



## The health of Australia's males



There is increasing awareness that males and females have distinct health needs and concerns related to their biology and roles in society. This is illustrated by different rates of injury, illness and mortality; different attitudes towards health and risks; and the way each group uses, or does not use, health services. Given that males have poorer outcomes than females in many areas of health and an overall shorter life expectancy, the Australian Government launched a *National Male Health Policy* in 2010 designed to improve the health of Australia's males.

Drawing on a wide range of data sources, *The health of Australia's males* presents a snapshot of the health and wellbeing of this diverse population group. The full report and additional online material is available at: [www.aihw.gov.au/publications](http://www.aihw.gov.au/publications)



### Male health at a glance

5%	eat sufficient serves of fruit and vegetables (18+ years)
42%	do sufficient physical activity (18+ years)
68%	are overweight or obese (18+ years)
48%	have ever had a mental health condition (16–85 years)
18%	have a disability, limitation or restriction (all ages)
47%	have experienced sexual difficulty for at least a month (16–59 years)
39%	discuss healthy lifestyle issues with their GP (15+ years)

Sources: ABS National Health Survey 2007–08; ABS Survey of Disability and Carers 2009; Australian Study of Health and Relationships 2001–2002.

## Male health is important

There are 11.1 million males in Australia and research shows they have generally poorer health outcomes compared with females. Males in good health are able to contribute and participate more fully in their families, communities, social groups, education and employment.

This snapshot presents some of the key areas of health where males are doing well, and some areas where there is room for improvement.

## While males make some healthy lifestyle choices...

### Talking about healthy lifestyle

In 2007–08, around two in five males aged 15 years and over had discussed healthy lifestyle issues with a GP or other health professional in the previous 12 months. This included talking about quitting smoking, reducing alcohol consumption or starting a better diet.

### Getting active

Sports and other forms of physical activity are associated with a healthy body weight and a reduced risk of many chronic conditions. It can also improve psychological wellbeing and foster social networks in some circumstances.

In 2009–10, around two-thirds of males aged 15 years and over had participated in some form of sport or physical activity in the previous 12 months.

In 2007–08, around two in five males aged 18 years and over exercised sufficiently to obtain benefits for their health.

### Quitting smoking

Smoking is a known risk factor for many diseases including cancer and heart disease. Quitting smoking decreases the risk of developing these conditions. The rate of daily smoking decreased from 27% in 1991 to 18% in 2007.

In 2007, around one-third of males aged 14 years and over were ex-smokers. Among those who had smoked tobacco in the previous 12 months, nearly one-third had reduced the amount they smoked in a day.

## Many males are still at risk of poor health...

### Carrying extra weight

There is growing concern about the rise in overweight and obesity, particularly among males.

In 2007–08, two-thirds of adult males were at risk of poor health due to their body weight: 26% were obese and another 42% were overweight. Among boys (aged 15–17 years), one-quarter were at risk: 9% were obese and 16% were overweight.

### Risky drinking

Risky and high risk consumption of alcohol places males at risk of a variety of health problems and injuries. In 2007, 6% of males were at risk and 4% at high risk of alcohol-related harm as a result of alcohol consumption. Males aged 20–29 years were most likely to drink at risky and high risk levels.

### Exposure to violence

Violence can cause physical, social and psychological harm. In 2005, half of all males aged 15 years and over had been the victim of violence at least once since the age of 15 years. Around 1 in 10 males had been the victim of assault in the previous year.

### Three quick ways to healthier living: what the experts say

#### CHILDREN

Get your childhood and adolescent vaccinations

Eat at least 2 serves of fruit and 3 serves of vegetables each day

Participate in at least 60 minutes of moderate to vigorous activity every day and have no more than 2 hours of screen time each day.

#### ADULTS

Eat at least 2 serves of fruit and 5 serves of vegetables each day

Participate in at least 30 minutes of moderate to vigorous activity on most, preferably all, days

Drink no more than 2 standard drinks on any day to reduce the lifetime risk of harm from alcohol-related disease or injury.

**Sources:** DoHA National Immunisation Program 2007; DoHA & NHMRC Australian Dietary Guidelines 2003; DoHA National Physical Activity Guidelines for Australians 2005; DoHA Reduce your risk: new national guidelines for alcohol consumption 2009.



## Males experience some positive health outcomes...

### Living longer

In Australia, life expectancy has improved dramatically in the last century—a boy born in 2007–2009 could expect to live until the age of 79 years, around 24 years longer than a boy born in 1901–1910.

