

AIA Vitality

Wellbeing Index

MAY 2020



AIA Vitality

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FOREWORD

At AIA Australia, our purpose is to Make a Difference in people's lives and our vision is to champion Australia and New Zealand to be the healthiest and best protected nations in the world.

Cardiovascular diseases, cancer, chronic respiratory diseases and diabetes account for 90 percent of premature deaths in Australia and New Zealand. Although this number appears high, there is good news: all of these can be greatly influenced by our lifestyle behaviours and small positive changes we can make in our day-to-day lives.

The AIA Vitality Wellbeing Index is AIA Australia's inaugural report produced as part of our commitment to ongoing research to better understand the health of the nation and the lifestyle behaviours that can influence this. This will allow us to identify opportunities to help Australians live Healthier, Longer, Better Lives.

When it comes to health, the reality is that change is never an immediate transformation; it's a journey. Our AIA Vitality program is about the little things – the small healthy choices made daily that can have a big impact on our wellbeing over time.

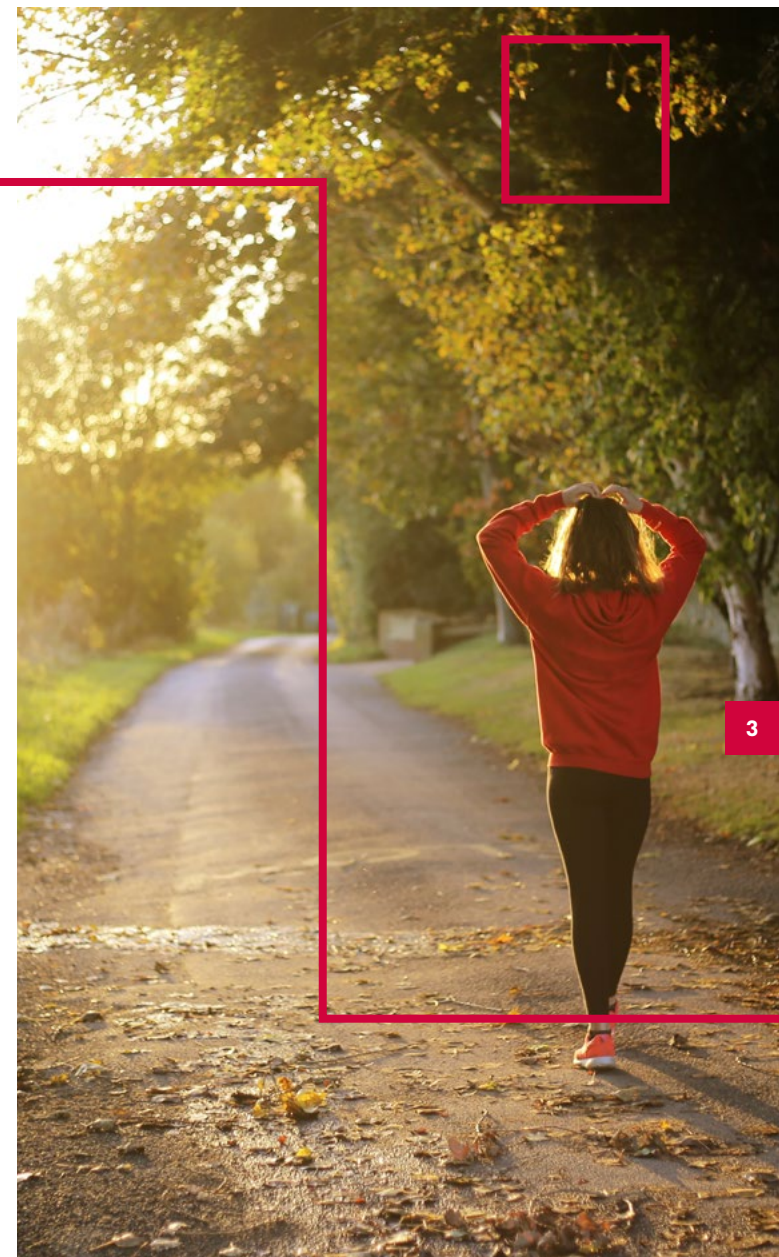
AIA Vitality is a proven, global, science-backed program, which uses behavioural economics to educate, support and incentivise members to better understand and improve their health.

I'm excited to see how through the AIA Vitality Wellbeing Index and AIA Vitality more broadly, we can all start to take small steps towards a healthier future, together.



Take care,

Damien Mu
CEO and Managing Director
AIA Australia and New Zealand



DEFINING HEALTH AND WELLBEING

Physical and mental wellbeing are measured, for these purposes, through four main areas including nutrition, physical activity, mental wellbeing and prevention.

At AIA Vitality, we refer to these four categories as the wellness pillars: Eat Well, Move Well, Think Well and Plan Well. The AIA Vitality program uses proven theories of behavioural economics to educate, support and incentivise members to better understand their health and make small changes that will lead to significant health improvements over time.

Health, as it is to be defined for this report, “is a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity.”

—
World Health Organization



EAT WELL

Caring for your body with food that makes you feel good.



MOVE WELL

Finding your further when it comes to exercise.



THINK WELL

Cultivating a healthy frame of mind.



PLAN WELL

Planning for your future, because a good tomorrow starts today.

INTRODUCING THE AIA VITALITY WELLBEING INDEX

The AIA Vitality Wellbeing Index is AIA's inaugural report, in what will become an ongoing research series, into the wellbeing of Australians, centring on the 4-4-90 model. This model demonstrates how four behaviours impact four non-communicable diseases, which lead to 90 percent of premature deaths in Australia.

Non-communicable diseases (NCDs), also known as chronic diseases of lifestyle, are the leading cause of death in our country. The four main NCDs are: cardiovascular disease, diabetes, respiratory disease and cancer.

The cause of these often fatal diseases is to a large extent driven by four lifestyle factors which include insufficient physical activity, unhealthy diet, tobacco use and the harmful use of alcohol.

The AIA Vitality Wellbeing Index is a snapshot of Australia's current health and wellbeing which has been compiled in order to better understand the nation's lifestyle behaviours and how they influence our overall health. As part of this report, AIA has also identified opportunities for change and development - highlighting a few of the many incredible initiatives that are helping to improve Australia's health and wellbeing.

4 MAIN RISK FACTORS



PHYSICAL
INACTIVITY



UNHEALTHY
DIET



SMOKING



EXCESS
ALCOHOL

4 NON-COMMUNICABLE DISEASES



RESPIRATORY
DISEASE



DIABETES



CANCER



CARDIOVASCULAR
DISEASE

LEAD TO

RESPONSIBLE FOR



70%
OF DEATHS
WORLDWIDE



90%
OF DEATHS
IN AUSTRALIA

Source: World Health Organization – NCD Country Profiles, 2018



THE METHODOLOGY

The AIA Vitality Wellbeing Index uses national health data to rank Australia's States and Territories in six categories that contribute to overall health and wellbeing and collectively contribute to the four wellness pillars.

Data for the AIA Vitality Wellbeing Index was collected from reliable, publicly available sources to assess these six categories of health and wellbeing. Each state and territory was then ranked against key indicators to show the best performers within each category, as well as overall.

AIA has also taken insights from its AIA Vitality member base to layer further findings throughout the AIA Vitality Wellbeing Index. AIA Vitality data gives a picture of how members of the program fared across the country.



