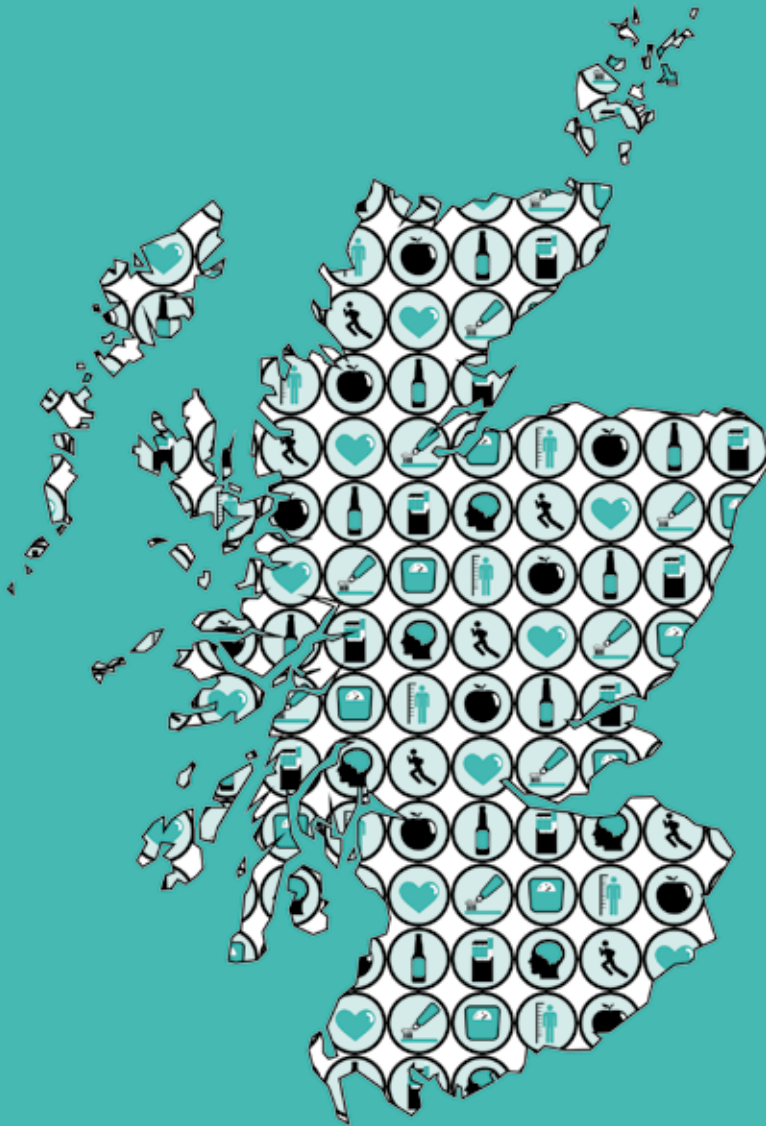




Scottish Government
Riaghaltas na h-Alba
gov.scot



The Scottish Health Survey

2019 edition | Summary

A National Statistics Publication for Scotland

SUMMARY

The Scottish Health Survey (SHeS) is commissioned by the Scottish Government Health Directorates to provide reliable information on the health, and factors related to health, of people living in Scotland that cannot be obtained from other sources. The series aims to:

- estimate the occurrence of particular health conditions
- estimate the prevalence of certain risk factors associated with health
- look at differences between regions and between subgroups of the population
- monitor trends in the population's health over time
- make a major contribution to monitoring progress towards health targets

Key findings from the 2019 survey are presented here alongside some trends. Further discussion of the findings and full documentation of the survey's methods and questionnaire can be found in the 2019 annual report available from the Scottish Health Survey website: <https://www.gov.scot/collections/scottish-health-survey>. The report is accompanied by an extensive set of web tables for 2019 and updated trends for key measures.

Key indicators for NHS health boards and some local authorities (where the sample is large enough) are available in the Scottish Health Survey dashboard published on the Scottish Government SHeS website alongside this report.

ABOUT THE SURVEY

The sample

SHeS has been designed to provide data on the health of adults (aged 16 and over) and children (aged 0-15) living in private households in Scotland annually. It provides data for NHS Health Boards by combining data over four years. In 2019, 4,903 adults and 1,978 children took part in the survey.

4,903
Adults



1,978
Children



The interview

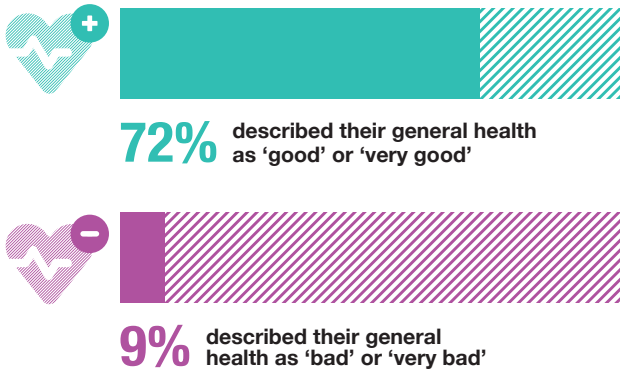
The principal focus of the survey is cardiovascular disease (CVD) and related risk factors. Some questions and topics are asked annually while others vary from year to year. In addition to the questionnaire, height and weight measurements are collected from everyone aged 2 and over. Each year a sub-sample of adults also complete a biological module which includes blood pressure and waist circumference measurements along with saliva sample collection. Participants are also asked for permission to link survey responses to their administrative NHS health records. Key topics included in the 2019 survey were:



General Health, CVD and Diabetes



Among all adults in 2019:



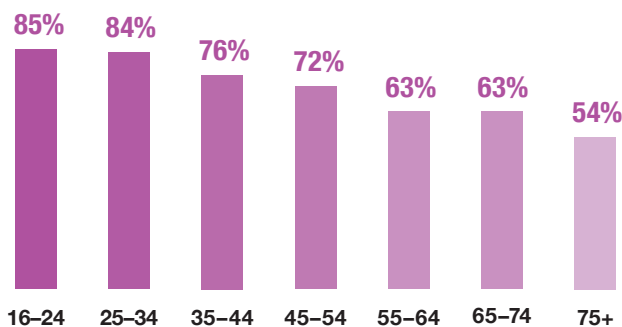
Self-assessed 'good' or 'very good' general health in all adults has reduced since 2009.



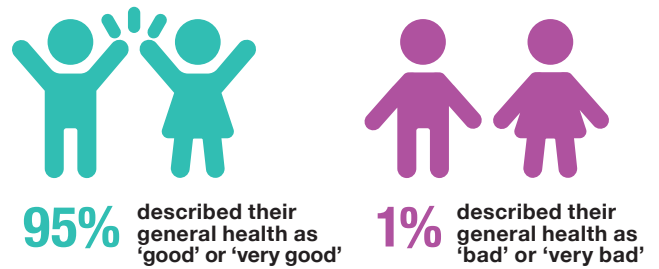
A greater proportion of men described their general health as 'good' or 'very good' in 2019.



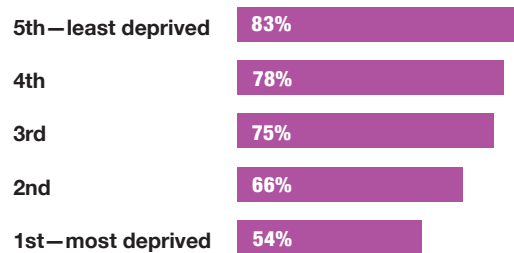
The proportion of adults who assessed their general health to be 'good' or 'very good' in 2019 decreased with age.



Among all children in 2019:



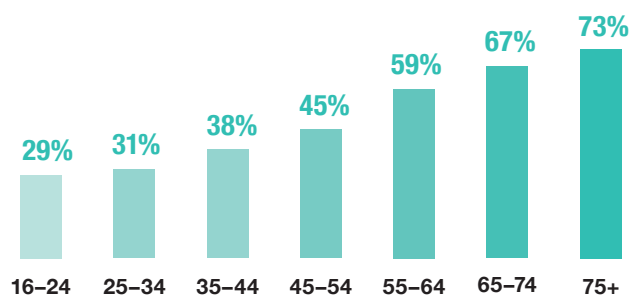
The age-standardised proportion of adults who self-assessed their general health as 'good' or 'very good' once again varied by area deprivation in 2019.



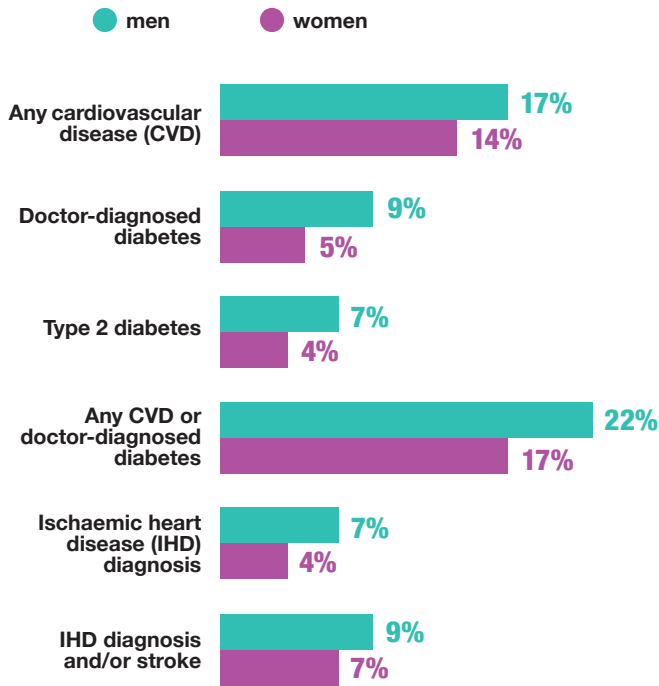
Around half of adults reported living with (limiting or non-limiting) long-term conditions.



