Summary

The Vienna Health Report 2016 describes the state of health of the Viennese population, important health determinants (at the behavioural and the environmental level), and selected aspects of Vienna's health care system. Where available, the data is presented by age and by sex or gender, as well as education, income and migration background. Descriptions of developments over time refer to the period from 2005 to 2014, wherever data is available.

Demographic data

In 2014, Vienna had approximately 1.8 million inhabitants – roughly one fifth of the Austrian population. Vienna is the federal province with the highest total population and Austria's only city with over one million inhabitants. Approximately 14 percent of Viennese are younger than 15, and some 22 percent are 60 years or older. 42 percent of Viennese have a migration background, i.e., are first or second-generation immigrants.

Between 2005 and 2014, Vienna's population grew by 8.5 percent. This makes Vienna Austria's fast-est-growing province. This is primarily due to immigration, but the positive rate of natural increase (i.e. birth rate minus death rate) also contributes to this development. Vienna's population is expected to grow by an additional 20 percent by 2050 (to approx. 2.2 million inhabitants). The age group of 60 and over is expected to grow particularly strongly – by 6 percentage points (from 22 to approx. 28%) by 2050.

Life expectancy

Life expectancy at birth is rising in Vienna for both men and women: Since 2005, life expectancy has increased by 1.8 years for men and 1.1 years for women. Girls born in 2014 can expect to live to the age of 82.6, boys to the age of 77.7.

Healthy life expectancy is also rising: Since 1991, it has increased by 9.6 years for men and 7.8 years for women. Girls born in 2014 can expect to spend 64.4 years of their life in good or very good health; the corresponding figure for boys is 65.2 years.

As healthy life expectancy is growing faster than overall life expectancy, the number of years spent in poor health is shrinking.

Self-reported health

Four in five Viennese (age 15 and over) describe their state of health as very good or good. This is a marked improvement from the 2006/2007 results (from 74 to 79%), especially for over-60-year-olds.

Chronic diseases and conditions

In 2014, there were approx. 554,000 people (37% of the population) living with chronic diseases and conditions in Vienna. This is a slight decrease from 2006/2007 (from 39% to 37%).

The most frequent chronic conditions in Vienna are allergies (26%), back pain (22%), hypertension (20%), and neck pain (17%). One in ten Viennese have arthrosis. 4 percent of the population suffer from asthma, 5 percent from chronic bronchitis/COPD, and 6 percent have diabetes. Every year, approx. 8,600 Viennese are diagnosed with type 2 diabetes and over 7,000 Viennese with cancer (with the most frequent localisations being breast, prostate, colon, lung, and cervical cancer). In 2014, some 3,600 Viennese suffered an acute myocardial infarction and just under 3,000 had an ischaemic stroke.

While allergies, respiratory diseases (COPD/bronchitis) and ischaemic strokes have increased, as has the incidence of cancer in women, the incidence and prevalence of diabetes as well as the incidence of cancer in men have remained largely unchanged. On the other hand, downward trends were re-

ported for acute myocardial infarction, intestinal and skin cancer incidence, prostate cancer, and cervical carcinoma.

Mental health

11 percent of Viennese (approx. 165,000 people) have been diagnosed with depression. Approximately 12,000 Viennese received acute inpatient or semi-inpatient treatment for a psychiatric diagnosis in 2014 (downward trend). The most frequent causes of inpatient or semi-inpatient treatment were affective disorders, followed by organic, including symptomatic, mental disorders, and mental and behavioural disorders due to psychoactive substance use. Approximately 3,600 people a year are committed to psychiatric facilities involuntarily. 980 Viennese a year participate in an inpatient rehabilitation programme for a psychiatric diagnosis (upward trend), especially people between ages 45 and 54. Approximately 220 people a year commit suicide in Vienna (downward trend). Three in four of them are men. In 2014, sick leave for mental health reasons accounted for approx. 2 percent of all cases of sick leave (rising trend) and 9 percent of all sick leave days (due to their above-average duration).