BEST IN THE NATION

OVERALL WELLBEING



OVERALL WELLBEING BEST IN THE NATION

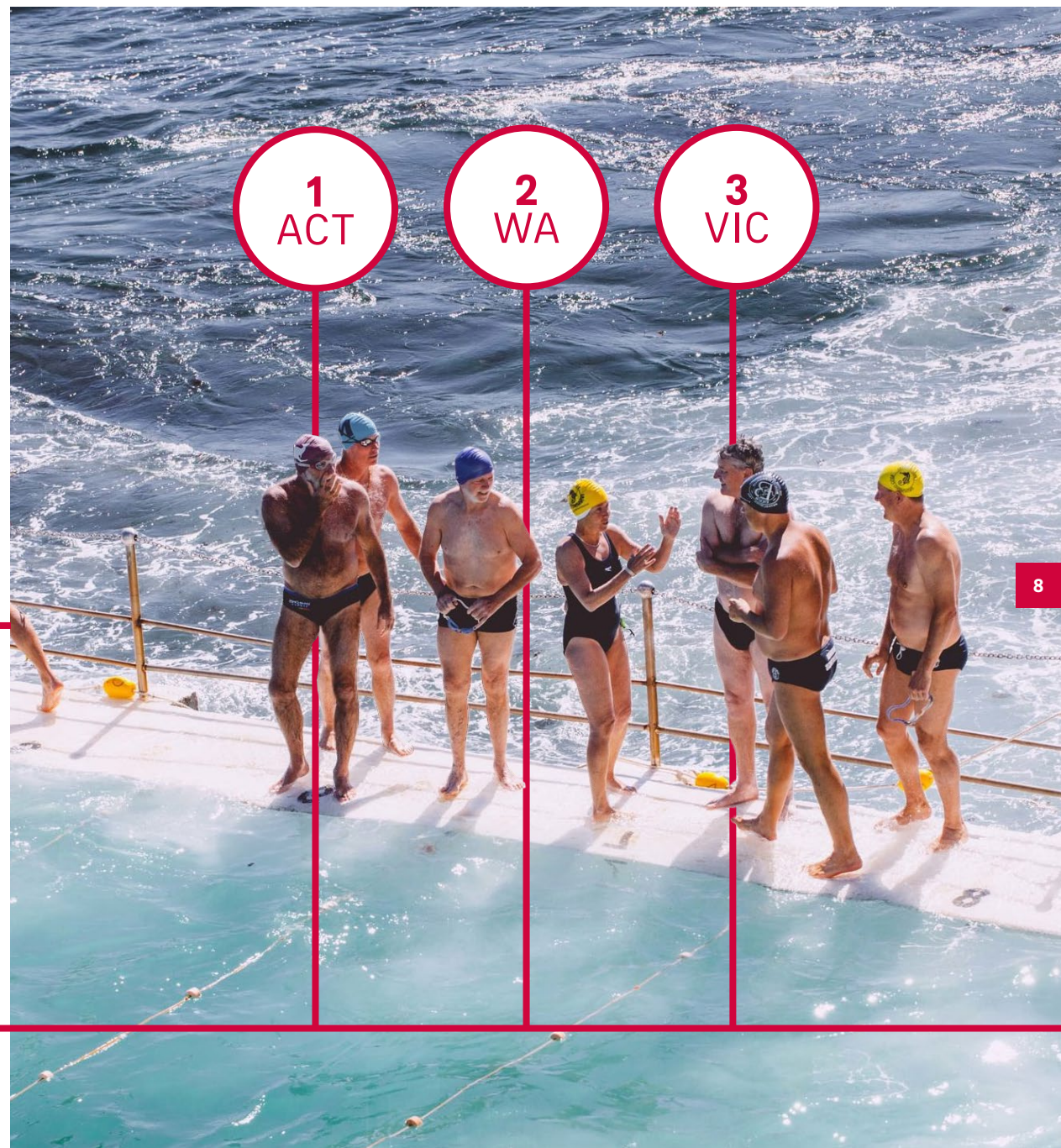
Ranking Australia's States and Territories in the six key indicators that contribute to overall health and wellbeing, the AIA Vitality Wellbeing Index has seen the **ACT** take out the national overall wellbeing ranking, followed closely by **WA** and **VIC**.

The nation's capital outperformed the other States and Territories in three of the six health and wellbeing indicators – including risky behaviours, physical activity and mental wellbeing.

AIA VITALITY
WELLBEING INDEX



TOP OVERALL PERFORMERS



THE RESULTS

PHYSICAL ACTIVITY



PHYSICAL ACTIVITY RESULTS

Physical activity is critically important for physical and mental wellbeing. Any activity is better than none in terms of reducing health risks whether this is incidental physical activity, such as active transport, or as planned exercise or sport such as playing in your local netball team. The healthy physical activity recommendations are to undertake at least 150 minutes of physical activity at a moderate intensity per week.

The AIA Vitality Wellbeing Index ranking factored in levels of complete inactivity and levels of activity versus the healthy guidelines to determine which States and Territories performed the best.

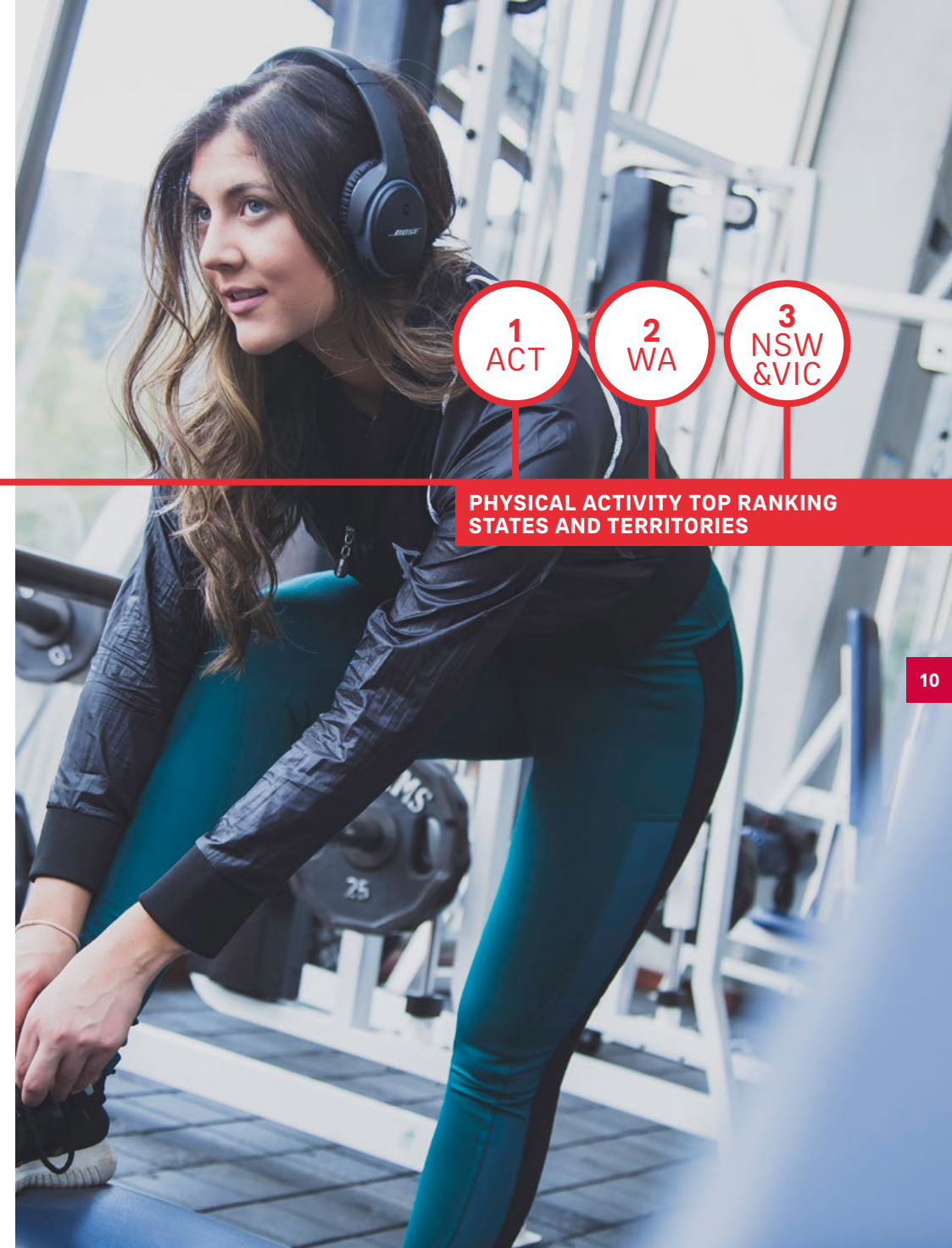
ACT CAME OUT AT THE TOP OF THIS CATEGORY, BASED ON HAVING THE:

11%

Lowest proportion of completely inactive people, at 11 percent of the population.¹

18%

Highest proportion of population meeting the guidelines – one in five or 18 percent.¹



PHYSICAL ACTIVITY TOP RANKING STATES AND TERRITORIES



PHYSICAL ACTIVITY INSIGHTS



ACT



37%



The ACT had the highest proportion of people who participated in **organised sport** (at 37 percent), while QLD had the lowest (at 23 percent).⁴



The ACT had the most people – close to one in two – that **used a bicycle** in the previous year for transport.

47%

In NSW, less than one in three people used a bicycle in the previous year, which was the lowest proportion.⁵

HOW DO AIA VITALITY MEMBERS COMPARE?



AIA Vitality members are incentivised to log steps and receive points when reaching 7,500 and 12,500 steps. The recommendation is a minimum 10,000 steps per day.



NSW had the highest number of members who logged more than 7,500 **steps per day**, with WA having the lowest proportion.



TAS members ranked first when it came to meeting their **physical activity recommendations** (at least 150 minutes per week), while ACT had the lowest number of members meeting these recommendations.



WA members travelled the **longest distance** (most kilometres) during their exercise sessions - averaging 7kms per session.



ACT members **burned the most kilocalories** during their exercise sessions at an average of 343 kilocalories per session.





CASE STUDY

YOUR MOVE WANNEROO (WA)

The award-winning 'Your Move' program has engaged residents across metropolitan Perth by offering personalised coaching information about transport choices. The 'Your Move Wanneroo' project, developed by the Department of Transport in conjunction with the former Department of Sport and Recreation and the City of Wanneroo, ran from February–November 2015.

Engagement strategies included free fitness focused welcome packs, coaching sessions and SmartRider public transport trials. 'Your Move Wanneroo' encouraged participants to increase trips taken on foot and by bicycle which resulted in 59 percent of participants achieving their physical activity goals with an average increase in physical activity of nine minutes per day.



