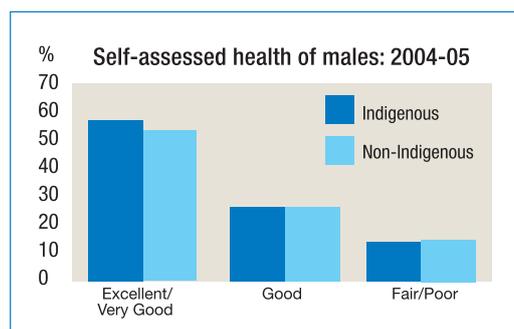
SELF-ASSESSED HEALTH STATUS

Self-assessed health status provides an overall measure of a population's health based on individuals' personal perceptions of their own health.

Generally, assessment of health decreased with age with young people more likely to perceive their health positively than older people.

About six out of ten (62%) Indigenous males aged 15 to 24 years rated their health as being 'excellent' or 'very good', compared to almost one in five (17%) of those aged 55 and over. More than half (55%) of Indigenous males aged 55 and over had rated their health as fair or poor.

Indigenous males living in remote areas were less likely to rate their health highly (as either excellent or very good) than males living in non-remote areas (42% compared to 46%). Fair or poor health ratings were slightly less likely to be reported by Indigenous males, than non-Indigenous males.



For more information about these and related statistics, please refer to the following:

National Health Survey, Summary of Results: 2004-05

Catalogue number 4364.0

National Aboriginal and Torres Strait Islander Health Survey: 2004-05

Catalogue number 4715.0

The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples: 2008

Catalogue number 4704.0

National Centre for Aboriginal and Torres Strait Islander Statistics

Freecall 1800 633 216

or email NCATSIS at: indigenous.statistics@abs.gov.au

Australian Bureau of Statistics www.abs.gov.au

