



November 2011

# South Australia Monitoring and Surveillance System (SAMSS)

## Variables and Description

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Government  
of South Australia

SA Health



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## Introduction

This document presents the topics that are currently used in the South Australian Monitoring and Surveillance System (SAMSS). SAMSS consist of over 200 questions/data items and in many cases a number of questions are used to derive a single variable item. This document highlights the summary items in SAMSS rather than the detailed questions per se.

## Background

The South Australian Monitoring and Surveillance System (SAMSS) is owned by SA Health and is an epidemiological chronic disease and risk factor monitoring system, provided by Population Research & Outcome Studies (PROS) within the Discipline of Medicine, University of Adelaide. SAMSS aims to detect and facilitate understanding of trends in the prevalence of chronic conditions, risk and protective factors, and other determinants of health. These data monitor departmental, state and national priority areas and are linked to key indicators.

## Methodology

Each month since July 2002, a sample of South Australians is randomly selected from the Electronic Whites Pages (EWP). Introductory letters are sent out to each household selected to inform them of the upcoming telephone survey, inviting the person who had the last birthday in the household to participate in a telephone interview. In the case of a child under 16 years of age being the person with the last birthday, the interview is conducted by proxy (i.e. a parent or guardian). The survey is conducted by professional interviewers, using Computer Assisted Telephone Interview (CATI) technology. Approximately 600 respondents participate in each SAMSS survey.

For further information on SAMSS, please see <http://health.adelaide.edu.au/pros/>.

## Variables/ derived variables from SAMSS

This section summarises the data that can be obtained from SAMSS by relevant age group. Some derived variables are derived from more than one variable and are recommended for use in reporting.

## A. Summary of data items

**Table 1: Summary of variables by age groups**

	Age groups					
	0	1	2-4	5-15	16+ years	65+ years
<b>Health status</b>	<b>Physical</b>		Diabetes	Self-rated health Diabetes	Self-rated health Diabetes Gestational diabetes (females only) Current asthma COPD Cardiovascular disease Arthritis Osteoporosis Number of multiple condition (excl. mental health) Number of multiple condition (incl. mental health) Disability Cancer	Self-rated health Diabetes Gestational diabetes (females only) Current asthma COPD Cardiovascular disease Arthritis Osteoporosis Number of multiple condition (excl. mental health) Number of multiple condition (incl. mental health) Disability Cancer Fall (injury)
			Current asthma	Current asthma		
<b>Mental</b>			Cancer	Cancer		
			Emotions, concentration, behaviour & treatment	Emotions, concentration, behaviour & treatment	Current mental health Suicidal ideation Psychological distress (K10)	Current mental health Suicidal ideation Psychological distress (K10)
<b>Risk factors</b>		Nutrition (food and fluids)	Nutrition (food and fluids)	Nutrition (food and fluids)	Nutrition (food and fluids)	Nutrition (food and fluids)
		Food insecurity	Food insecurity	Food insecurity Physical activity (sedentary)	Alcohol consumption Food insecurity Physical activity (sedentary) High blood pressure	Alcohol consumption Food insecurity Physical activity (sedentary) High blood pressure

**Table 1: Summary of variables by age groups (cont)**

	<b>Age groups</b>					
	<b>0</b>	<b>1</b>	<b>2-4</b>	<b>5-15</b>	<b>16+ years</b>	<b>65+ years</b>
<b>Risk factors</b>	Smoking in home	Smoking in home	Overweight and obese (BMI) Smoking in home	Overweight and obese (BMI) Smoking in home	High cholesterol Overweight and obese (BMI) Smoking status Smoking in home Number of risk factors	High cholesterol Overweight and obese (BMI) Smoking status Smoking in home Number of risk factors
<b>Health service usage</b>	General practitioner Hospital services	General practitioner Hospital services	General practitioner Hospital services	General practitioner Hospital services	General practitioner Hospital services Customer satisfaction	General practitioner Hospital services Customer satisfaction
<b>Other issues related to health</b>	Social factors / social capital  Child care / early years	Social factors / social capital  Child care / early years	Social factors / social capital  Child care / early years	Social factors / social capital  Child care / early years School performance	Social factors / social capital  Carer Days off / limited due to health Life course	Social factors / social capital  Carer Days off / limited due to health Life course
<b>Demographics</b>	Age, sex Area of residence Family structure Country of birth Language spoken at home Household annual income Money situation Dwelling status	Age, sex Area of residence Family structure Country of birth Language spoken at home Household annual income Money situation Dwelling status	Age, sex Area of residence Family structure Country of birth Language spoken at home Household annual income Money situation Dwelling status	Age, sex Area of residence Family structure Country of birth Language spoken at home Household annual income Money situation Dwelling status	Age, sex Area of residence Family structure Country of birth Language spoken at home Household annual income Money situation Dwelling status Education level Work status Marital status	Age, sex Area of residence Family structure Country of birth Language spoken at home Household annual income Money situation Dwelling status Education level Work status Marital status

## B. List and description of data items

This section highlights the variables available for each topic.

