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HEALTH AND MORBIDITY IN THE ACCESSION COUNTRIES COUNTRY REPORT – HUNGARY

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Health and Morbidity in the Accession Countries Country Report – Hungary

ENEPRI Research Report No. 28/November 2006

Edit Remák, Róbert I. Gál and Renáta Németh*

Abstract

Expenditure on medical treatment has tended to rise as a proportion of national income throughout the European Union. A particular concern is that with an ageing population and therefore the prospect of more elderly persons, the pressures on expenditure for health care will increase further. The Ageing, Health Status and Determinants of Health Expenditure (AHEAD) project has aimed at refining existing estimates of the links between ageing, reported states of health and use of medical services.

This research report analyses the prevalence of good and poor health and the related use of medical services by individuals in different age groups in Hungary. The report describes morbidity owing to specific diseases (high blood pressure, high cholesterol levels, heart attack, diabetes and anxiety/depression) in Hungary and identifies the social and economic factors behind good or poor health status. It goes on to outline health service utilisation by people in good or bad health and to analyse the influence of age and other factors on health status and service utilisation. The report further studies the use of health care resources by individuals not covered in household surveys.

The analysis relies on data collected by the National Health Interview Survey (NHIS) in 2003. Data weights were devised to allow for an unbiased estimation of population variables. Associations between variables and differences across categories were examined using cross-tabulations and were assessed by Pearson's Chi-square tests. To analyse influence, logistic regression models were built using a stepwise selection method with removal testing based on the likelihood ratio statistic.

According to historical data and predictions, the population of Hungary is ageing. Further, age has had a significant impact on the prevalence of selected diseases and self-reported health status. A significantly higher proportion of older persons reported that they were in bad health. Individuals with bad health were more likely to have had contact with health care services and to have had a greater number of visits. With these trends in population ageing, pressures for more expenditure on health care are likely to increase.

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1. Introduction

Expenditure on medical treatment has tended to rise as a proportion of national income throughout the European Union.[1] A particular concern is that with an ageing population and therefore the prospect of more elderly persons, the pressures on expenditure for health care will increase further. The Ageing, Health Status and Determinants of Health Expenditure (AHEAD) project has aimed at refining existing estimates of the links between ageing, reported states of health and use of medical services.

The research described in this report has been carried out as part of the ENEPRI AHEAD Work Package II (WPII), which is devoted to assessing health and morbidity in five accession countries.

2. Objectives

The main objective of WPII is to analyse the prevalence of good and poor health and the use of medical services by people in good or poor health at different ages. We have sought to achieve this objective through a series of tasks:

1) describe morbidity owing to specific diseases in Hungary;

2) identify the social and economic factors behind good or bad health status;

3) describe health service utilisation by people in good or bad health;

4) analyse the influence of age and other factors on health status and on service utilisation; and

5) study the use of health resources by individuals not covered in household surveys.

This report is structured according to the above-described tasks. In section 3 a brief description of the demographic transition, the current health status of the Hungarian population and the health services available in Hungary is given. Section 4 describes the methods used for the analyses undertaken. Section 5 shows the results according to the project tasks, while section 6 presents the conclusions.

3. Hungary – Key facts, current health status and health services

The Republic of Hungary is located in the Carpathian basin, which lies in Central Europe. The country covers a territory of 93,000 km^2 (1% of the size of Europe) with more than half of the area being lowlands surrounded by mountain ridges and hills. The Duna (Danube) and Tisza rivers, and Lake Balaton (the biggest freshwater lake in Central Europe), are the country's main sources of water.

