



Rationale

High-quality general practice care, particularly preventive care, is the foundation for optimising the health of the adult population of Australia. Using the core skills to develop and maintain therapeutic relationships to identify risk and serious disease in undifferentiated presentations, and provide opportunistic screening, health education and holistic continuity of care in managing chronic and/or complex disease, are all important components of this care.

According to the 2011 Australian health survey, 55% of Australian adults rated their health as 'excellent or very good', whereas only 17.2% reported their health to be 'fair or poor'.¹ In delivering care to this generally healthy population general practitioners (GPs) also need to maintain vigilance to detect and manage rare but serious conditions and to identify risk of future disease.

Average life expectancies of Australian men and women are both ranked sixth in the world, at 80.1 years for men, and 84.3 years for women.² Currently, most causes of death are chronic disease.¹ Despite Australians living with chronic diseases for longer, disability rates are reducing, in that generally we are living more healthy years free of disability than in previous decades.³

Some health risk factors, such as smoking and alcohol abstinence rates, are improving, however, gains are needed to address other modifiable risk factors such as increasing rates of obesity, reduced physical activity and poor intake of fruit and vegetables. In the Australian health survey 2011–12, 16% of Australians smoked daily, 63% of Australians were overweight or obese, and only 5.5% ate the recommended intake of fruit and vegetables. It is very concerning that 40% of individuals did no physical activity in the week prior to the survey and only 43% undertook sufficient physical activity in line with national guidelines. The rate of people drinking at a level that puts them at an increased lifetime risk of harm has remained stable since 2001.⁴

Sadly, there remain significant inequalities in life expectancy, health risk factors and health outcomes in our population. The most notable of these is for Aboriginal and Torres Strait Islander people, who continue to be impacted by significant gaps in healthcare across the spectrum and over their lifespan. Gains have not occurred at the same rate as have occurred with non-Indigenous Australians in recent decades. For example, as of 2010–12, Aboriginal and Torres Strait Islander individuals live 10.5 years less for men and 9.5 years less for women than non-Indigenous Australians.⁵

Individuals who live in rural and remote areas, those who are of low socioeconomic status, individuals with disabilities, and individuals from culturally and linguistically diverse (CALD) communities, including refugees and asylum seekers, also have particular vulnerabilities that lead to inequities in health outcomes and that need to be addressed.¹

Young adults aged 15–35 years have lower rates of access to general practice services than other age groups. This age group also has high rates of exposure to health risk factors and higher rates of risk-taking behaviours that can lead

to acute and chronic adverse health outcomes. There is a gender imbalance in that males have consistently lower rates of access to general practice across their lifespan and make up a larger proportion of those exposed to modifiable risk factors, particularly smoking, harmful alcohol use and obesity. Examples of the proportions of young adults exposed to important risk factors include:⁶

- Smoking – males aged 25–34 years have the highest rate of smoking (32%).
- Harmful alcohol use – 17% of men aged 25–34 years and 14% of women aged 18–24 years regularly drink to a level that is associated with long-term harm.
- Mental health problems – young adults are overly represented in mental health statistics. In the 2007 national survey of mental health and wellbeing, 26% of individuals aged 16–24 years, and 25% of individuals aged 25–34 years, experienced a mental health problem in the previous 12 months.⁷
- Excessive weight and obesity – affected 25% of children 5–17 years of age in 2007–08. This issue is now recognised to be associated with significant long-term risks if not addressed. If this risk factor is not identified and addressed in childhood and adolescence, it is imperative that it is managed in early adulthood to reduce morbidity and mortality.

There is a vital role for general practice in improving population health outcomes by identifying individuals who are at risk early, and implementing health promotion and preventive strategies to improve outcomes. Appropriate opportunistic screening of all adults who present to general practice, particularly young adults, is an important part of this to enable access to preventive care and/or treatment.

Adults comprise the majority of the working population. Occupational health issues are therefore important to understand and to manage appropriately. Refer to the Occupational medicine contextual unit (OM16) for further explanation of this important area.

Related contextual unit

OM16 Occupational medicine

References

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3. Australian Institute of Health and Welfare. Healthy life expectancy in Australia: Patterns and trends 1998 to 2012. Canberra: AIHW, 2014.
4. Australian Bureau of Statistics. Australian Health Survey: Updated results, 2011–2012. Cat. no. 4364.0.55.003. Canberra: ABS, 2015. Available at www.abs.gov.au/ausstats/abs@.nsf/Lookup/4364.0.55.003main+features12011-2012 [Accessed 8 February 2016].
5. Australian Institute of Health and Welfare. Mortality and life expectancy of Indigenous Australians 2008 to 2012. Cat. no. IHW 140. Canberra: AIHW, 2014. Available at www.aihw.gov.au/publication-detail/?id=60129548470 [Accessed 8 February 2016].
6. Australian Bureau of Statistics. Year book Australia, 2012: Health risk factors. Cat no. 1301.0. Canberra: ABS, 2012. Available at www.abs.gov.au/ausstats/abs@.nsf/Lookup/by%20Subject/1301.0~2012~Main%20Features~Health%20risk%20factors~233 [Accessed 8 February].
7. Australian Bureau of Statistics. National Survey of Mental Health and Wellbeing: Summary of results, 2007. Summary of findings: Prevalence of mental disorders. Cat. no. 4326.0. Canberra: ABS, 2008. Available at www.abs.gov.au/ausstats/abs@.nsf/Latestproducts/4326.0Main%20Features32007?opendocument&tabname=Summary&prodno=4326.0&issue=2007&num=&view= [Accessed 8 February 2016].

Adult medicine resources and tools

The Royal Australian College of General Practitioners (RACGP), *Guidelines for preventive activities in general practice* (Red book), 8th edn, www.racgp.org.au/your-practice/guidelines/redbook

Glossary

Nil