CASE STUDY

ACTIVE GEELONG (VIC)

Active Geelong collaborates with workplaces, local GPs and health professionals as well as the wider community to increase physical activity in the Geelong region. They achieve this through innovative methods to increase access, providing new opportunities and support activities that promote physical activity. Active Geelong's collective movement are on a mission to:

- Make Geelong workplaces the most active in Australia by 2022
- Make Geelong GPs the most actively committed to promoting physical activity in Australia by 2022
- Ensure every person gets their minimum daily dose of physical activity, every day by 2025
- Be recognised as a movement that embraces the whole community



A NOTE FROM:

DR JASON THOMPSON

Transport, Health and Urban Design Research Hub
Melbourne School of Design, Faculty of Architecture, Building & Planning
The University of Melbourne

Cities around the world are dealing with the consequences of changing population demographics and policies that have failed to effectively manage the relationships between land-use, mobility, and population health.

By 2050, the populations of Australia's four largest cities will be similar to Australia's current total population. The future design of cities in which the world's seven billion city dwellers will live, work, and play will be crucial to **increasing global productivity and reducing the prevalence and costs associated with non-communicable diseases and injury.**⁶

Research clearly shows that **population health and productivity is influenced by where people live and the quality of their surroundings and environment.** Practical changes to urban design can therefore assist communities with moving toward more sustainable and more productive lives.

Death and injury due to motor vehicle crashes is the world's fifth leading cause of mortality and morbidity. Added to this burden is escalating exposure to traffic-related air pollution and the costs associated with managing a predominantly private motor vehicle transport system. **Urban design interventions** that can reduce dependence on private vehicle transport, without creating reductions in mobility or productivity, could be essential for **preventing environmental and public health issues facing 21st century cities.**

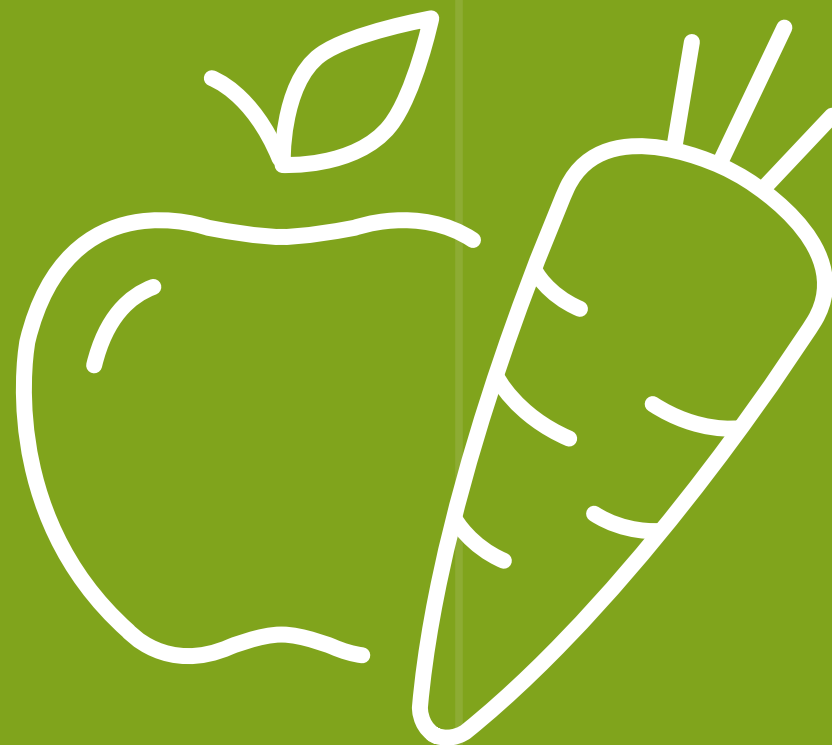
Associated with continued population growth are the ever-increasing demands on transport systems. Several governments' increased emphasis on the need to integrate transport and land-use planning⁷ acknowledges that **land-use decisions significantly influence transport options.** The increasing reliance on private motorised transport has resulted in declines in physical activity and increases in air pollution, noise, and risk of injury from motor vehicle crashes. This combination produces higher rates of chronic disease and injury than are necessary: **new urban mobility in which transport policies encourage safer and healthier walking, cycling, and public transport options** are possible and now being supported by cities across many high-income countries who are recognising their considerable public health benefits.

For city planners and government bodies with the power to influence the health of rapidly expanding cities and increasingly motorised populations, **minimising health risk exposures while maintaining or enhancing the mobility of city residents needs to be a priority.** At the same time, these bodies need to **ensure the provision of safe walking and cycling infrastructure.** This highlights the opportunities for policymakers to positively influence the overall health of city populations.⁸



THE RESULTS

NUTRITION



NUTRITION RESULTS

Ever heard the phrase you are what you eat? Well, there's truth in that statement. A healthy diet reduces health risks by prioritising nutrient-dense foods that protect health and minimising foods that aren't as beneficial to our health.

The Australian Dietary Guidelines (www.eatforhealth.gov.au) recommend two pieces of fruit and between 5 and 7.5 vegetables a day as part of a healthy diet. The AIA Vitality Wellbeing Index looked at which States and Territories are meeting these recommendations and which are avoiding sugary drinks.

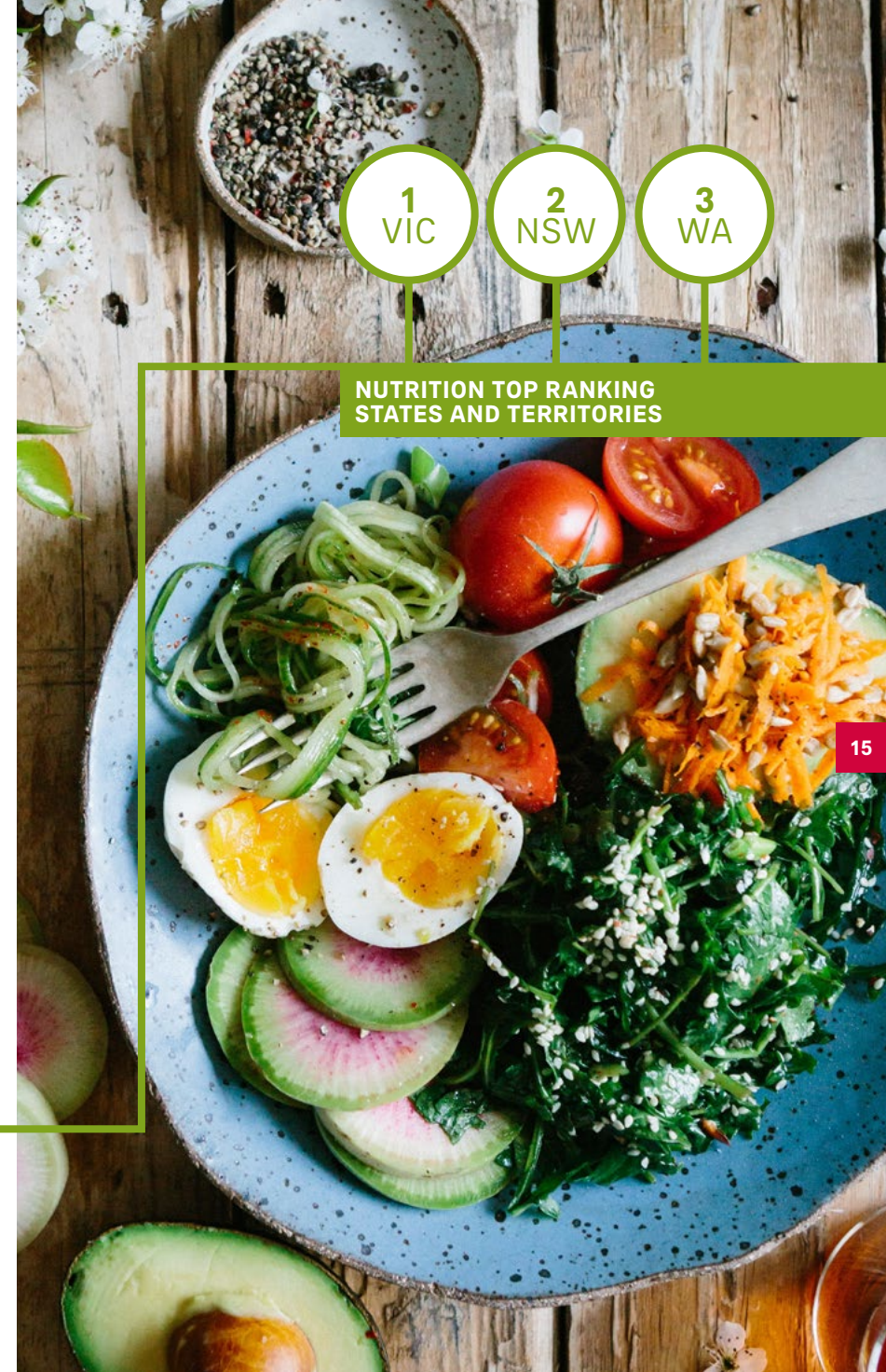
VIC TOOK OUT THE TOP RANKING IN THE NUTRITION CATEGORY BASED ON HAVING:



The second highest proportion of population meeting **daily fruit recommendations**, at 52 percent.¹

The fourth highest proportion of population meeting **daily vegetable recommendations**, at 8 percent.¹

The second highest proportion of population avoiding sugary drinks – only 7 in 100 people **consumed sugary drinks daily**.¹



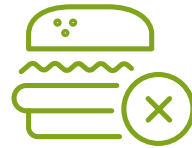
NUTRITION TOP RANKING STATES AND TERRITORIES

- 1 VIC
- 2 NSW
- 3 WA



NUTRITION INSIGHTS

WA has the lowest number of McDonalds and KFC outlets per 1000 people.⁹



HOW DO AIA VITALITY MEMBERS COMPARE?