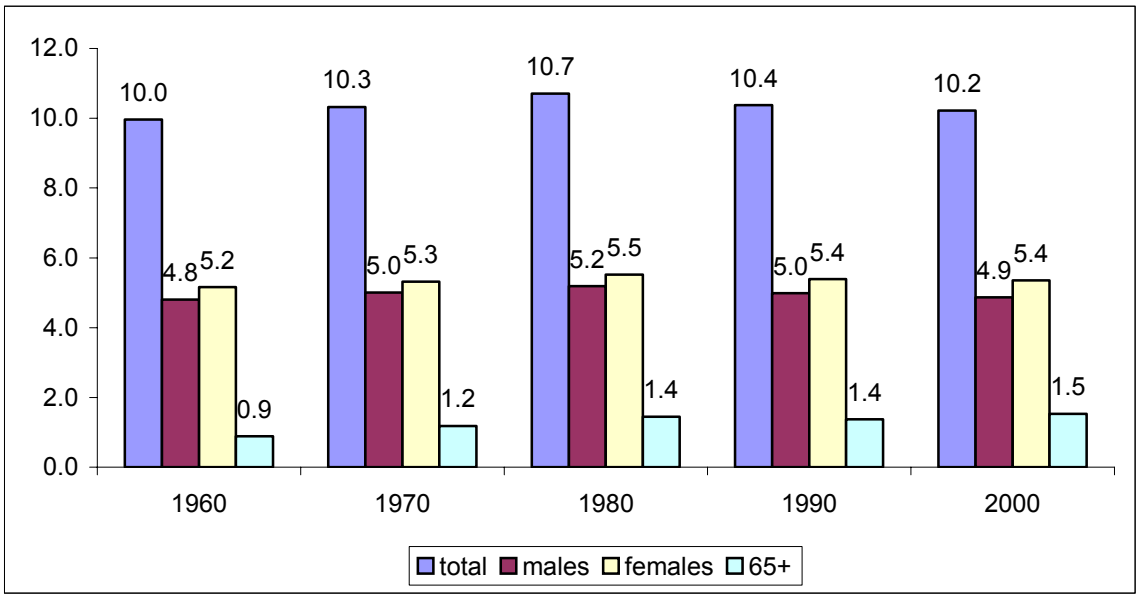
[1] Contributions from Péter Józan and Éva Orosz are gratefully acknowledged.

The population of Hungary was approximately 10.1 million on 1 January 2004, while another approximately 5 million Hungarians live in neighbouring countries or overseas (KSH, 2004). The GDP per person was $12,213 in 2002, calculated using purchasing power parities, and the unemployment rate was 7% (WHO, 2002).

3.1 The demographic transition

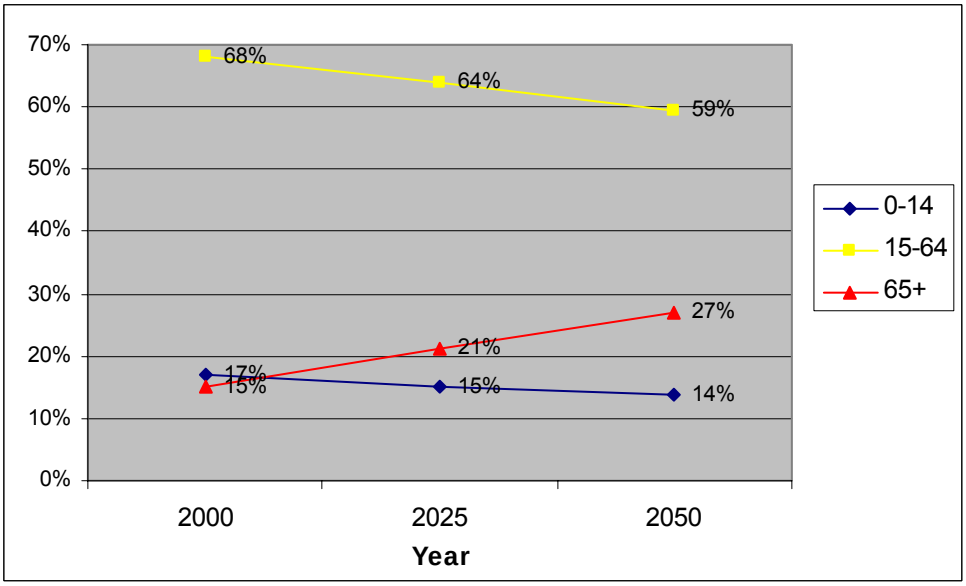
The population reached its peak, 10.7 million, in 1981 (see Figure 1). Since then it has been slowly declining and is expected to do so in the foreseeable future. The base scenario of Hablicsek (2003) predicts that the population will decrease to 8.7 million by 2050, which is about the same as that of the 1930 census.