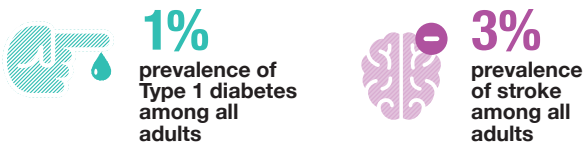
The proportion of adults with long-term conditions increased with age.



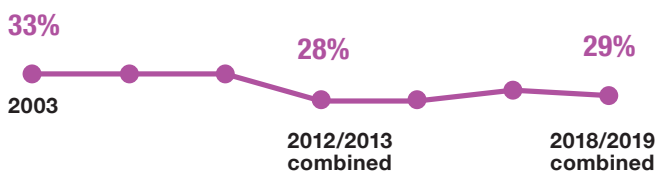
Higher proportions of men than women had:



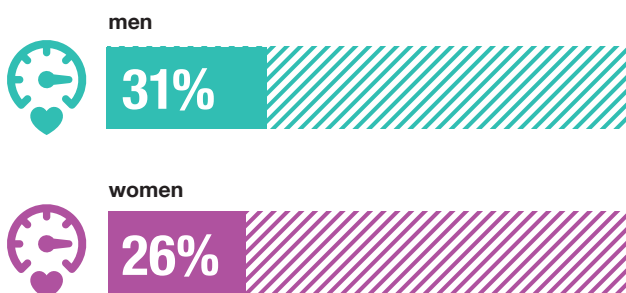
There was no variation by gender in the prevalence of Type 1 diabetes or stroke in 2019.



The proportion of adults with hypertension* has stabilised in recent years:



A higher proportion of men had hypertension than women in 2018/2019 combined.*

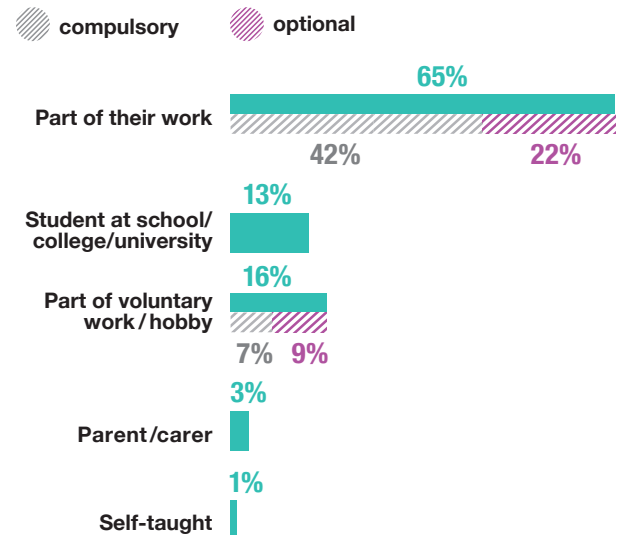


* Nurse equivalent calibrated estimates

In 2019, over half of adults reported having ever attended CPR training.



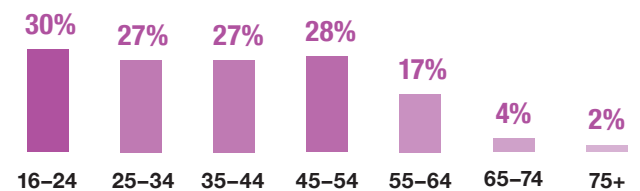
Adults who had ever attended CPR training, reported doing so as:**



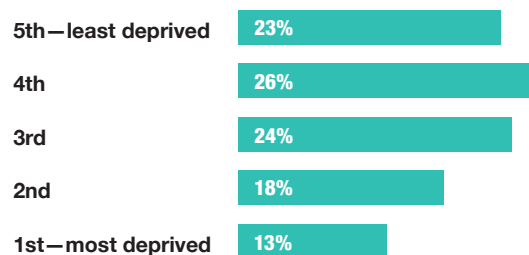
In 2019, a fifth of all adults reported attending any CPR training (original or refresher) within the past two years.



In 2019, the proportion of adults who reported attending any CPR training (original or refresher) within the past two years generally decreased with age.



Those living in the most deprived areas were less likely to have attended any CPR training in the past two years than those in the remaining quintiles.



** Combined figures may differ from individual categories due to rounding.

CHAPTER 2

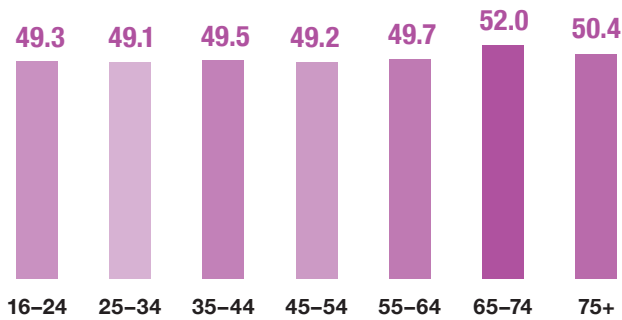
Mental Wellbeing



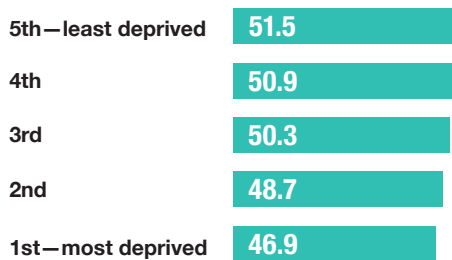
The mean WEMWBS score for adults in 2019 was 49.8.



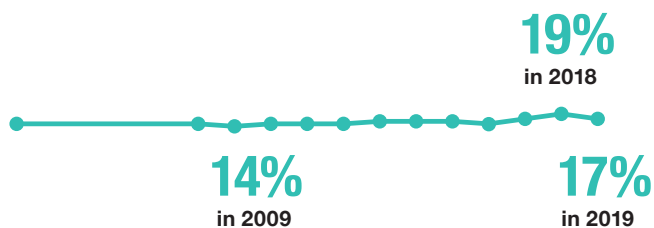
Mental wellbeing was higher amongst older than younger adults in 2019.



Differences in the WEMWBS mean scores by area deprivation continued to be evident in 2019.



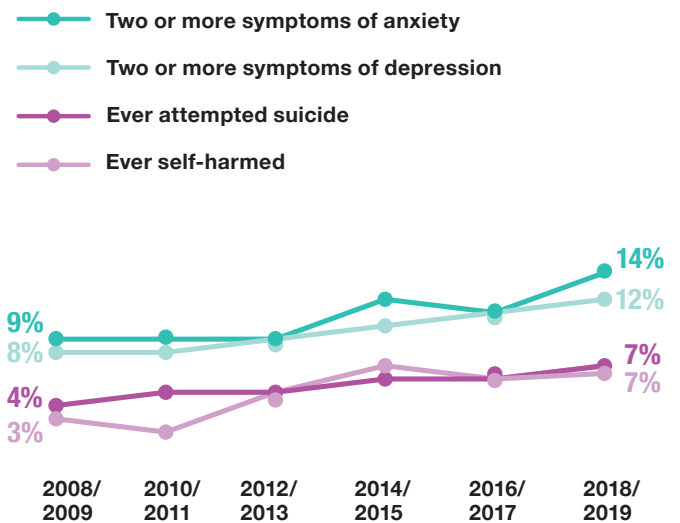
17% of adults had a GHQ-12 score of four or more* in 2019; prevalence has fluctuated between 14% and 19% since 2003.



As in previous years, women were more likely than men to record a GHQ-12 score of four or more*.



Rates of depression**, anxiety**, attempted suicide and self-harm were at their highest levels in 2018/2019 combined.

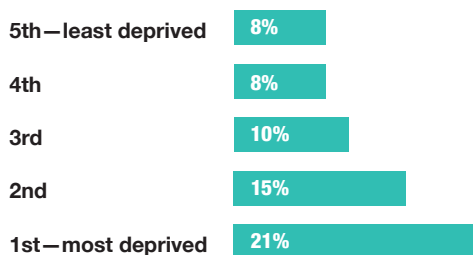


* Indicative of a possible psychiatric disorder.

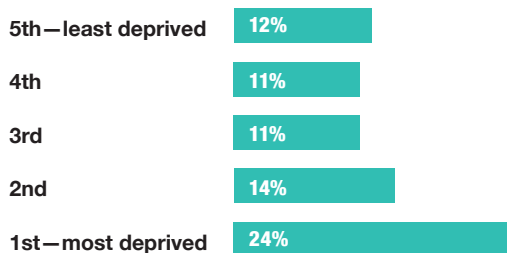
** In 2012, there was a change in mode from nurse interview to self-completion data collection.

In 2018/2019 combined, the prevalence of depression, anxiety, attempted suicide and self-harm were highest amongst those living in the most deprived areas.