**Table 2: Co-morbidity, injury, disability (health status and chronic disease) variables**

Name	Description	Age	Since
<b>SF1</b>	Self-reported current health status	5+ yr	Jul 2002-
<b>DIAPREV</b>	Prevalence of diabetes (type 1, type 2, gestational diabetes and diabetes of unknown type)	2+ yr	Jul 2003-
<b>DIAGEST</b>	Prevalence of gestational diabetes in females	16+ yr	Jul 2002-
<b>ASTACAM</b>	Prevalence of current diagnosed asthma (ACAM definition, experienced symptoms and treated in the last 12 months)	2+ yr	Jul 2002-
<b>COPDPREV</b>	Prevalence of diagnosed chronic obstructive pulmonary disease (COPD)	16+ yr	Jul 2002-
<b>CVD1PREV</b>	Prevalence of diagnosed cardio vascular disease (heart attack, angina, heart disease, stroke)	16+ yr	Jul 2002-
<b>ARTPREV</b>	Prevalence of diagnosed arthritis	16+ yr	Jul 2002-
<b>OSTPREV</b>	Prevalence of diagnosed osteoporosis	16+ yr	Jul 2002-
<b>MULTCC5</b>	Number of diagnosed chronic conditions (diabetes, asthma, CVD, arthritis, osteoporosis)	16+ yr	Jul 2002-
<b>MULTCC5A</b>	Have at least one diagnosed chronic condition (diabetes, asthma, CVD, arthritis, osteoporosis)	16+ yr	Jul 2002-
<b>MULTCC6</b>	Number of diagnosed chronic conditions (diabetes, asthma, CVD, arthritis, osteoporosis, mental health)	16+ yr	Jul 2002-
<b>MULTCC6A</b>	Have at least one diagnosed chronic condition (diabetes, asthma, CVD, arthritis, osteoporosis, mental health)	16+ yr	Jul 2002-
<b>DISPREV</b>	Prevalence of disability (activities limited because of any impairment or health problem)	16+ yr	Jul 2002-
<b>CAC1</b>	Prevalence of diagnosed cancer	2+ yr	Jan 2010-
<b>INJYFALL</b>	Had at least one fall in the past year	65+ yr	Jul 2002-

**Table 3: Mental health variables**

Name	Description	Age	Since
<b>MTL16CHD</b>	Have trouble with emotions, concentration, behaviour or getting on with people	2 – 15 yr	Jul 2002-
<b>MTL18CHD</b>	Have been treated for an emotional, mental health or behavioural problem?	2 – 15 yr	Jul 2002-
<b>MENTLCRR</b>	Current mental condition (anxiety, depression, stress related problem and other mental health problem)	16+ yr	Jul 2002-
<b>GHQSUIC</b>	Suicidal ideation	16+ yr	Jul 2002-
<b>K10GRP4</b>	K10 score grouped into four levels of psychological distress	16+ yr	Jul 2002-

**Table 4: Food and nutrition consumption variables**

Name	Description	Age	Other
NUT116	Serves of vegetables usually eaten each day	16+ yr	Jul 2002-
NUT216	Serves of fruits usually eaten each day	16+ yr	Jul 2002-
NUT1	Serves of vegetables usually eaten each day	1+ yr	Jul 2002-
NUT2	Serves of fruits usually eaten each day	1+ yr	Jul 2002-
NUT3	Type of milk usually have	0+ yr	Jul 2002-
NUT4	Frequency of consumption of chips, French fries, wedges, fried potatoes or crisps	1+ yr	Jul 2002-
NUT8	Frequency of consumption of sausage, frankfurters, fritz, salami, meat pies, bacon/ham	1+ yr	Jul 2002-
NUT17GRP	Time per week have take-away meals from places such as McDonalds, HJ's, Pizza Hut	1+ yr	Jul 2006-
NUT18GRP	Average amount of water consumed per day	1-15 yr 16+ yr	Selected months
NUT46GRP	Average amount of fruit juice consumed per day	1+ yr	Mar 2008
NUT47GRP	Average amount of soft drink consumed per day	1+ yr	Mar 2008
NUT50GRP	Average amount of sport drink consumed per day	1+ yr	Jan 2010
NUT43	Ran out of food and could not afford to buy more	All ages	Mar 2008