WA had the highest proportion of members meeting the **daily fruit recommendations**.



ACT had the highest proportion of members meeting the **daily vegetable recommendations**.



WA had the highest proportion of members **avoiding sugary drinks**.

AIA VITALITY NUTRITION GUIDELINES

As part of an overall lifestyle, the principles of healthy eating include choosing whole foods over processed foods and limiting non-nutritious, health-harming options. AIA Vitality encourages members to achieve this by focusing on three nutrition pillars and encouraging them to:



BUY HEALTHIER

Choose whole, unprocessed foods where possible. If buying processed foods, choose lower sugar and lower salt versions.



COOK MORE OFTEN

Including using raw ingredients.



EAT HEALTHIER

Especially when eating away from home.





CASE STUDY

THARAWI KOORI COMMUNITY KITCHEN (NSW)

A community kitchen is a place to meet friends and cook healthy, nutritious meals together with your community. Community kitchens serve as a place to share ideas on feeding a family and keeping costs down, as well as trying new recipes and encouraging a healthy diet.

The Tharawi Koori Community Kitchen was set up to reduce factors associated with insecurity amongst Aboriginal families who were living in Airds NSW. The initiative has highlighted and generated interest in healthy eating, knowledge of nutrition and developing cooking skills of those involved. The Tharawal Aboriginal Corporation is one of the few services that now has a healthy food policy which aims to promote good nutrition across its community by providing healthy foods and drinks to staff, the community and guests.



CASE STUDY

PEACE OF THE GARDEN (TAS)

The 'Peace of the Garden' initiative provides residents located in the region north of Launceston with access to healthy food, which is often limited due to only a few shops selling fresh produce at an affordable rate. The Peace of the Garden Veggie Box social enterprise delivers a variety of fruit and vegetable boxes around the local area. To make the boxes as accessible as possible, the boxes cater for a variety of budgets with price points at \$20, \$35 and \$50.

This initiative is made possible due to a strong partnership with local wholesalers and growers who ensure a constant supply of local fruit and vegetables to fill the boxes. The enterprise has received additional funding through the State Government Food Coops grant scheme which allowed them to purchase a mobile veggie cart to use for pop up markets in community locations.



A NOTE FROM:

MARIKA DAY

Accredited Practising Dietitian & Nutritionist
BHlthSc(Nutr) & MDietSt

Taking small steps towards wellbeing not only makes the journey easier but also makes the process sustainable in the long run. When it comes to nutrition, we can fall victim to the thought that we should overhaul our diet overnight and that we can simply go from one extreme to another.

For most however, jumping from extremes is often short-lived. I advise taking small steps when it comes to your diet. Think about simply adding more vegetables, drinking more water, eating fewer processed foods, cooking at home more. Focus on one thing at a time and gradually you will build up a healthy and sustainable diet, and more importantly, way of life.



THE RESULTS

RISKY BEHAVIOURS



RISKY BEHAVIOURS RESULTS

Tobacco use and excessive alcohol use increase disease risk. The AIA Vitality Wellbeing Index rank in this area considers the following two factors and ranks the States and Territories¹ in terms of which is the healthiest.



SMOKING RATES

ACT had the lowest proportion of daily smokers, with one in nine people, followed by WA and SA.¹

ALCOHOL CONSUMPTION

VIC had the lowest proportion of the population drinking more than the lifetime alcohol guidelines (no more than two standard drinks per day), with one in seven people, followed by NSW and the ACT.¹



1
ACT

2
VIC

3
SA &
NSW

RISKY BEHAVIOURS TOP RANKING STATES AND TERRITORIES



RISKY BEHAVIOURS INSIGHTS



NSW

40%

NSW had the lowest proportion of the population who drank more than four standard drinks per occasion, with 40 percent of the population, followed by SA and then VIC.¹

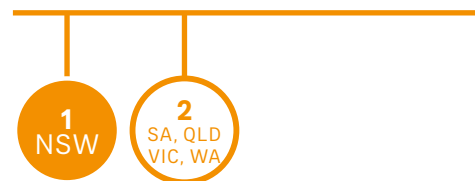
HOW DO AIA VITALITY MEMBERS COMPARE?



NSW had the **fewest smokers** at two percent, followed by a tie between SA, QLD, VIC and WA at four percent.



ACT had the **healthiest alcohol consumption** levels, followed by VIC and then NSW.



CASE STUDY

GOOD SPORTS

The **Good Sports** program is Australia's largest health promotion initiative in community sport with close to **10,000 clubs** involved. The initiative is managed by the **Alcohol and Drug Foundation** and has been effective in reducing the likelihood of risky drinking by **37 percent** and alcohol-related harms by **42 percent**.

REDPA FOOTBALL CLUB (TAS)

Tasmania's Redpa Football Club was awarded the 2019 Good Sports Club of the Year. Understanding that their youth are their future, the club focussed on shifting their culture from alcohol-centred events to more of a family-friendly environment. Using Good Sports resources, Redpa FC has been able to implement policies around the service of alcohol, smoking and drink driving. The club is proud to say that the Good Sports value of 'being connected' shines brightly in everything it does. President Shane Hine acknowledges that change isn't easy, but believes:

"...following Good Sports procedures and resources over the years has helped long-term members understand the need for change."

—
Shane Hine
President – Redpa Football Club

SALE TENNIS CLUB (VIC)

After weekend tennis matches were followed up by long drinking sessions at the club, Sale Tennis Club had obtained a reputation around the small town for its heavy drinking culture. Implementing changes including relocating the bar; hosting free RSA courses for members and staff; and removing happy hour – Sale Tennis Club has turned the tide on its culture for the better which has resulted in the club being named the national Good Sports Club of the Year and a finalist in the Good Sports Community Sporting Club of the Year.



10,000
Community clubs
involved nationally



37%
Reduction in the
likelihood of risky
drinking



42%
Reduction in
alcohol-related
harms

Source: Good Sports Highlights Report



THE RESULTS

MENTAL WELLBEING



23

MENTAL WELLBEING RESULTS

We experience a state of mental wellbeing when we realise our own abilities, can cope with the normal stresses of life, can work productively, and are able to contribute to our community. Mental wellbeing is essential to our happiness and quality of life and helps our communities to thrive.



MENTAL WELLBEING TOP RANKING STATES AND TERRITORIES

ACT came out on top for this category based on having:



The lowest proportion of population with psychological distress, at 11 percent.¹



The second lowest suicide rate.¹



21%

The sixth lowest proportion of mental health conditions, with one in five living with a condition.¹

THE AIA VITALITY WELLBEING INDEX HAS RANKED STATES AND TERRITORIES IN TERMS OF:

- 1 MENTAL HEALTH CONDITIONS¹
- 2 HIGH PSYCHOLOGICAL DISTRESS¹
- 3 SUICIDE RATE²



MENTAL WELLBEING INSIGHTS

HOW DO AIA VITALITY MEMBERS COMPARE?



SLEEP QUALITY

Studies suggest that **sleep** is as important to overall health as eating, drinking and breathing. Both duration and quality of sleep impact mental wellbeing and should be considered. NT had the highest proportion of members meeting the guidelines of at least seven hours per day.

ACT

93%

ACT had the **highest** proportion of population attending cultural venues, at 93 percent.¹



CULTURAL EXPERIENCE

Taking time out to immerse yourself in something that interests you is imperative for mental wellbeing. **Attendance at cultural venues**¹⁰, such as art galleries, museums, libraries, cinemas and performing arts events is therefore an interesting aspect to consider. ACT had the highest proportion attending cultural venues.

ACT

1:1 DEBT TO INCOME RATIO

TAS had the **lowest** household debt to income ratio of 1.1, while ACT had the lowest unemployment rate of 3.1 percent.¹



FINANCIAL WELLBEING

Financial wellbeing impacts mental wellbeing. Looking at financial wellbeing factors, TAS had the lowest **household debt to income ratio**¹¹ while ACT had the **lowest unemployment rates**¹².