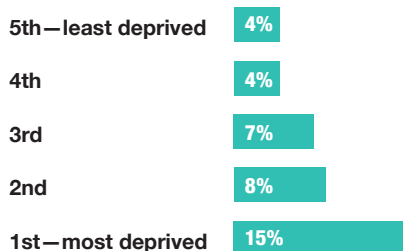
Two or more symptoms of depression



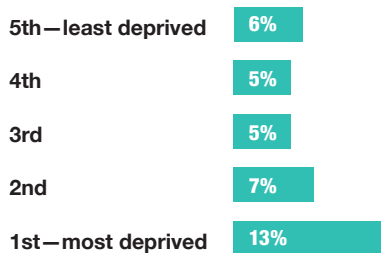
Two or more symptoms of anxiety



Ever attempted suicide



Ever self-harmed



In 2019, women were significantly more likely to have reported feeling lonely (often/all of the time) in the last two weeks compared with men.



10%
All adults

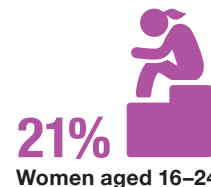
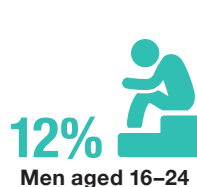
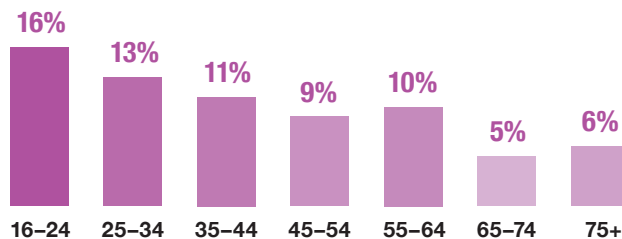


9%
Men

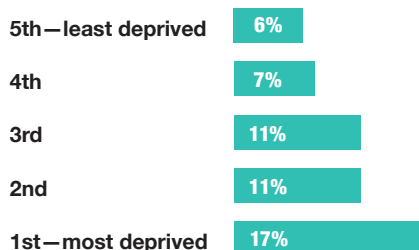


12%
Women

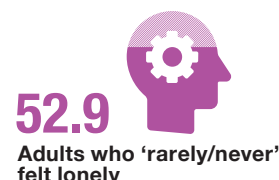
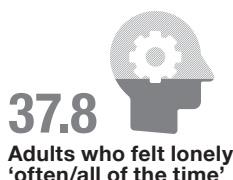
Prevalence of loneliness in the last two weeks (often/all of the time) was higher among younger people, particularly among women.



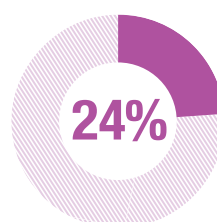
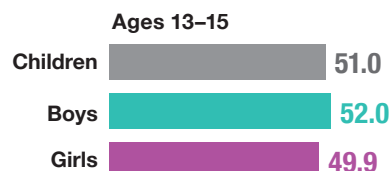
Those living in the most deprived areas were more likely to have reported feeling lonely 'often/all of the time' in the last 2 weeks than those living in the least deprived areas.



In 2019, adults who felt lonely 'often/all of the time' in the last two weeks had lower mental wellbeing (WEMWBS mean score) than those who 'rarely/never' felt lonely.



In 2016-2019 combined, boys aged 13-15 had higher mental wellbeing (WEMWBS mean score) than girls in the same age group.



of children lived with at least one parent with a GHQ-12 score of four or more* in 2019.

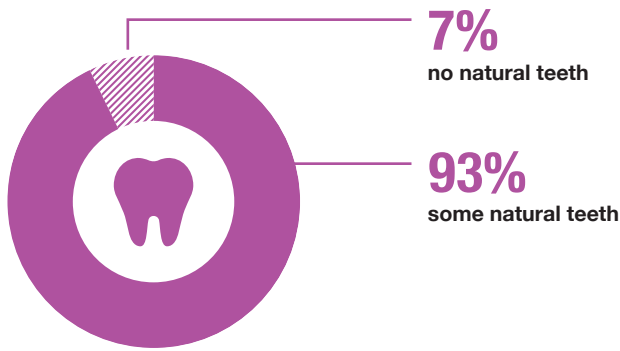
* Indicative of a possible psychiatric disorder.

CHAPTER 3

Dental Health



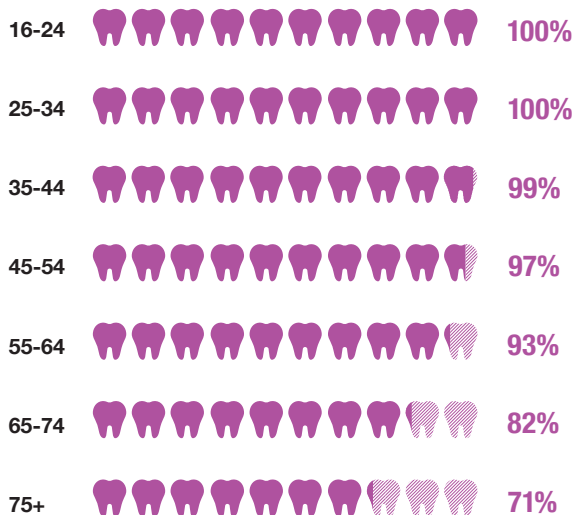
In 2019, the majority of adults in Scotland had some natural teeth while a small proportion had no natural teeth.



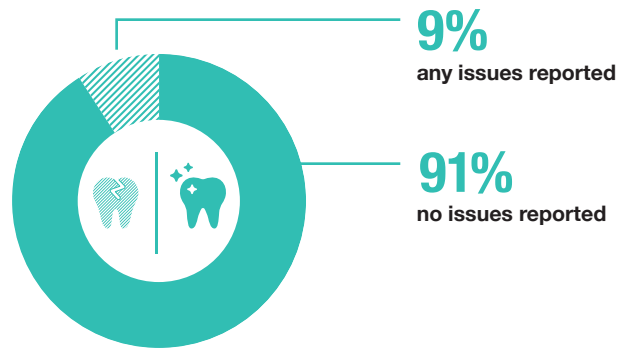
More than three quarters of adults, 78%, had 20 or more natural teeth.



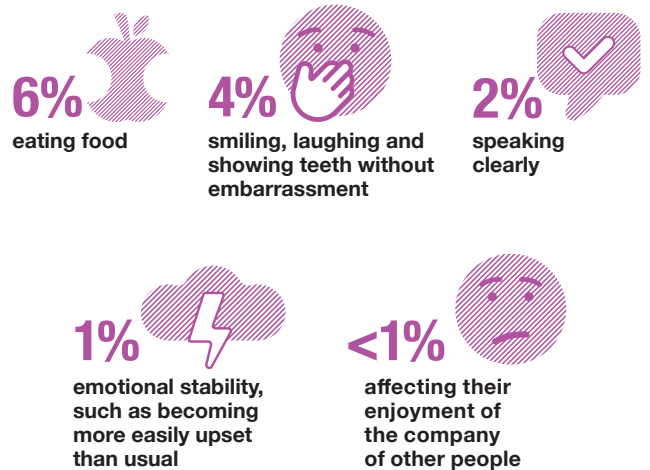
Natural teeth prevalence reduced with age from almost all adults aged 16–54 having some natural teeth to 71% of those aged 75 and over.



In 2019, most adults in Scotland reported having no issues with their mouth, teeth or dentures.



The most common issues adults had with their mouth, teeth or dentures were:



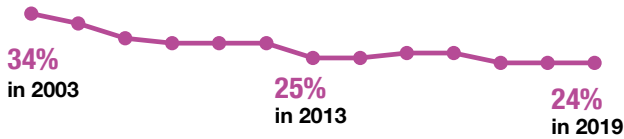
In 2019, adults who had any issues with their mouth, teeth or dentures had lower mental wellbeing (mean WEMWBS score) than those who had no such issues.



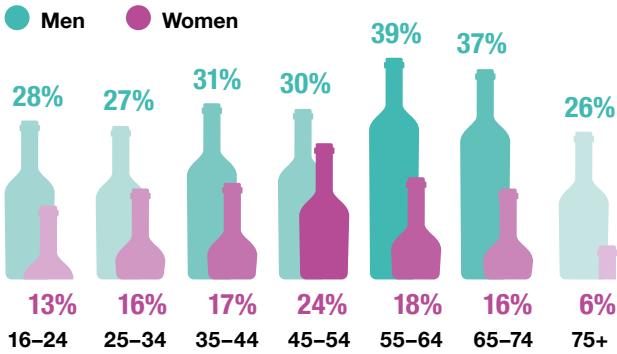
Alcohol



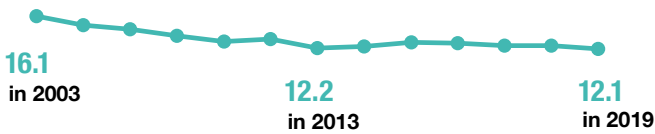
Following a significant decrease in prevalence of hazardous or harmful drinking between 2003 and 2013, prevalence for all adults has remained relatively stable.



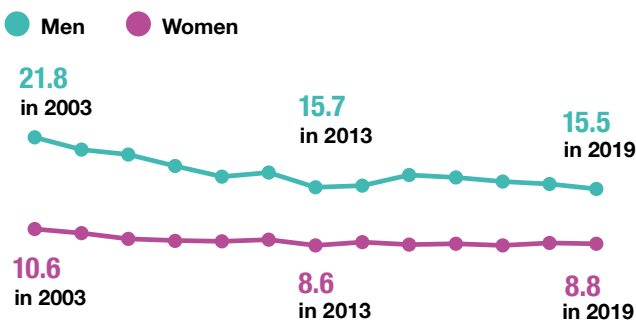
The highest prevalence of hazardous or harmful drinking for men was among those aged 55–64 and for women among those aged 45–54.



