Australian Health Performance Framework: PI 1.2.1– Rates of current daily smokers, 2020

Exported from METEOR (AIHW's Metadata Online Registry)

Australian Health Performance Framework: PI 1.2.1– Rates of current daily smokers, 2020

Identifying and definitional attributes

Metadata item type:	Indicator
Indicator type:	Indicator
Short name:	AHPF PI 1.2.1–Rates of current daily smokers, 2020
Synonymous names:	Prevalence of smoking
METEOR identifier:	728290
Registration status:	Health, Standard 13/10/2021
Description:	Proportion of adults who are current daily smokers.
Rationale:	Smoking is the single most important preventable cause of ill health and death in Australia. Smoking is linked to a range of conditions including various respiratory conditions, cancers, cardiovascular diseases, type 2 diabetes and hip fractures.
Indicator set:	Australian Health Performance Framework, 2020 Health, Superseded 11/07/2023

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. This excludes chewing tobacco, electronic cigarettes (and similar) 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 are calculated for rates.
Computation:	100 × (Numerator ÷ Denominator)
Numerator:	Number of persons aged 18 and over who smoke tobacco every day

Numerator data elements:

Data Element / Data Set

Data Element

Person—age

Data Source

[ABS 2014-15 National Aboriginal and Torres Strait Islander Social Survey (NATSISS)](#)

Guide for use

Data source type: Survey

Data Element / Data Set

Data Element

Person—tobacco smoking status

Data Source

[ABS 2014-15 National Aboriginal and Torres Strait Islander Social Survey (NATSISS)](#)

Guide for use

Data source type: Survey

Data Element / Data Set

Data Element

Person—age

Data Source

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

Guide for use

Data source type: Survey

Data Element / Data Set

Data Element

Person—tobacco smoking status

Data Source

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

Guide for use

Data source type: Survey

Denominator: Population aged 18 and over

Denominator data elements:

Data Element / Data Set

Data Element

Person—age

Data Source

[ABS 2014-15 National Aboriginal and Torres Strait Islander Social Survey (NATSISS)](#)

Guide for use

Data source type: Survey

Data Element / Data Set

Data Element

Person—age

Data Source

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

Guide for use

Data source type: Survey

Data Element / Data Set

Data Element

Person—Indigenous status

Data Source

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

Guide for use

Data source type: Survey

Disaggregation:

1989–90, 1995, 2001, 2004–05, 2007–08, 2011–12, 2014–15, 2017–18—Nationally, by:

- Sex.

2017–18—Nationally, by:

- Sex and age group
- Remoteness (Australian Statistical Geography Standard (ASGS) 2016 Remoteness Structure)
- SEIFA IRSD quintile
- Disability status (not reported).

2014–15—Nationally, by:

- Indigenous status (not reported).

2001, 2004–05, 2007–08, 2011–12, 2014–15, 2017–18—State and territory.

2014–15, 2017–18—Primary Health Network (PHN).

Some disaggregations may result in numbers too small for publication.

Disaggregation data elements:

Data Element / Data Set

Data Element

Person—age

Data Source

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

Guide for use

Data source type: Survey

Data Element / Data Set

Data Element

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 IRSD

Data Element / Data Set

Data Element

Person—sex

Data Source

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

Guide for use

Data source type: Survey

Comments:

Most recent data available for 2020 Australian Health Performance Framework reporting: 2017–18 (Total population, Non-Indigenous: NHS); 2018–19 (Indigenous only: NATSISS).

Data for 1989–90, 1995, 2001, 2004–05, 2007–08, 2011–12 and 2014–15 were obtained from the National Health Surveys (and the previous Australian Health Surveys) run in respect of these years. Similar data elements were used to those listed above for the 2017–18 NHS.

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.

Representational attributes

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

Indicator conceptual framework

Framework and dimensions:

[2. Health behaviours](#)

Data source attributes

Data sources:

Data Source

[ABS 2014-15 National Aboriginal and Torres Strait Islander Social Survey (NATSISS)](#)

Frequency

Every 6 years

Data custodian

Australian Bureau of Statistics

Data Source

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

Frequency

Every 3 years

Data custodian

Australian Bureau of Statistics

Accountability attributes

Reporting requirements:	Australian Health Performance Framework
Organisation responsible for providing data:	Australian Bureau of Statistics
International comparison:	This indicator relates to Indicators 9 and 10 in the WHO Global Action Plan for the Prevention and Control of Noncommunicable Diseases 2013–2020 (https://www.who.int/nmh/events/ncd_action_plan/en/).

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
Reference documents:	AIHW 2018, Smoking overview. Canberra: AIHW. Viewed 6 March 2019, https://www.aihw.gov.au/reports-data/behaviours-risk-factors/smoking/overview.

Relational attributes

Related metadata references:

Supersedes [Australian Health Performance Framework: PI 1.2.1–Rates of current daily smokers, 2019](#)
[Health](#), Superseded 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 [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](#), Superseded 01/12/2020

See also [Australian Health Performance Framework: PI 2.1.6–Potentially avoidable deaths, 2020](#)
[Health](#), Superseded 31/03/2023

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, 2020](#)
[Health](#), Standard 13/03/2020

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, 2020](#)
[Health](#), Standard 13/03/2020

See also [National Healthcare Agreement: PI 03–Prevalence of overweight and obesity, 2022](#)
[Health](#), Standard 24/09/2021

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

See also [National Healthcare Agreement: PI 04–Rates of current daily smokers, 2022](#)
[Health](#), Standard 24/09/2021

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

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, 2020](#)
[Health](#), Standard 13/03/2020

See also [National Healthcare Agreement: PI 16–Potentially avoidable deaths, 2022](#)
[Health](#), Standard 24/09/2021