AIA AND QUANTIUM STUDY

AIA is committed to better understanding the factors that impact mental health and exploring how we can work to improve mental wellbeing, both earlier on and more effectively. With depression, anxiety and substance use disorders being the most common mental health conditions in Australia, we partnered with Quantum to complete the world's largest and richest study of the link between depression, demographics, health, lifestyle and circumstance.

The objective of the study was to create an algorithm that calculates a mental wellbeing score for individuals, based on their circumstances and choices, to incentivise behaviour that supports improved mental wellbeing. The study combined health claims and biometric-tracked physical activity data including steps, heart rate and exercise type sourced from Discovery Health and Vitality in the South African market. The data offered a unique source of insights into health and behavioural characteristics that can be used to understand depression risk.

In total, the initial dataset that was investigated covers a population of over five million lives, including healthcare claims incurred over ten years, equating to 1.5 billion lines of claims and activity data. The most important factors found to drive higher depression risk include high levels of **stress and insomnia**, a higher number of **health problems** and **days off work** for illness, and unhealthy lifestyle choices: including **smoking**, lack of **exercise**, and high levels of **sugar consumption**.

It was found that lifestyle factors represent around a quarter of the depression impact and can therefore be incentivised for improvement. The relative contribution of groups of factors (and their relative contribution to addressable change in risk) is:



64%
EXERCISE LEVELS

People who do more exercise, or who do it at a higher intensity, have lower risks of depression. Those who take 10,000+ steps have been found to have half the depression rate of those who take 2,000 or less.



16%
SLEEP PATTERNS

People who sleep less than four hours a night have 32 percent higher depression rates than those who sleep seven to eight hours.



14%
DIET

People who consume three or more sugary drinks per day increase their risk of depression by 11 percent.



6%
SMOKING AND ALCOHOL USE

Current and ex-smokers have a 23 percent higher risk of depression than non-smokers.

Understanding which changes in behaviour or circumstance have the strongest influence on the risk of depression will enable us to incentivise behaviour that supports mental wellbeing. This research not only informs our work at AIA but can also assist governments and NGOs with prioritising investment and policies for improving mental health.

CASE STUDY

MENSLINK (ACT)

Menslink is an organisation that provides free mental wellbeing support to young men in Canberra. The youth mentoring program pairs men who have survived their own adolescence with young men aged 10 to 18 who are still developing into adulthood. Volunteers and mentors meet in a relaxed group session where the youths can choose a mentor who they feel most comfortable with. The pair then meet on a regular basis and Menslink organises and pays for monthly activities such as kayaking or camping trips.

Menslink also offers free counselling to young men aged between 10 and 25. Menslink in schools encourages young men to seek help and support their mates. There are two programs, SID (Silence is Deadly) and Pride Education program (Possibilities, Respect, Integrity, Determination, Effort).



“I went through some rough times as a teenager and learnt some really tough lessons on what and what not to do. So the chance to help a young guy potentially learn those life lessons a bit easier than I did was really too good an opportunity to pass up. I lost my father when I was in my late teens, so I understood all too well the positive impact a stable male influence can make during tough times for a young man.”

—
Josh Turk
Menslink Mentor



CASE STUDY

ARDMONA FOOTBALL CLUB (VIC)



Ardmona is a small regional town located in the heart of Victoria, approximately 10 kilometres west of Shepparton. With a population just shy of 600 people, the town is a very close-knit community and has several amenities, including a corner shop, a primary school and a local football club, home to the Ardmona Cats.

Despite the club's 100-year old legacy, it is known for being perhaps the worst football side in the cosmos – they've been down on luck, with five consecutive years without a win. But that doesn't stop them from trying.

Just like in any small regional town in Australia, the locals in Ardmona embrace their local footy club and its legends, walking out on field each Saturday morning giving their best. The club brings the community together, allowing social connectedness between its members, their families and the broader community that lives on outside the field.

AIA Vitality ambassador Shane Crawford will be visiting the community and will be involved in supporting the Ardmona Cats to help turn their luck around.

“They might not be the best footballers, what matters is that they never give up, no matter what is in front of them. After two decades playing in the AFL, I know how hard it can get after a loss. I admire their passion for the game, their club and community.

Despite setbacks week-after-week, they demonstrate their ability to work together, building positive and respectful relationships with each other and the people around them. The Ardmona Cats have a strong fighting spirit. We can all learn a thing or two from them.”

—
Shane Crawford
 Football Legend and AIA Vitality Ambassador



A NOTE FROM:

PROFESSOR IAN HICKIE

Professor of Psychiatry, Central Clinical School, Sydney Medical School, Co-Director, Health and Policy, Brain and Mind Centre, NHMRC Senior Principal Research Fellow

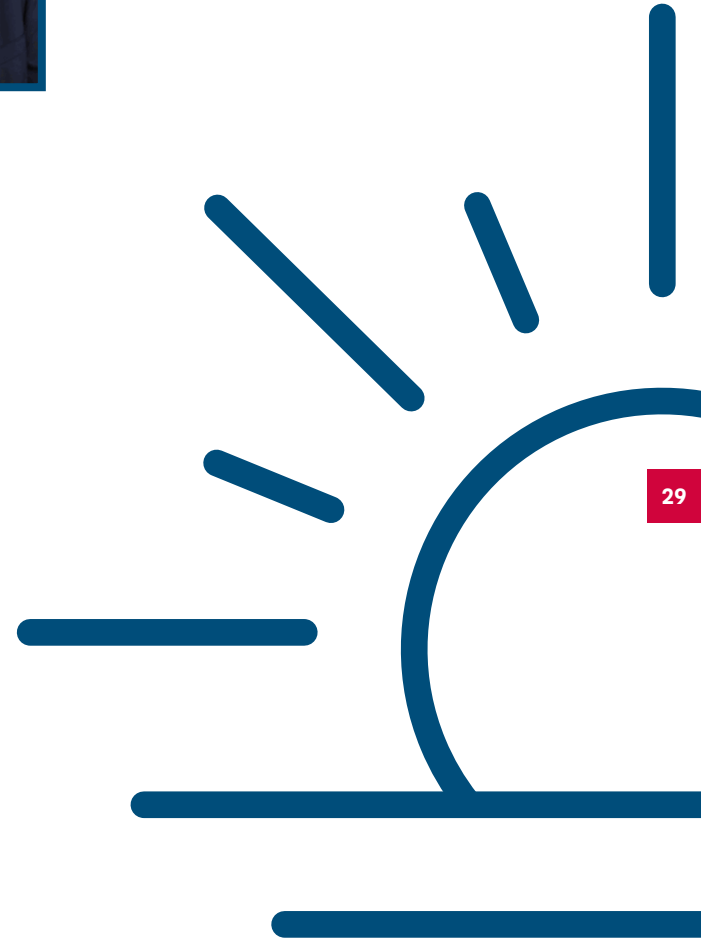


If we really want to reduce the very large social and economic impact of depression in Australia, then we need to move urgently to the widespread uptake of evidence-informed, targeted and tailored prevention strategies. To do this effectively, people need to be supported by 21st century tools and information. Organisations that aim to support these efforts need to be on the same page, really aiming to provide the modern infrastructure that can enable communities to make a real difference.

The factors identified in these studies revealed targets for more effective prevention strategies. They are well-grounded in large scale community studies and lend themselves to widespread uptake by those most at risk. **The emphasis on physical activity, sleep patterns, healthy diet and reduced smoking** are not only likely to have direct benefits in reducing depression levels but, very importantly, should minimise the increased risk of premature death or disability due to cardiovascular disease.

People with depression die at much higher rates from cardiovascular disease – a risk that is partly explained by the direct physiological consequences of depression on the body's nervous and immune systems but also by its associations with other risk factors, notably tobacco smoking. **To be most effective, these preventive strategies need to be emphasised during periods of high-risk throughout the individual's life** – notably for teenagers and young adults.

However, there are other situations where knowledge could make a real difference. For some, it will be **knowledge of a family history of depression, suicidal behaviour, or the experience of a past episode of depression**. Other examples include life challenges such as **childbirth; periods of physical illness; or separation in intimate relationships**. The sooner and the more substantially we move to support the prevention of depression, the more likely we are all to see substantial social, health and economic benefits.



A NOTE FROM:

DR JAIME LEE

MBBS, MPH, BMedSc
 Founder and CEO of Health Quotient,
 a company dedicated to transforming workplaces around the world.

Mental health is about being psychologically, emotionally and socially healthy, not merely the absence of mental illness. Like physical and social wellbeing, good mental health is an integral part of our overall health and is equally important to allow individuals to flourish and thrive.

Mental illness is a growing issue in Australia with 45 percent of Australian adults experiencing a mental health issue at some point in their lifetime¹³, with The Productivity Commission estimating that mental illness and suicide is costing Australia \$180 billion a year¹⁴.

According to the World Health Organization, mental health is “a state of wellbeing in which an individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community.”

As mental health is a dynamic state which is influenced by multiple biological, psychological, social and environmental factors, research shows that cultivating your mental wellbeing can start with small lifestyle changes which can have a big impact on your overall wellbeing as a whole.