The mean number of units of alcohol consumed per week by adults has decreased over the time series to its lowest so far in 2019*.

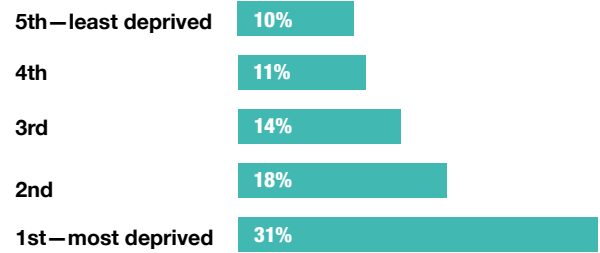


Since 2003, the mean number of units consumed per week among both men and women has decreased, with the 2019 mean the lowest in the time series for men.

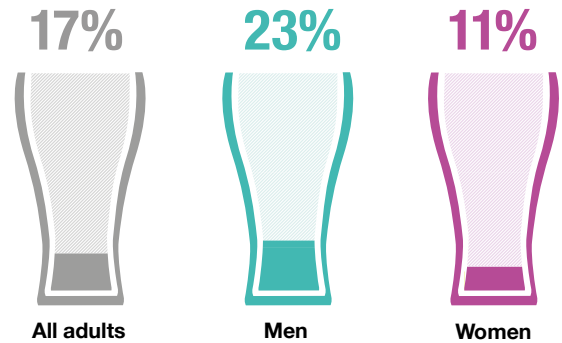


* Although not significantly different from 2018.

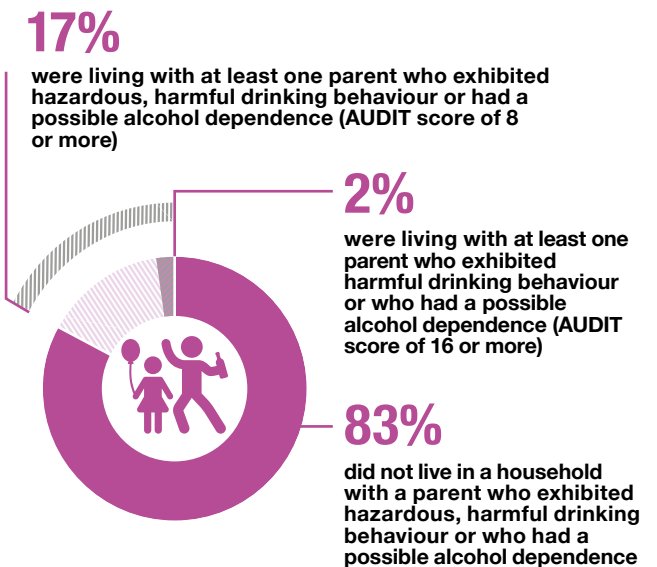
In 2019, the highest proportion of adult non-drinkers was in the most deprived areas and the lowest was in the least deprived areas.



In 2019, prevalence of hazardous, harmful or possibly dependent drinking behaviour (AUDIT scores of 8 or more) was higher for men than for women.



Among all children in 2017/2019 combined:



Smoking

Adult self-reported current smokers



17% of adults smoked in 2019, the lowest level in the time series *

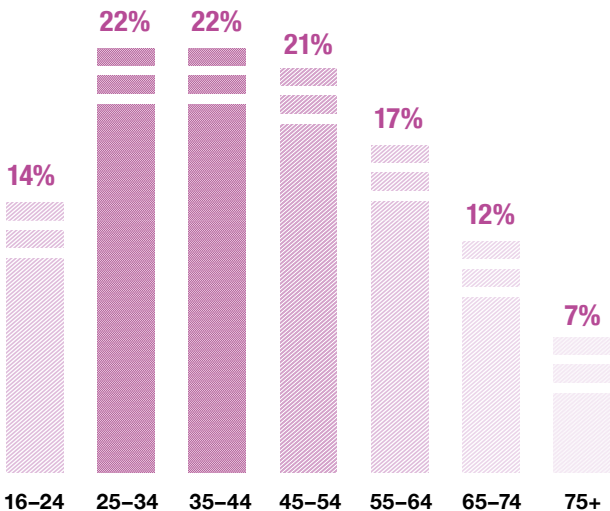
Men smoked a higher number of cigarettes per day on average than women in 2019.



13.1
mean number of cigarettes smoked per day by men

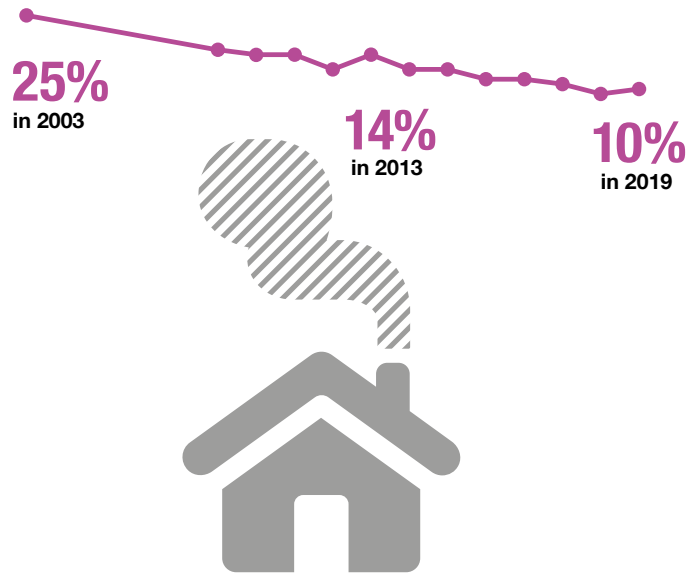
11.3
mean number of cigarettes smoked per day by women

Smoking prevalence in 2019 was highest among those aged 25–54 and lowest among those aged 75 and over.

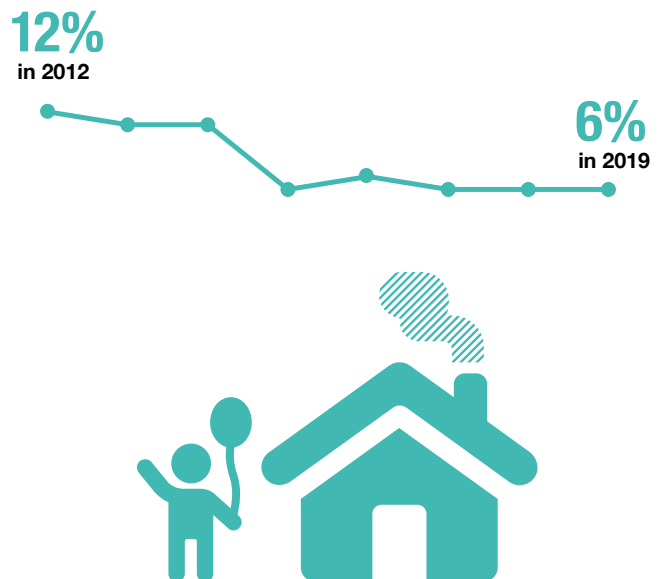


* Although not significantly different from 2018 (19%) or 2017 (18%).

The proportion of non-smokers that reported being exposed to second-hand smoke in their own or another person's home has decreased over the years.

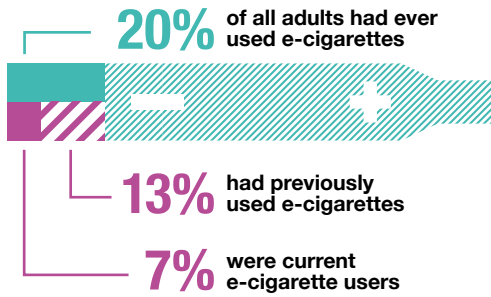


The proportion of children exposed to second-hand smoke in their own home has stabilised at 6-7% in recent years.**

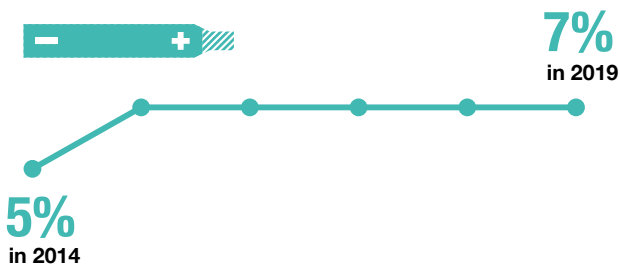


** Note that a ban on smoking in enclosed public places was introduced in Scotland in 2006.

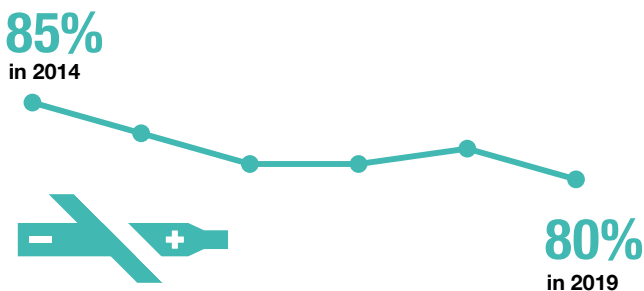
E-cigarette use in 2019



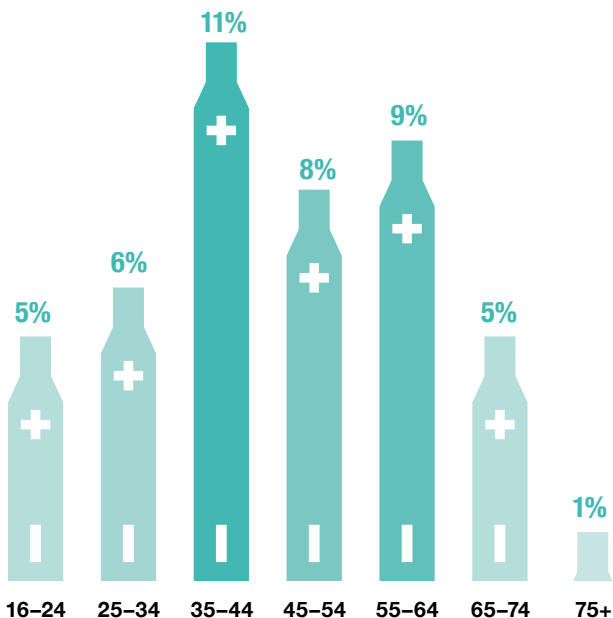
Current e-cigarette use has remained stable since 2015.