A male aged 65 years in 2007–2009 could expect to live until 83 years of age and a male aged 85 years in 2007–2009 could expect to live until 91 years of age.

How much longer can males expect to live?	
Current age (years)	Expect another...
0 (infant)	79 years
1	78 years
15	64 years
25	55 years
45	36 years
65	18 years
85	6 years

Source: Derived from ABS Australian demographic statistics, June 2010.

### Surviving cancer

In 2007, prostate cancer was the cause of around 1 in 3 new cases of cancer and 1 in 10 cancer deaths among males. While the number of new cases of prostate cancer is increasing over time, deaths from prostate cancer are generally decreasing.

More than 8 in 10 males diagnosed with prostate cancer between 1998 and 2004 survived at least 5 years.

## Some males worry about their sexual and reproductive health...

Sexual and reproductive health is an area of concern to the physical, social and emotional health of males.

In 2003, 60% of males aged 40 years and over were concerned about prostate cancer and 80% were concerned about losing erectile function.

Nearly 1 in 10 had tried, unsuccessfully, to have children.

In 2001–2002, 47% of males aged 16–59 years had experienced some sexual difficulty in the 12 months before the study, such as lacking interest in having sex or coming to orgasm too quickly.

## And many males are experiencing poor health...

### Poor mental health

Having poor mental health can affect a person's ability to cope with stressors and participate in work, education, family and community.

In 2007,

- nearly half of males aged 16–85 years reported they had experienced a mental disorder in their lifetime
- nearly 1 in 5 had experienced symptoms in the 12 months before the survey.

### Disability

Having a disability can limit a person's range of activity and restrict their participation in work, school and community.

In 2009, nearly 2 million males reported they had a disability, limitation or restriction. Around 1 in 20 males required help to complete daily tasks like communication, mobility and self-care.

### Workplace injuries

The workplace can play an important role in whether males are healthy or not. In 2007–08:

- around 1 in 10 males had a long-term condition as a result of a workplace injury
- there were 89,000 workers' compensation claims for male employees
- there were 218 compensated fatality claims.

## Males under-use some health services, and are over-represented in others

Compared with females, males use some health services less frequently than expected, with fewer visits to the GP, fewer hospitalisations and lower use of subsidised mental health services. In 2008–09, 1 in 6 males did not use any Medicare services.

Males use other services more frequently than expected, with higher use of community and residential mental health services and hospital emergency departments.

## Where to from here?

This report is the first in a series of reports on the health of Australia's males. It presents a broad-brush view of Australian males and the health issues that are important to them. The next report in the series will focus on population groups at greater risk of poor health.

## Useful references

### The Policy

DoHA (Department of Health and Ageing) 2010. National Male Health Policy: building on the strengths of Australian males. Canberra: Commonwealth of Australia.

### Cancer

AIHW 2010. Australian Cancer Incidence and Mortality (ACIM) books. <[www.aihw.gov.au/cancer/data/acim\\_books/index.cfm](http://www.aihw.gov.au/cancer/data/acim_books/index.cfm)>.

### Mental health

ABS 2008. National Survey of Mental Health and Wellbeing 2007: summary of results. Cat. no. 4326.0. Canberra: ABS.

### Reproductive and sexual health

Holden CA, McLachlan RI, Pitts M, Cumming R, Wittert G, Agius PA, Handelsman DJ & de Kretser DM 2005. Men in Australia Telephone Survey (MATEs): a national survey of the reproductive health and concerns of middle-aged and older Australian men. *Lancet* 366:218–24.

### Service use

AIHW 2010. Australian hospital statistics, 2008–09. Health services series no. 17. Cat. no. HSE 84. Canberra: AIHW.

Britt H, Miller GC, Charles J, Henderson J, Bayram C, Pan Y, Valenti L et al 2010. General practice activity in Australia 2009–10. General practice series no. 27. Cat. no. GEP 27. Canberra: AIHW.

### Violence

ABS 2006. Personal Safety Survey, Australia, 2005 (re-issue). Cat. no. 4906.0. Canberra: ABS.

### Workplace injury and death

SWA NOSI (Safe Work Australia National Online Statistics Interactive). <<http://nosi.ascc.gov.au>>.



## Where can I find out more?

The full report:

[www.aihw.gov.au/publications/](http://www.aihw.gov.au/publications/)

AIHW online material:

[www.aihw.gov.au/male-health/](http://www.aihw.gov.au/male-health/)

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