HERE ARE NINE WAYS TO CULTIVATE YOUR MENTAL HEALTH:

1. BE ACTIVE

Exercising at least two sessions a week decreases the risk of depression by 13 percent. Find an activity that you enjoy and make it part of your routine. Perhaps go for a walk, a bike ride, join a sports team or club, or try something different like bouldering.

2. CREATE A HEALTHY SLEEP ROUTINE

Try sleeping 7–8 hours regularly, avoiding screens (such as phones, laptops and TVs) 30 minutes before bed and avoid coffee after 3pm.

3. STOP SMOKING

4. EAT WELL

Eat a healthy, well-balanced, nutritious diet and drink 2–2.5L of water a day.

5. REDUCE YOUR SUGAR INTAKE

Avoid sugary drinks and excessive processed foods.



6. CONNECT WITH OTHERS

Build meaningful relationships with your family, friends, colleagues and community. You could even try volunteering at a local charity or community organisation.

7. PRACTICE MEDITATION OR MINDFULNESS TECHNIQUES

Start with noticing your breathing for one minute and slowly work this up to 10–15 minutes a day.

8. REST AND RELAX

Allowing time to rest is critical. For example, spending as little as 10 minutes outside in nature can help you decrease stress.

9. KEEP LEARNING

Learning new skills builds confidence and will give you a sense of achievement.



SEEK SUPPORT WITH BEYOND BLUE

Beyond Blue is a national, independent and bipartisan not-for-profit organisation working to promote good mental health, prevent suicide and improve the lives of individuals, families and communities affected by depression, anxiety and suicide.

There are a number of features that rural and remote areas share – often dispersed and small populations, with varying access to health services and technology, and a range of challenging factors unique to living outside an urban area (e.g. social isolation, livelihood impacted by natural disasters). However, **the diversity of rural and remote communities should not be forgotten** – there is no single culture, typical community profile, or single definitive description that aptly describes a rural or remote community.

As such, figuring out what works best where and for whom must be a consideration for each distinct area. Technology and digital approaches are fundamentally changing the way people live their lives, interact with others, and engage with support and health services. Digital developments are ‘disrupting’ the way almost everything in society works (e.g. Netflix, Uber), and mental health support systems and services will be affected by this disruption. **It is critical that mental health policy, funding, service delivery and research reflects and responds to this constantly evolving digital landscape.**



One of the key benefits of engaging digital tools for suicide prevention is that it provides another way to identify and reach people who are at-risk of suicide.

Particularly those who may not otherwise engage with services: **incorporating digital approaches into the suite of suicide prevention services that are available is therefore imperative.** Beyond Blue’s BeyondNow safety planning app, for people experiencing a suicidal crisis, has had strong levels of uptake – over 42,000 unique visitors have searched BeyondNow related web pages and around 20,000 individuals have downloaded the BeyondNow app, with almost a third of those completing their safety plan since the app was released in March 2016.

Online forums offer another avenue of care and are growing in their prevalence and use. Beyond Blue’s online forums are a safe place for people who have experienced depression, anxiety or suicide, or caring for someone who has, to connect and receive and offer support to one another around the clock. Data on forum users suggests that a greater proportion of people living outside a capital city use this technology. Nearly half of forum users are not from a capital city – this is significant given around 65 percent of the population inhabit a capital city. This disproportionately higher usage of the forums by people living in regional, rural and remote areas of the country demonstrates how important this platform is in providing support they may not otherwise have access to.

www.beyondblue.org.au/policy



THE RESULTS

PREVENTATIVE HEALTH



PREVENTATIVE HEALTH RESULTS

Preventative activities, such as health checks, advanced health screens and immunisations can improve both diagnosis of health conditions and recovery through early intervention.

The AIA Vitality Wellbeing Index has ranked the States and Territories by the proportion of their population who participated in:



THE TOP PERFORMING STATE IN PREVENTATIVE HEALTH WAS SA BASED ON HAVING:

01

The highest participation rate in screening for **breast and cervical cancer** followed by TAS (breast cancer screening) and VIC (cervical cancer screening).³

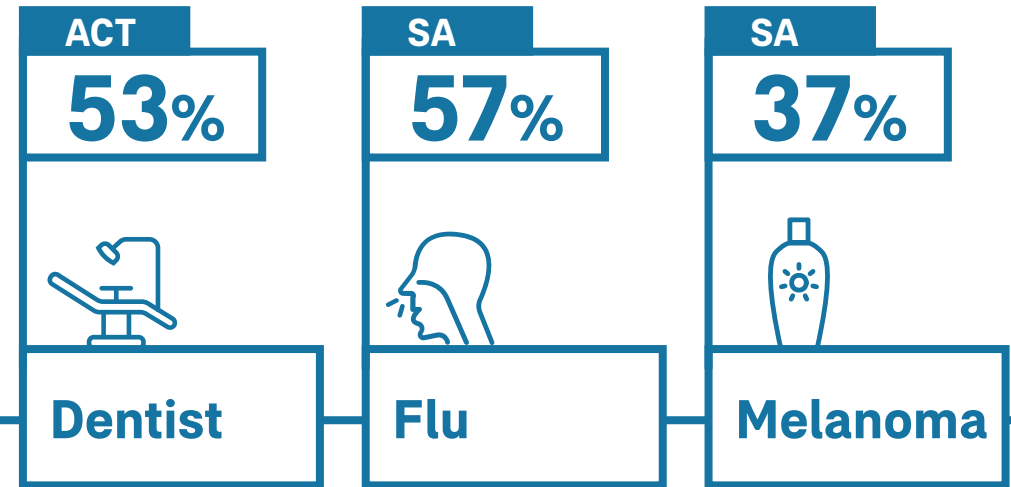
02

The second highest participation rate for **bowel cancer screening**.³ TAS took first place while VIC was third.



PREVENTATIVE HEALTH INSIGHTS

OTHER INTERESTING PREVENTIVE SCREENING ACTIVITIES INCLUDE:



ACT had the highest number of people who have **consulted a dentist** in the last 12 months, at one in two people.¹

SA performs best in terms of **seasonal flu vaccinations** of their >65-year-old age group.¹⁶

SA had the lowest rate of population that had **developed a melanoma** (37 percent) – compared to QLD which was the highest (74 percent).¹⁵

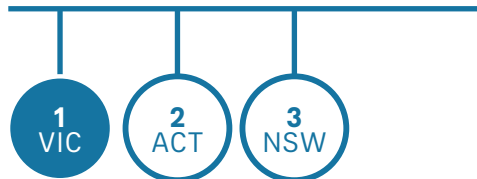
HOW DO AIA VITALITY MEMBERS COMPARE?

CANCER SCREENING TESTS

Looking at AIA Vitality members who completed health screening tests in 2019, the proportion of members who undertook medical screenings were analysed.



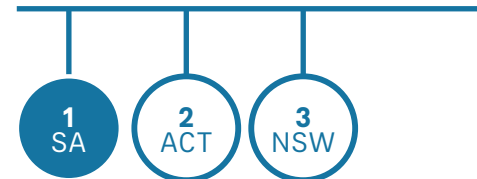
VIC had the highest proportion of members who had a **cervical screening test**, followed by ACT and then NSW.



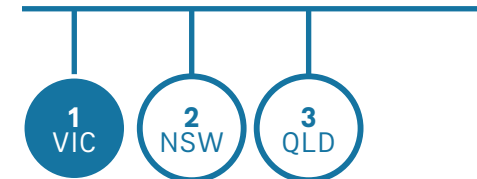
ACT had the highest proportion of members who had a **breast cancer screen (mammogram)**, followed by NSW and then the NT.



SA ranked first for the highest proportion of members who had **bowel cancer screening tests**, followed by ACT and then NSW.



Additional AIA Vitality member data shows that the highest unanimous proportion of **dental assessments, eye tests and skin self-examination** were undertaken in VIC, followed by NSW and QLD.