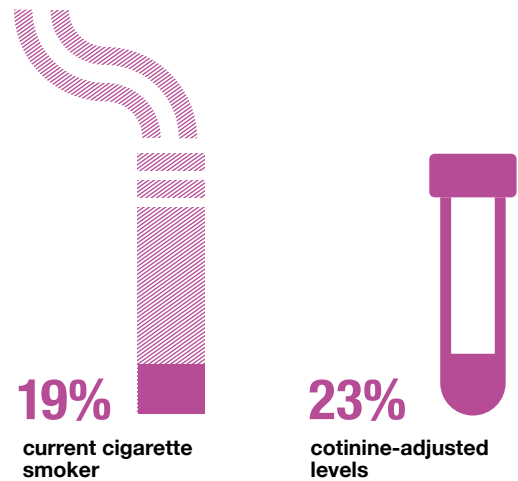
There has been an overall decrease in the percentage of adults that have never used e-cigarettes.



The highest proportion of current e-cigarette users in 2019 was among those aged 35–44 and the lowest among those aged 75 and over.



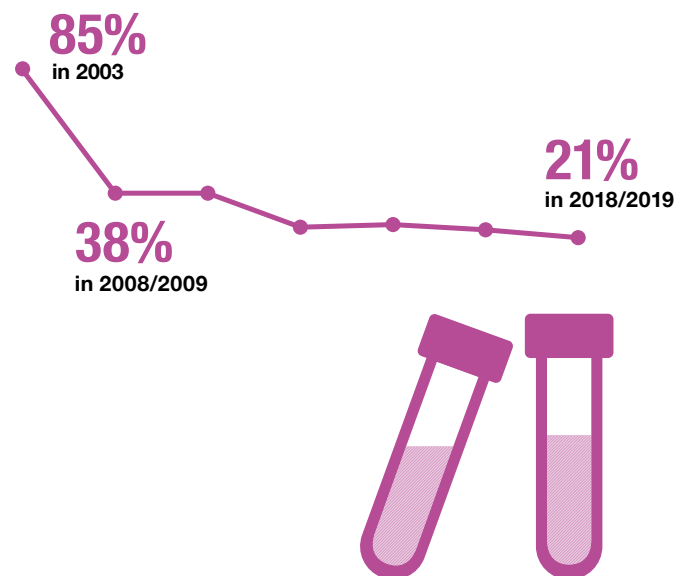
Around one in five adults self-reported as a current cigarette smoker in 2018/2019, a figure which did not vary significantly when adjusted for cotinine levels for the same period.



In 2018/2019, more than one in five non-smokers had a detectable level of cotinine in their saliva.



The proportion of non-smokers with detectable cotinine exposure decreased over time.^{***}



^{***} Note that a ban on smoking in enclosed public places was introduced in Scotland in 2006.

Diet and Obesity



In 2019, around one in five of all adults consumed five or more portions of fruit and vegetables a day*, similar to levels recorded since 2003.

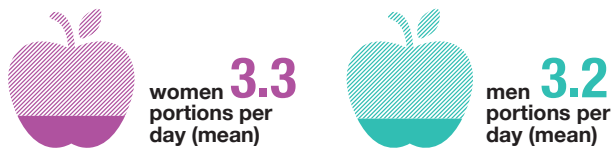


Contrary to the previous trend of women being more likely than men to consume the recommended five-a-day portions of fruit and vegetables, there was no significant difference between men and women in 2019.

Consumption of 5 or more fruit and veg portions a day in 2019



Mean portions of fruit and vegetables per day



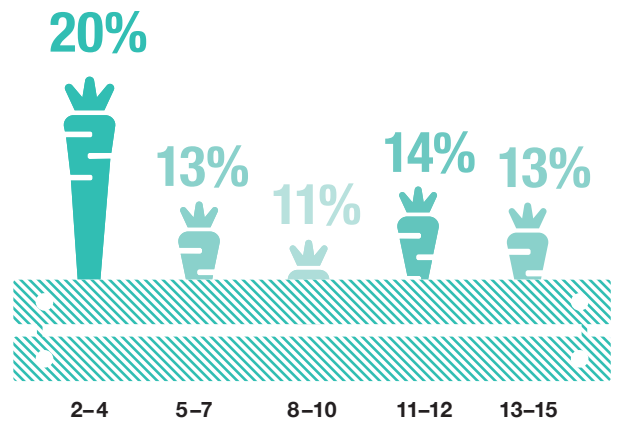
In 2019, around one in seven children aged 2–15 met the five-a-day recommendation for consumption of fruit and vegetables.



Girls were significantly more likely to meet the recommendation than boys.

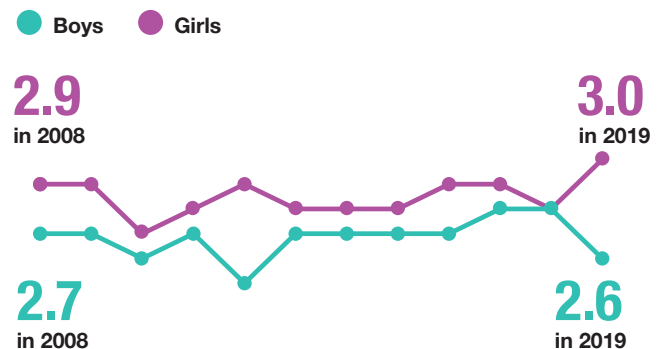


In 2019, children aged 2–4 years were more likely to consume five or more portions of fruit and vegetables on a typical day than older children.



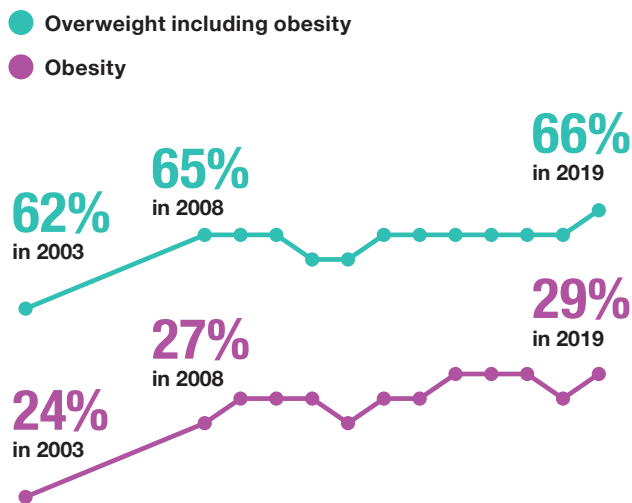
Girls have consumed higher levels of fruit and vegetables per day* than boys in most years since 2008.

Mean portions of fruit and vegetables per day

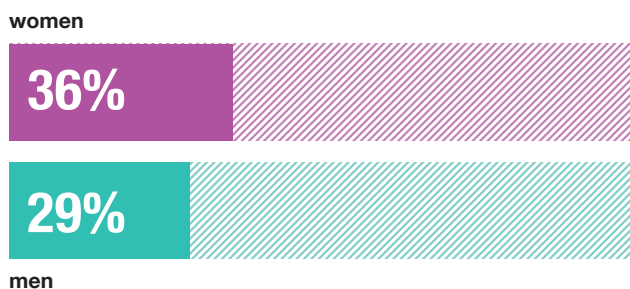


* Data based on consumption the day before the interview.

In 2019, two in three adults were overweight including obesity**, the highest prevalence in the time series since 2003. Obesity*** prevalence has remained relatively stable since 2008.



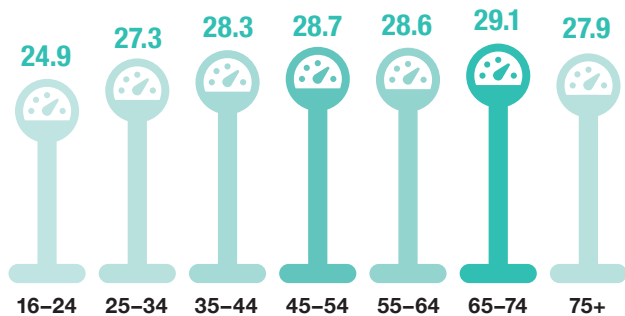
In 2019, women were more likely than men to be within the healthy weight range†.



The mean BMI of women was significantly higher than men in the youngest age group in 2019.



In 2019, mean BMI increased with age.