\* add food insecurity, breastfeeding, folate

**Table 5: Physical activity variables**

Name	Description	Age	Since
SUFFACT1	Sufficient physical activity by Definition 1	16+ yr	Jul 2003
SUFFACT2	Sufficient physical activity by Definition 2	16+ yr	Jul 2003
PA60DLYMIN	Days per week doing vigorous or moderate physical activity for a total of 60min or more	5 – 15 yr	Mar 2010
PA12HRS	Hours per day doing organised sport	5 – 15 yr	Jul 2002-
PA13HRS	Hours per day reading for pleasure	5 – 15 yr	Jul 2002-
PA14HRS	Hours per day studying or doing homework	5 – 15 yr	Jul 2002-
PA15HRS	Hours per day in screen based activity (TV/videos/DVD/internet/computer games)	5 – 15 yr	Jul 2002-
PA16HRS	Hours per day spent sleeping	5 – 15 yr	Jul 2002-
PA21HRS	Hours per day spent studying or doing homework when not at school	5 – 15 yr	Jul 2002-
PA22HRS	Hours per day spent watching TV/videos/DVDs	5 – 15 yr	Jul 2002-
PA23HRS	Hours per day spent using the internet or play computer games	5 – 15 yr	Jul 2002-



**Table 6: Other health risk factors variables**

Name	Description	Age	Since
<b>HBPCURR</b>	Prevalence of current high blood pressure	16+ yr	Jul 2003 -
<b>HBPEVER</b>	Prevalence of ever having high blood pressure	16+ yr	Jul 2003 -
<b>CHOCURR</b>	Prevalence of current high blood cholesterol	16+ yr	Jul 2003 -
<b>CHOLEVER</b>	Prevalence of ever having high blood cholesterol	16+ yr	Jul 2003 -
<b>BMICAT</b>	Categories of Body Mass Index (WHO definition, derived from height and weight)	18+ yr	Jul 2002-
<b>CBMICAT</b>	Categories of Body Mass Index for children	2-17 yr	Jul 2002-
<b>SMSTAT</b>	Smoking status – current, ex or non smoker	16+ yr	Jul 2002-
<b>STALCRSK</b>	Risk of harm from alcohol in the short term	16+ yr	Jul 2002-
<b>LTALCRSK</b>	Risk of harm from alcohol in the long term	16+ yr	Jul 2002-
<b>MULTRF7</b>	Number of health risk factors (current high blood pressure, current high cholesterol, no physical activity, obese, smoke, long term alcohol risk, insufficient fruit and vegetable consumption)	16+ yr	Jul 2003 -
<b>MULTRF7a</b>	Have at least one health risk factor (current high blood pressure, current high cholesterol, no physical activity, obese, smoke, long term alcohol risk, insufficient fruit and vegetable consumption)	16+ yr	Jul 2003 -
<b>MULTRF720</b>	Number of health risk factors (current high blood pressure, current high cholesterol, no physical activity, obese, smoke, long term alcohol risk, insufficient fruit and vegetable consumption)	20-64 yr	Jul 2002-
<b>MULTRF720a</b>	Have at least one health risk factor (current high blood pressure, current high cholesterol, no physical activity, obese, smoke, long term alcohol risk, insufficient fruit and vegetable consumption)	20-64 yr	Jul 2002-

\* add smoking in home,

**Table 7: Health care utilisation variables**

Name	Description	Age	Since
<b>SER6</b>	Number of times of using General Practitioner in the past 12 months	All age	Jul 2002-
<b>SER1.1</b>	Use of General Practitioner in the last four weeks	All age	Jul 2002-
<b>SER1.2</b>	Use of hospital service in the last four weeks (accident & emergency department)	All age	Jul 2002-
<b>SER1.3</b>	Use of hospital service in the last four weeks (hospital admission)	All age	Jul 2002-
<b>SER1.4</b>	Use of hospital service in the last four weeks (hospital clinic)	All age	Jul 2002-
<b>SER1.5</b>	Use of hospital service in the last four weeks (specialist doctor)	All age	Jul 2002-
<b>SER3.5</b>	Use of mental health services in the last four weeks (psychologist)	16+ yr	Jul 2002-
<b>SER3.6</b>	Use of mental health services in the last four weeks (psychiatrist)	16+ yr	Jul 2002-
<b>SER3.7</b>	Use of mental health services in the last four weeks (other community mental health services)	16+ yr	Jul 2002-