Injuries

Injuries are one of the main causes of premature mortality, in particular in adolescents and men. However, there was a marked decrease in fatal injuries in Vienna in the decade under review. In 2014, some 10 percent of Viennese aged 15 and over were injured in leisure, household or road accidents – men more often than women and younger people more often than older age groups. Pertrochanteric fractures (fractures of the femur) and femoral neck fractures caused by falls went down considerably between 2005 and 2014, both in the age group of 60 to 74-year-olds and among those 75 and older.

Capacity to perform everyday activities

Some 442,000 people aged 15 and over in Vienna (29% of the population) are limited in performing activities of daily life by health issues. Their share decreased from 2006/2007 to 2014 (from 34 to 29%). 18 percent of the population aged 65 and over (approx. 52,000 people) cannot fully perform basic personal care and everyday activities. 22 percent need more assistance with these activities. 32 percent of Viennese aged 65 and over face limitations in terms of housekeeping (approx. 92,000 people). 31 percent of these need more assistance.

Quality of life

The Viennese rate their quality of life (in general) at an average of 73 out of 100 points. Physical wellbeing is rated highest, social wellbeing lowest. However, subjective quality of life has decreased in Vienna (as in Austria overall) since 2006/2007. In Vienna, this deterioration affects the categories of physical, mental and social wellbeing. Viennese with chronic diseases and/or health-related limitations in performing activities of daily life rate their quality of life considerably lower than people without these health issues. This is true for Austria overall, as well.

(Premature) mortality

Mortality continued to sink in Vienna in the decade under review. This includes the main causes of death – cardiovascular diseases, cancer, poisonings and injuries.

Approx. 4,300 Viennese died in 2014 before the age of 70; men more often than women. Cancer remains the main cause of premature death, followed by cardiovascular diseases. Premature mortality also decreased markedly in the decade from 2005 to 2014, by 12 percent for men and 6 percent for women.

Risk factors for chronic diseases and health problems

43 percent of Viennese (15 years and over) are overweight or obese, only 33 percent eat fruit and vegetables daily, and only 24 percent meet the recommendations for health-enhancing physical activity. 33 percent smoke daily.

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From 2006/2007 to 2014, the share of obesity in men increased both among 15 to 29-year-olds and those aged 60 and over. Furthermore, there was also an increase in overweight in 15 to 29-year-old men. In contrast, the share of overweight and obese women decreased in all age groups in the same time frame, most markedly among 30 to 59-year-olds.

The share of Viennese aged 15 and over who smoke daily increased by 8 percentage points in the same period: by 3 percentage points in men and by 12 percentage points in women.

The HBSC study found an increase in daily fruit and vegetable consumption in 11- and 15-year-olds. In these age groups, physical activity (in days per week) increased as well. The share of 15-year-olds who smoke daily decreased by over 50% between 2006 and 2014, and a downward trend can also be observed in the alcohol consumption of this age group.

Health-relevant circumstances

In 2014, between 383,000 and 400,000 people in Vienna were at risk of poverty (23%) and approx. 283,000 were materially deprived (16%). Without social welfare benefits (basic benefit, family, unemployment, health and education benefits and services, housing assistance, and welfare benefit) approximately one in three Viennese would be at risk of poverty. Since 2009, the share of materially deprived Viennese has sunk (by 4 percentage points), and since 2011, the share of persons at risk of poverty has been decreasing as well.

In 2014, 24 percent of Viennese (ages 25 to 64) had a university degree, and another 24 percent had only completed compulsory schooling. 43 percent of Viennese had received an upper secondary school leaving certificate or a higher degree. From 2008 to 2014, the share of university graduates increased from 20 to 24 percent and the share of those with compulsory schooling only from 22 to 24 percent. The share of early leavers from education and training was 9 percent in 2014. The results of the HBSC study show a marked improvement in school climate at Vienna's secondary schools from 2010 to 2014 (rising from 65 to 71 out of 100 available points).