** BMI of 25 kg/m² or over.

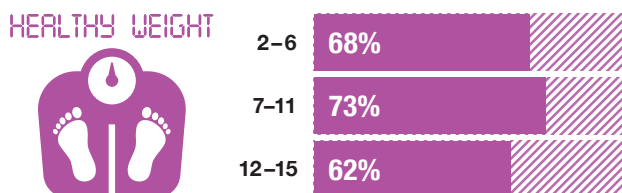
*** BMI of 30 kg/m² or over.

† BMI of 18.5 to less than 25 kg/m².

The proportion of children (aged 2–15) in the healthy weight range†† has remained fairly stable since 1998.



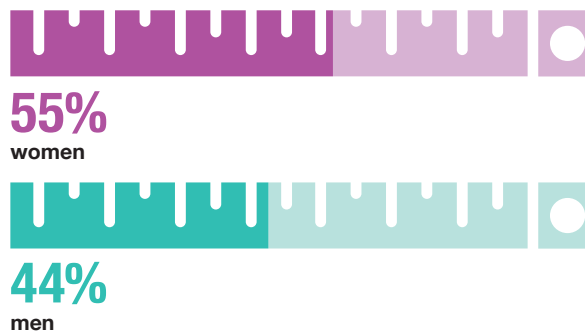
The highest proportion of children in the healthy weight range was among those aged 7–11, and the lowest among those aged 12–15.



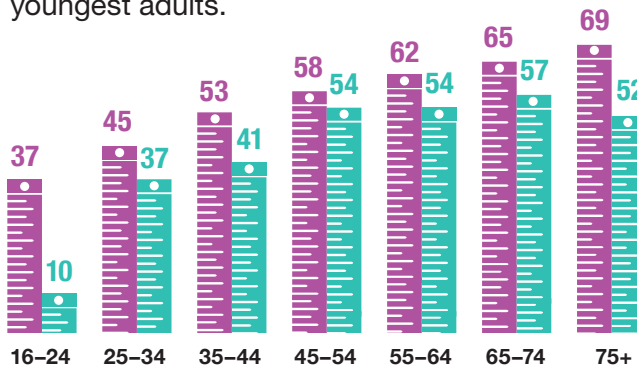
Just under a fifth of children were at risk of obesity in 2019 with similar levels observed for boys and girls.



Women were more likely than men to be categorised as 'high health risk or above' based on their BMI and waist circumference†††.



This difference was clearest among the youngest adults.

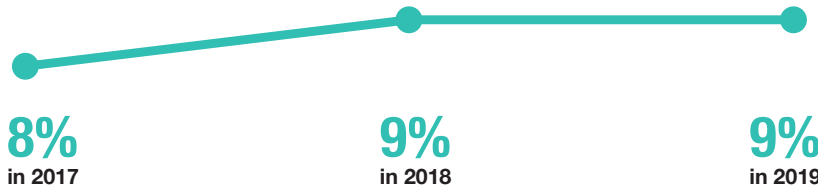


†† BMI above the 2nd percentile or below the 85th percentile.

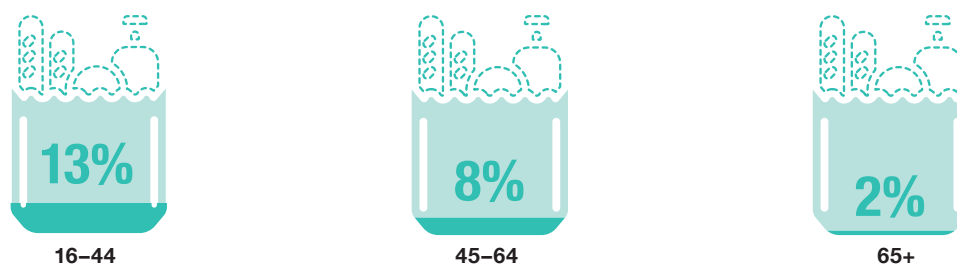
††† According to SIGN guidelines.

Food insecurity levels (as defined by being worried during the past 12 months that they would run out of food due to lack of money or resources) remained at 9% in 2019.

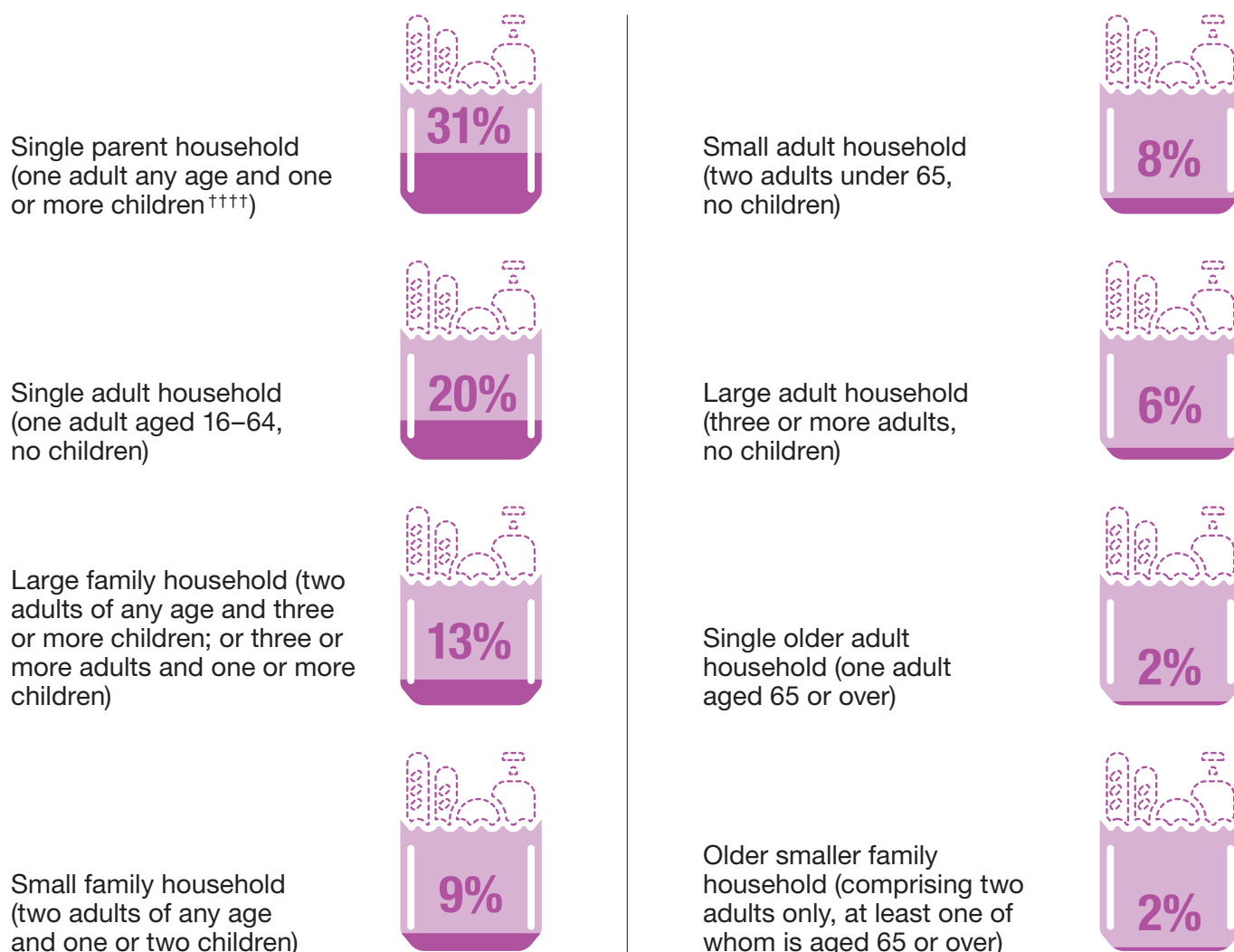
Food insecurity



Food insecurity was more prevalent among younger than older adults in 2019.



Adults living in single parent households were most likely to report being food insecure.

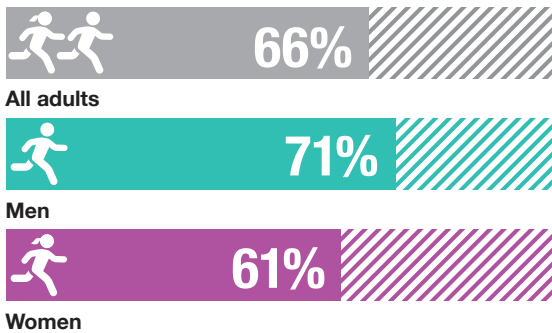


^{††††} Largely single mothers

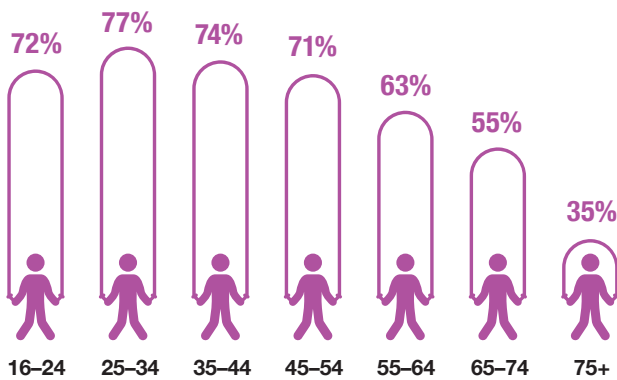
Physical Activity



Men were more likely than women to meet the moderate or vigorous physical activity guidelines (MVPA)* in 2019.