**Table 8: Social factor variables**

Name	Description	Age	Since
<b>SOC2</b>	Neighbourhood as a safe place	All ages	
<b>SOC3</b>	Neighbourhood people generally trust one another	All ages	
<b>SOC4</b>	Feel safe in your home	All ages	
<b>SOC5</b>	Have control over the decision that affect my life	All ages	
<b>SOC8</b>	Problem with transport when you want to go about	0 – 15 yr	
<b>CAR1</b>	Provide long-term care at home for a family member or friend	16+ yr	

**Table 9: Days off or limited because of health**

Name	Description	Age	Since
ECO1OFF	Number of days in the last four weeks were totally unable to work or carry out normal duties because of health	16+ yr	
ECO1OFF	Number of days in the last four weeks had to cut down, or did not get as much done as usual because of health	16+ yr	

**Table 10: Children issues related to health**

Name	Description	Age	Since
CHC4	Hours per week in <u>formal</u> childcare	0 – 5 yrs	Jul 2002-
CHD1	Born prematurely	All ages	Jul 2002-
SCH1	Number of days (other than holidays) away from school for any reason	5 – 15 yrs	Jul 2002-
SCH4	Ever unhappy at school	5 – 15 yrs	Jul 2002-
SCH5	Have a special friend or a really close mate	5 – 15 yrs	Jul 2002-
SCH6	Have a group of friends to play with or hang around with	5 – 15 yrs	Jul 2002-
SCH7	Use after school or vocational care	5 – 15 yrs	Jul 2002-
SCH9	Bullied in the last month. Bullying defined as when someone is picked on, hit, kicked, threatened, actively excluded or ignored by other children.	5 – 15 yrs	Jul 2002-
SCH10	Bully was emotional or physical	5 – 15 yrs	Jul 2002-
SCH9B	Bullying can also include cyber bullying, using text messages or racial/cultural insults. Bullied in this way in the last month.	5 – 15 yrs	Jul 2002-

**Table 11: Demographic variables**

Name	Description	Age	Since
AGE	Age of respondents at the time of interview	All age	
SEX	Gender of respondents	All age	
AREA3	Area of residence (metropolitan Adelaide / country)	All age	
DEM10	Current family structure	All age	
WORKSTAT	Current employment status	All age	
COB3GPS	Country of birth in three groups	All age	
DEM18	Language spoken at home other than English	All age	
EDUCATN	Highest educational attainment	All age	
DEM22	Dwelling status	All age	
DEM23	Family's money situation	All age	
INCOME	Annual gross household income	All age	
IRSD	Index of Relative Socio-Economic Disadvantage Quintiles (postcode level), 2001 census	All age	
IRSD06	Index of Relative Socio-Economic Disadvantage Quintiles (postcode level), 2006 census	All age	
ARIAMRR	Aria into Metro, Rural, Remote categories	All age	

## 5. Requesting information from SAMSS

Request of information from SAMSS will need to be approved by the Service Advisory Committee (SAC) in SA Health by submitting a 'Request for Analysis of SA Health Data Form'. You can either

1. complete the 'Request for Analysis of SA Health Data Form' and send it to PROS, or
2. talk to PROS staff to discuss the rationale, feasibility and appropriateness of your request prior to completing the form.

The form can be found on \_\_\_\_\_ or by contacting PROS by:

- Email, [eleonora.dalgrande@adelaide.edu.au](mailto:eleonora.dalgrande@adelaide.edu.au) or [pros@adelaide.edu.au](mailto:pros@adelaide.edu.au);
- Phone, 8313 1208 (Eleonora Dal Grande);
- Fax, 8313 1228;
- delivery to the Population Research & Outcome Studies, Discipline of Medicine , Faculty of Health Science, University of Adelaide, Level 3, 122 Frome Street, Adelaide SA 5000.

Once PROS has received the form:

- PROS will assess the rationale, feasibility and appropriateness of the request from a technical perspective prior to submitting it to SA Health for review and approval.
- PROS will advise you of the name of the responsible Director and the date your request was submitted to the Service Advisory Committee (SAC) in SA Health.
- PROS will circulate your request at the next Service Advisory Committee (SAC) meeting for approval or have it considered out of session and approved by the Chair of SAC.
- Once approval has been provided data will be sent to you in an encrypted format. You are required to arrange your own encryption software (Truecrypt is available as free open source software at <http://www.truecrypt.org/>).

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