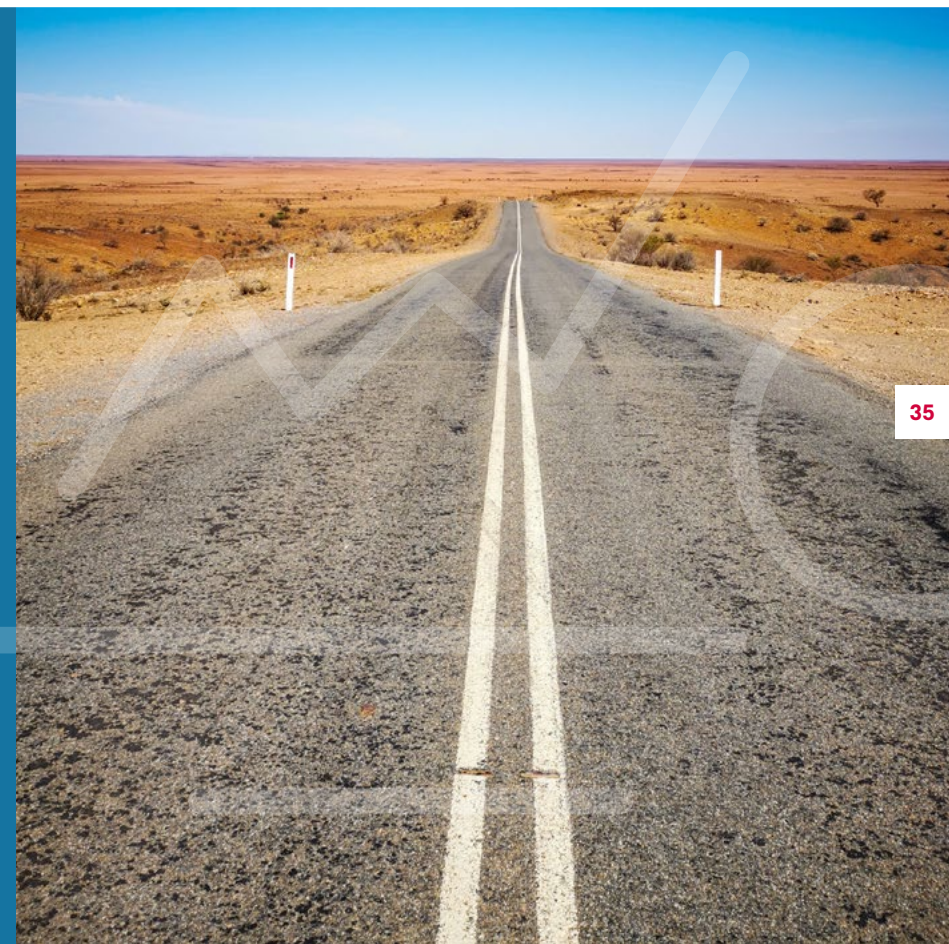


CASE STUDY

ABORIGINAL WELL WOMEN'S SCREENING PROGRAM (SA)

Nationally, Aboriginal women have a much higher incidence of cervical cancer.¹⁷ The Aboriginal Well Women's Screening Program aims to reduce morbidity and mortality rates for cervical cancer by encouraging Aboriginal women in the target population to have regular well women's checks. This is achieved by providing advice, increasing the provision of health education to community women in rural areas and working in partnership with health providers to improve screening participation rates.

The Aboriginal Well Women's Screening Program employs Aboriginal staff to lead and coordinate the state-wide program. The team actively works in partnership with a range of organisations and health service providers to improve health outcomes for Aboriginal women. Face to face visits are made each year to health services across the state including remote locations and the annual minor grants funding initiative enables the program to support local agencies to continue to provide respectful health promotion, education and cultural safety when providing clinical services for Aboriginal women.



THE RESULTS

CHRONIC DISEASE RISK



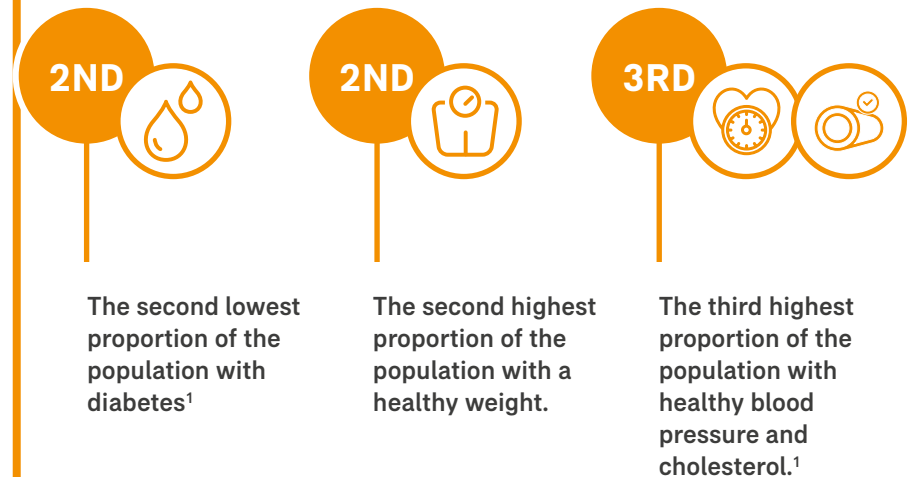
CHRONIC DISEASE RISK RESULTS

Chronic diseases generally cannot be prevented by vaccines or cured by medication, instead they are more closely linked to lifestyle choices and environmental factors. The AIA Vitality Wellbeing Index considers the following Chronic Disease Risk and ranks the States and Territories by how they have performed.



CHRONIC DISEASE RISK TOP RANKING STATES AND TERRITORIES

QLD TOOK OUT THE TOP SPOT FOR THIS CATEGORY, BASED ON HAVING:



CHRONIC DISEASE RISK RESULTS

PROFESSIONAL HELP AND CHRONIC CONDITIONS

Based on the ABS National Health Survey results from 2017 to 2018¹, the **NT** appeared to have the **lowest** proportion of population with one or more chronic conditions. Interestingly, (according to the ABS National Health Survey from 2014 to 2015 – which is the latest data available) the NT also had the lowest proportion of people who consulted a health professional.

NT

39%

Two in five people in the NT had one or more **chronic conditions**.



HOW DO AIA VITALITY MEMBERS COMPARE?

We looked at AIA Vitality members who had health checks over the year 2019:



NSW had the healthiest **BMI**s, followed by VIC and then TAS.

1 NSW
2 VIC
3 TAS



NSW had the healthiest **waist circumferences**, followed by a tie between ACT and VIC, then WA.

1 NSW
2 ACT & VIC
3 WA



NSW had the healthiest **blood pressure** levels, followed by the ACT and NT.

1 NSW
2 ACT
3 NT



NT had the healthiest **cholesterol** levels, followed by the ACT and then a tie between SA and TAS.

1 NT
2 ACT
3 SA & TAS



TAS had the healthiest **glucose** levels, followed by SA and then a tie between WA and VIC.

1 TAS
2 SA
3 WA & VIC



CASE STUDY

MY HEALTH FOR LIFE (QLD)

My Health for Life is a local government initiative that offers eligible Queenslanders a structured six-month lifestyle modification program at no cost. The initiative is designed to support positive lifestyle changes in order to reduce an individual's risk of developing Type 2 diabetes, cardiovascular disease or lifestyle related cancers. The program covers a range of topics including:



HEALTHY
EATING AND
PHYSICAL
ACTIVITY



ACHIEVING
AND
MAINTAINING
A HEALTHY
WEIGHT



SMOKING
CESSATION



REDUCING
ALCOHOL
CONSUMPTION

The delivery of the program is flexible to suit the individual's needs and incorporates phone health coaching, group programs and online support. Culturally tailored programs are also available to create a fully inclusive experience.

“Since the beginning of my ‘My Health For Life’ journey I have felt significant benefits, particularly increased self-confidence. I am now more attuned to my body, enabling me to change life-long habits. I was well supported within the program and through discussions with my group, felt empowered to at first make small lifestyle changes, then larger adjustments without pressure. I realise this is a life-long journey...”

—
Kerstin – Sunshine Coast



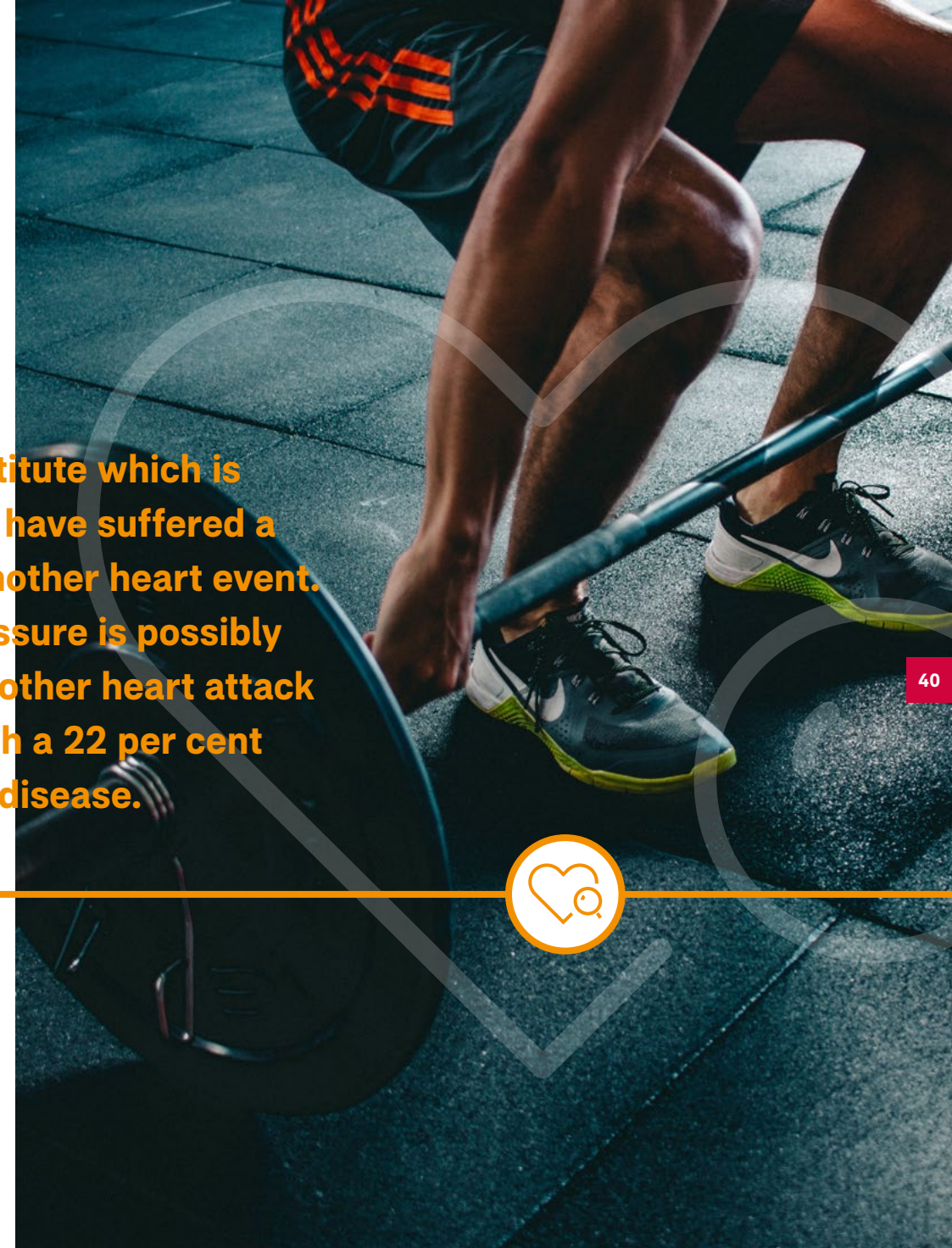
A NOTE FROM:

THE BAKER INSTITUTE

According to the renowned medical research institute which is focused on cardiovascular disease – people who have suffered a heart attack or stroke are also at a high risk of another heart event. The Baker Institute says that targeting blood pressure is possibly the most important intervention in preventing another heart attack or stroke. Exercise training is also associated with a 22 per cent reduction in cardiac death in patients with heart disease.

The Baker Heart and Diabetes Institute is an independent, internationally renowned medical research facility, with a history spanning more than 93 years.

No Second Chances: Controlling Risk in Cardiovascular Disease produced by the Baker Institute in 2019.



WHERE TO FROM HERE?



WHERE TO FROM HERE?



THE OVERARCHING GOAL

At AIA, we're focused on helping people live Healthier, Longer and Better Lives. It is through complex studies and insight gathering projects, such as the AIA Vitality Wellbeing Index, that we are able to gain an in-depth understanding of the state of the nation and create awareness around these critical issues. This information gives us the knowledge to induce change: it allows us to collaborate with our members, broader communities and stakeholders to identify the changes, both big and small, that we can make to improve our health and wellbeing for the better so that we can all Move Well, Think Well, Eat Well and Plan Well.



MENTAL HEALTH AND WELLBEING AS A KEY FOCUS

As a country, we need to increase engagement around the topic of mental wellbeing. By increasing awareness of risk factors and behaviours, and by providing relevant feedback, technology and support where appropriate, we can help those at risk get the help they need at the right time. We recommend expanding the reach of mental health promotion from the individual level to the community level. This can be collectively achieved by targeting modifiable risk factors with behaviour change strategies based on behavioural economics and clinical evidence in community settings, such as schools and workplaces using technology-based approaches.



WHAT'S NEXT FOR THE AIA VITALITY WELLBEING INDEX?

We hope that the inaugural AIA Vitality Wellbeing Index will spark conversation about how we, as a nation, can shift our mindsets towards prevention and look both within our own communities as well as more broadly upstream to impact the causes of poor health in innovative ways. AIA plans to continue this discussion through an ongoing AIA Vitality Wellbeing Index series that delves into the details of each individual aspect of what defines overall health and wellbeing.

In championing Australians to live healthier lives, we recognise the key to sustainable change is making healthier behaviours part of everyday life.

The AIA Vitality program uses theories of behavioural economics to educate, support and incentivise members to make small changes that will help improve their wellbeing over time.



APPENDIX



APPENDIX 1: RANKINGS

OVERALL RANKINGS

Pillar	NSW	VIC	QLD	SA	WA	TAS	NT	ACT
Chronic Diseases	4	6	1	6	2	5	4	3
Risky Behaviours	3	2	5	3	4	5	6	1
Mental Wellbeing	2	3	6	4	2	5	3	1
Nutrition	2	1	4	7	3	6	5	5
Physical Activity	3	3	7	4	2	5	6	1
Preventative	7	3	6	1	4	2	8	5
Overall Rank	4	3	7	5	2	6	8	1

PER CATEGORY BREAKDOWN

Pillar	Metric	NSW	VIC	QLD	SA	WA	TAS	NT	ACT
Chronic Diseases	Diabetes	3	4	2	5	1	3	6	2
	Overweight or Obese	3	6	2	7	5	8	4	1
	High BP	4	7	3	6	5	8	1	2
	High Cholesterol	4	7	3	6	1	5	2	8
Risky Behaviours	Smoker	5	4	6	3	2	7	8	1
	High Alcohol Consumption (lifetime)	2	1	6	4	7	5	8	3
Mental Wellbeing	Mental Health Condition	3	5	8	4	2	7	1	6
	High Psychological Stress	4	5	8	6	3	7	2	1
	Suicide Rate	3	1	6	4	5	7	8	2
Nutrition	Adequate Fruit Consumption	1	2	3	7	4	8	5	6
	Adequate Veg Consumption	6	4	5	8	3	1	2	7
	Daily Consumption of Sugary Drinks	3	2	5	6	4	8	7	1
Physical Activity	No Exercise	4	3	7	5	2	6	8	1
	Meets Guidelines	3	4	7	6	2	6	5	1
Preventative	Participates: Bowel Cancer Screening	7	3	6	2	5	1	8	4
	Participates: Breast Cancer Screening	7	6	5	1	4	2	8	3
	Participates: Cervical Cancer Screening	5	2	7	1	3	4	8	6

APPENDIX 2: METHODOLOGY

The rankings for each of the six categories were based on the average ranking across the included indicators, with each indicator given equal weight. The overall wellbeing ranking was based on the average ranking across the six categories, with each category given equal weight. All indicators are expressed as % of population, to allow for the difference in population size between states. Where available, age standardised statistics have been used, to allow for the difference in age distribution between states.

APPENDIX 3: AIA VITALITY DATA METHODOLOGY

OVERVIEW

- We looked at the AIA Vitality member data for the year 2019.
- We analysed the data by state.
- We must acknowledge that the sample sizes of ACT, NT and TAS may not be statistically significant due to the sample size. We expect this effect to lessen over time as the AIA Vitality membership grows in these states.

DATA

BIOMETRICS

- Glucose, BMI, waist circumference, cholesterol and BP levels were the most recent results taken from members recorded by a health professional during a AIA Vitality Health Check in 2019.

PHYSICAL ACTIVITY

- Steps were taken from recorded steps by members who had logged a minimum of 7,500 steps per day. AIA Vitality members are incentivised to log steps at 7,500 and 12,500 steps per day. Steps were recorded by wearable devices.
- Members meeting physical activity recommendations were defined as members who met the minimum of 150 minutes of moderate intensity exercise per day. This survey data was sourced from the AIA Vitality Health Review.
- Distance travelled during an exercise session was defined as the total kilometres per logged exercise session, which was sourced from members' devices.
- Kilocalories burned during exercise session was defined as kilocalories burned during logged exercise sessions, which was sourced from members' devices.

SMOKER STATUS

- AIA Vitality member smoking status is described as current smoker, non-smoker who has never smoked or non-smoker who used to smoke. This is captured through the online AIA Vitality Health Review. AIA Vitality members who are non-smokers are incentivised (with points) to sign a non-smoker's declaration to certify their non-smoking status for the past 12 months.

ALCOHOL

- AIA Vitality members who met the healthy recommendations were members who did not exceed two standard alcoholic drinks per day as recorded by the online AIA Vitality Health Review. Note: the national guidelines are being updated and are currently in draft form. When these are finalised, AIA Vitality recommendations will be updated accordingly.

NUTRITION – AS RECORDED BY THE ONLINE AIA VITALITY HEALTH REVIEW:

FRUIT

The number of AIA Vitality members who met the guideline of two servings of fruit per day.

VEGETABLES

The number of AIA Vitality members who met the guideline of a minimum of five servings of vegetables per day.

SUGARY DRINKS

The number of sugary drinks consumed per day.

MENTAL WELLBEING

- The average Kessler 10 (psychological distress) score of AIA Vitality members who completed the online mental wellbeing assessment.
- Sleep duration related to members who reached the minimum recommendations of seven hours of sleep per day.

ACKNOWLEDGEMENTS

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NATIONAL DATA CONTRIBUTION

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Australian Institute of Health and Welfare

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