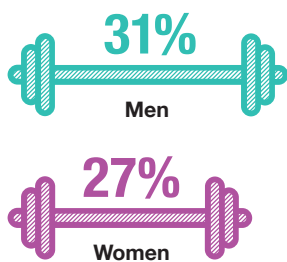


In 2019, the proportion of adults meeting the MVPA guidelines declined with age.

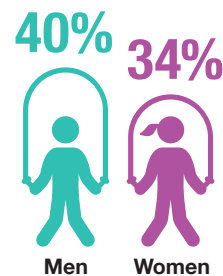


Men were more likely than women to have met:

MVPA as well as muscle strengthening guidelines**



MVPA guidelines only

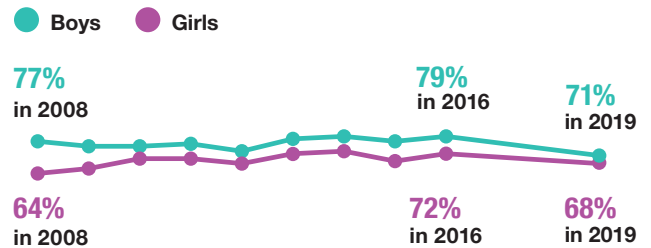


In 2019, the proportion of children (aged 2-15) who met the recommended physical activity level*** over the last seven days, was the lowest in the time series.



This decrease appears to be driven by a drop in activity levels among boys with no significant decrease recorded for girls.

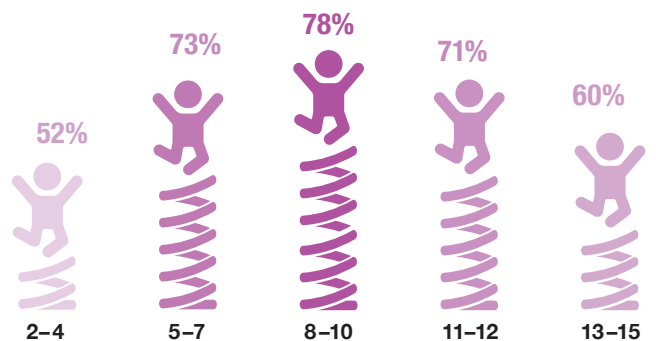
Proportion of children (2-15) meeting the physical activity guidelines



66% of all children participated in any sport in the week prior to the interview in 2019



Participation in sports varied by age.



* at least 150 minutes of moderate physical activity, 75 minutes of vigorous physical activity, or an equivalent combination of the two per week.

** muscle strengthening activity on two or more days a week.

*** an average of at least 60 minutes of activity per day in previous week. Although the recommendation applies to children aged five and over, the figures relate to those aged 2-15 for consistency with figures reported in previous years. Data is not presented for 2017 and 2018 due to differences in the way the data was collected for these years.

In 2019, adults' sedentary leisure time was significantly higher at weekends than on weekdays.



5.4
hours per day
on weekdays



6.2
hours per day
at weekends

On average, children spent more time on sedentary leisure activities at weekends than they did on weekdays.

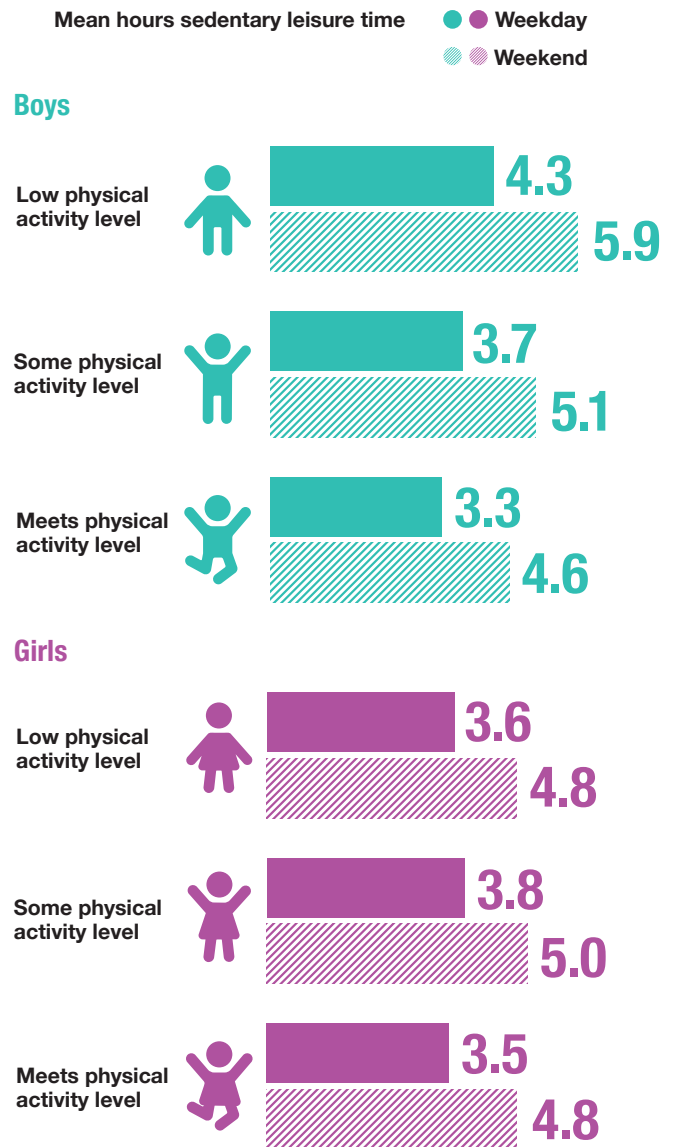


3.6
hours per day
on weekdays

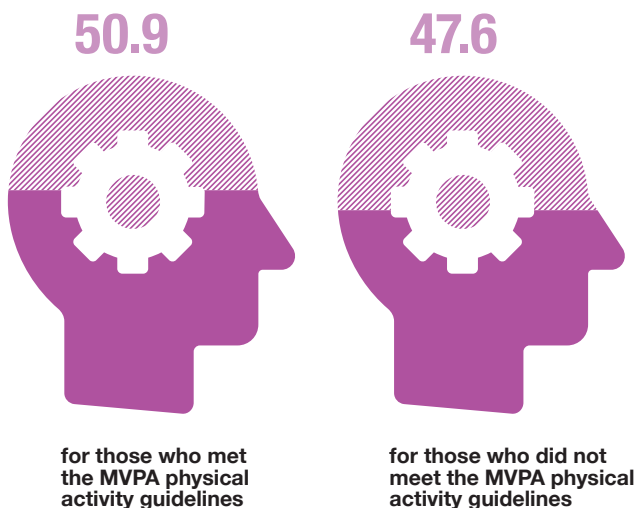


4.9
hours per day
at weekends

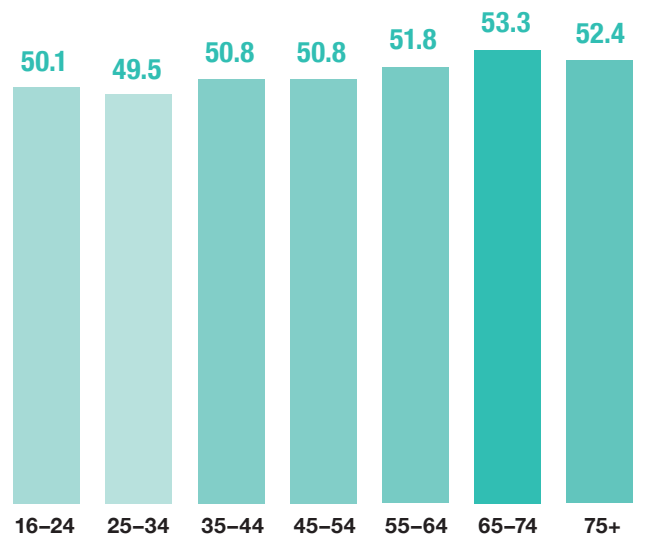
On both weekdays and weekends, the amount of time spent on sedentary activities varied for boys by physical activity levels but not for girls.



In 2019, adults who met the MVPA physical activity guidelines had a higher mental wellbeing (measured by WEMWBS) mean score than those who did not.



Mean WEMWBS scores generally increased with age among adults meeting the MVPA guidelines.



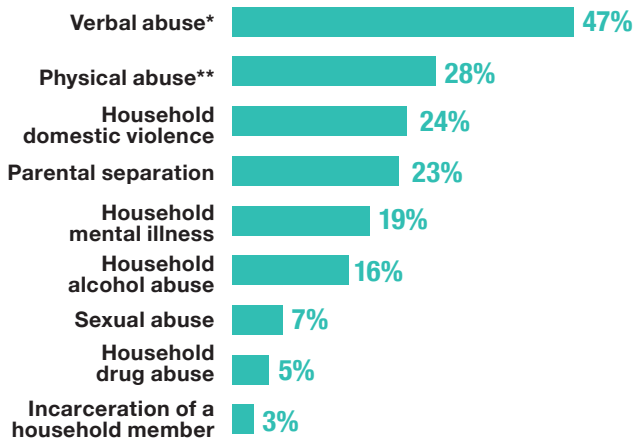
Adverse childhood experiences (ACEs)



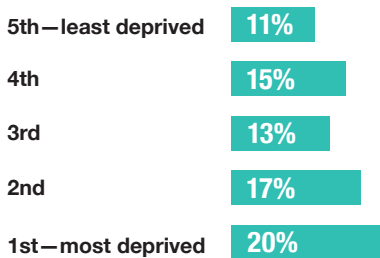
In 2019, just over one in seven adults reported four or more ACEs.