In 2014, 104,000 people in Vienna were unemployed, which is an unemployment rate of approx. 12 percent. Unemployment increased considerably in Vienna (and overall Austria) between 2008 and 2014. Persons aged 50 and over, immigrants, people with a low level of formal education and people who are hard to place for health reasons are particularly affected by unemployment.

One in three working Viennese were in non-standard employment in 2014, i.e., part-time or temporary employment or a form of employment that is not subject to compulsory social insurance. Women account for 65 percent of these non-standard employment situations. 71 percent of employed people are subjected to at least one type of physical strain in their work (586,000 people), and 40 percent experience job-related strain from tight deadlines and high workload (325,000 people). Since 2007, physical strain, tight deadlines and high workload have increased in Vienna (and Austria as a whole). On the other hand, work-related accidents have gone down.

Just under half of all Viennese (46 percent) have a strong network of social relationships, while 54 have only limited social capital. The latter is particularly true for elderly people and those with chronic diseases or health-related impairments in their everyday activities.

25 percent of Viennese (approx. 435,400 persons) are subjected to average traffic noise of over 60 dB in their homes. Approx. 30 percent (some 514,000 people) are exposed to a noise level of over 50 dB at night. 19 percent of Viennese age 15 and over (approx. 272,000 persons) report that they feel highly or very highly affected by noise at home, an increase by 2 percentage points since 2007. The main causes of excessive noise are traffic (lorries and cars), construction sites, and neighbours. Excessive noise caused by traffic went down a bit from 2007, while noise from neighbours increased.

Air quality has improved considerably: Nitrogen dioxide concentration, PM10 and PM2.5 emissions and the annual average for ozone have all gone down since 2005.

Health care

The City of Vienna has a good network of health care services. There are approximately 1,400 GPs, 3,600 specialists and some 950 dentists in private practice. There are also numerous hospital outpa-

tient clinics, some 220 independent walk-in clinics, and approx. 320 public pharmacies. In terms of inpatient care, Vienna's population is served by 30 acute care hospitals with a total of 10,900 acute beds and inpatient rehabilitation facilities with approx. 350 beds.

Psychosocial care is provided by 11 psychiatric outpatient departments, approx. 350 psychiatrists in private practice, 45 child and adolescent psychiatrists, and approx. 390 physicians with a PSY-III diploma (psychotherapeutic medicine). Furthermore, 3,400 people in Vienna are licensed for the independent practice of psychotherapy and some 2,900 people are on the list of clinical psychologists. The Vienna Psychosocial Services provide care, counselling, a psychosocial emergency service, assisted living, services that help provide daily structure, labour market inclusion assistance, and mobile job support. For inpatient mental health care, the City of Vienna has seven wards for general psychiatry (721 beds), three for patients with an addiction diagnosis (382 beds, among them 6 day clinic places) and two for child and adolescent psychiatry (61 beds, 5 of them day clinic places).

The mobile care services provide 5.7 million hours of care annually. Residential care facilities and nursing homes for the elderly have approx. 9,300 places, and another approx. 9,200 places are available in alternative forms of residential care.

Health promotion (HP)

In the last few years many different health promotion measures have been implemented by numerous actors. Among them are the City of Vienna and its health promotion agency Wiener Gesundheitsförderung (WiG), the Austrian health fund Fonds Gesundes Österreich (FGÖ), various associations, over 100 schools, 66 HP-certified businesses, 9 hospitals, the Vienna Regional Health Insurance Fund (WGKK), and many others. A large number of projects and programmes were started in the period under review.

Equal opportunities

There are visible differences by education and income for health outcomes (self-rated health, chronic diseases, health-related limitations in performing activities of daily life, quality of living), for a number of health determinants (overweight and obesity, hypertension, fruit and vegetable consumption, health-enhancing physical activity, smoking, unemployment, social capital) and health care (cancer prevention, use of medication, visits to doctors, use of outpatient and acute inpatient services in hospitals), both for Vienna and for Austria overall. These differences are mostly to the detriment of those with lower education and income. The effects of education and income appear to mostly be parallel. Furthermore, there are numerous differences by gender and migration background, but these do not follow a uniform pattern.

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