Verbal abuse was the most common ACE reported, experienced by just under half of all adults.



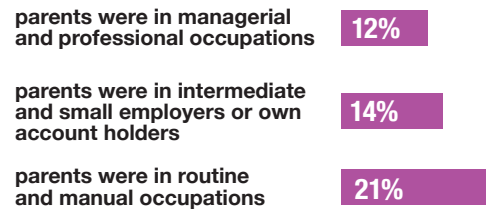
Those in the most deprived areas were almost twice as likely than those in the least deprived areas to experience four or more ACEs.



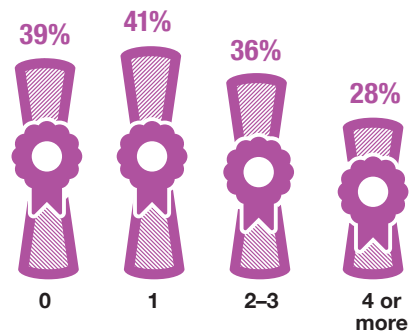
* On SHeS, verbal abuse was scored as an ACE if it was reported as happening once or more, in the Welsh and English studies verbal abuse was scored as an ACE if it was reported as happening twice or more.

** On SHeS, the physical abuse ACE did not exclude 'gentle smacking for punishment' as most other ACE surveys do.

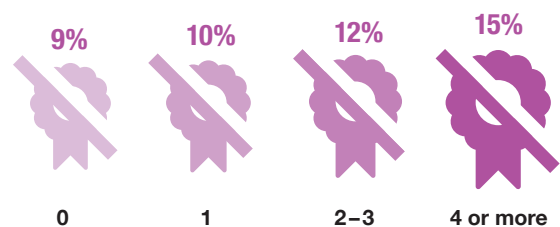
The proportion of adults reporting four or more ACEs in 2019 was higher among those whose parents were in routine and manual occupations***.



Adults who had four or more ACEs were less likely to have a degree level qualification or higher.



As the number of ACEs reported increased, so did the proportion of adults with no formal qualifications.

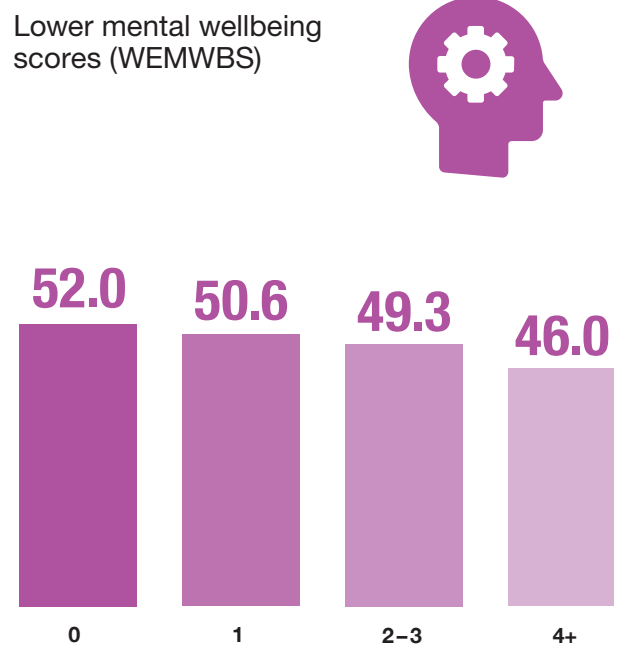
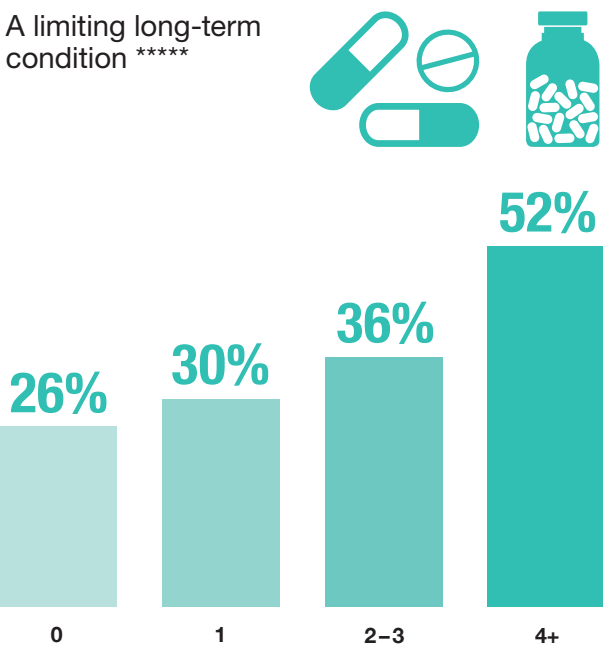
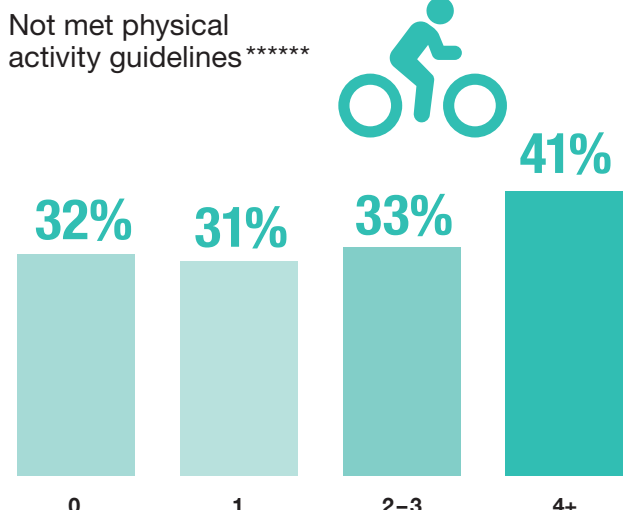
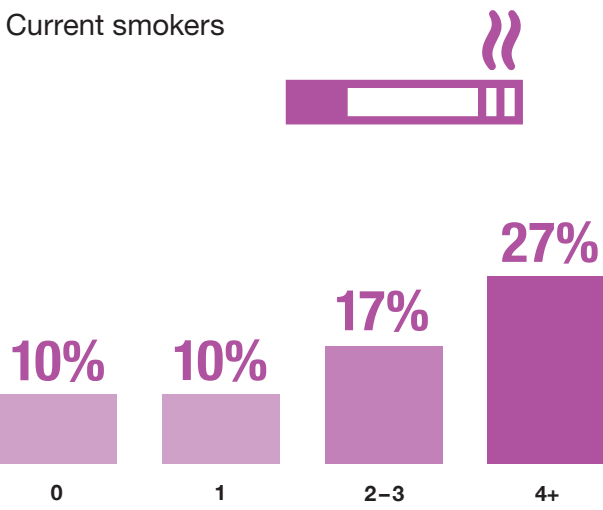
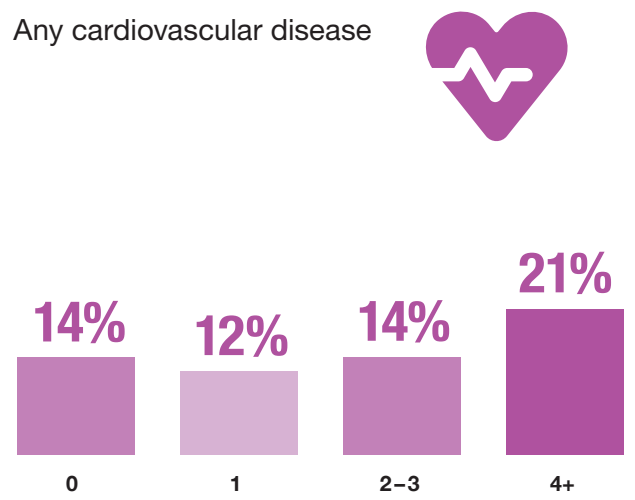
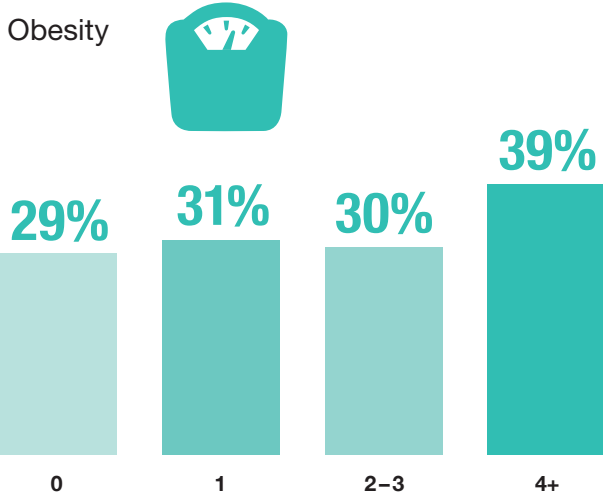


The prevalence of hazardous, harmful or possibly dependent drinking behaviour **** was higher among those who reported one or more ACE's (17–19%) than those who reported no ACE's (11%).

*** When the adult respondent was a child of about 14 years of age.

**** AUDIT scores of 8 or more.

Those who reported four or more ACEs were significantly more likely to be/have/suffer from...



***** A physical or mental health condition or illness lasting, or expected to last 12 months or more where the respondent has reported that it limited their activities in any way.

***** At least 150 minutes of moderate physical activity, 75 minutes of vigorous physical activity, or an equivalent combination of the two per week.



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