Figure 1. Population (millions)



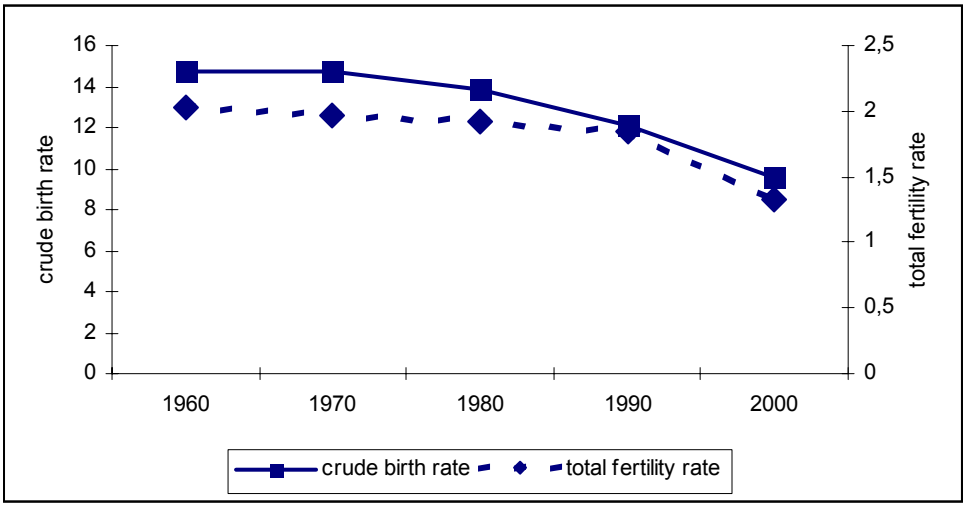
The contraction of the population since the 1980s was preceded by the total fertility rate (TFR) falling below the level of reproduction (about 2.1) as early as in 1959. Since then fertility has continued to fall (see Figure 2), although at a less dramatic speed than in some other Eastern European or Mediterranean countries.

Figure 2. Population predictions (2000-50)



Children under age 15 comprised 17% of the population and persons aged 65 and older comprised 15% in 2000 (KSH, 2004). Hablicsek (ibid.) expects the population aged 65 and older to rise to 21% by 2025 and to 27% by 2050 (see Figure 3). In parallel, the proportion of children and economically active age groups will decrease.

Figure 3. Fertility



The population is decreasing, and the number of births, having stagnated for some years, fell again in 2003. In Hungary, at last year's level of fertility, 100 women would bring 128 children into the world during their lives – the lowest figure ever and far short of the simple reproduction level (HCSO, 2004). With the present rate of fertility, the numbers of children born and growing up in Hungary will be some 38% lower than among their mothers' generation (Table 1). The fertility rate in Hungary is below the middle range in European terms, and is lower than the EU average, but the fourth highest among the accession countries, after Cyprus, Malta and Estonia.

Table 1. Live births per 1,000 and fertility rates (1949-2003)

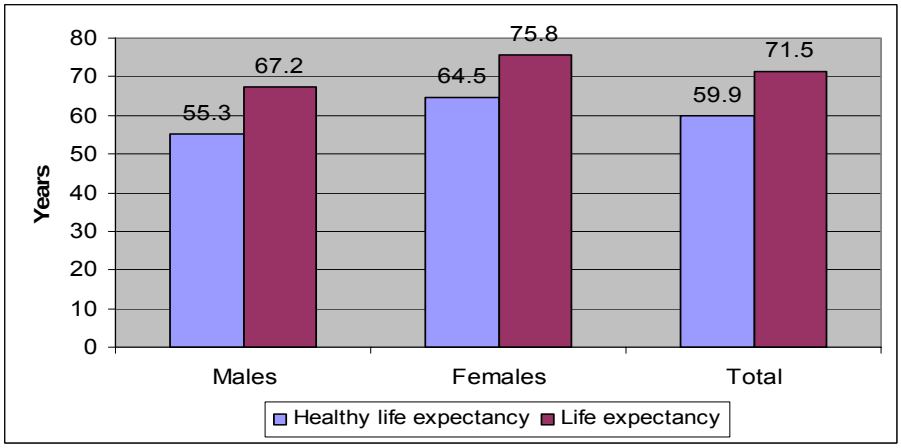
Description	1949	1990	2000	2003
Live births per thousand 15-49 year old women	75.4	49.4	38.1	37.8
Total fertility rate	2.54	1.84	1.33	1.28
Gross reproduction rate	1.223	0.900	0.643	0.617

Source: HCSO (2004).

3.2 Health status of the population

Figure 4 shows current life expectancy and healthy life expectancy at birth. Hungary has the lowest life expectancy in Western and Central Europe for most adult age/gender groupings, especially for men aged 40-60 (European Observatory on Health Care Systems, 1999).

Figure 4. Life expectancy and healthy life expectancy at birth



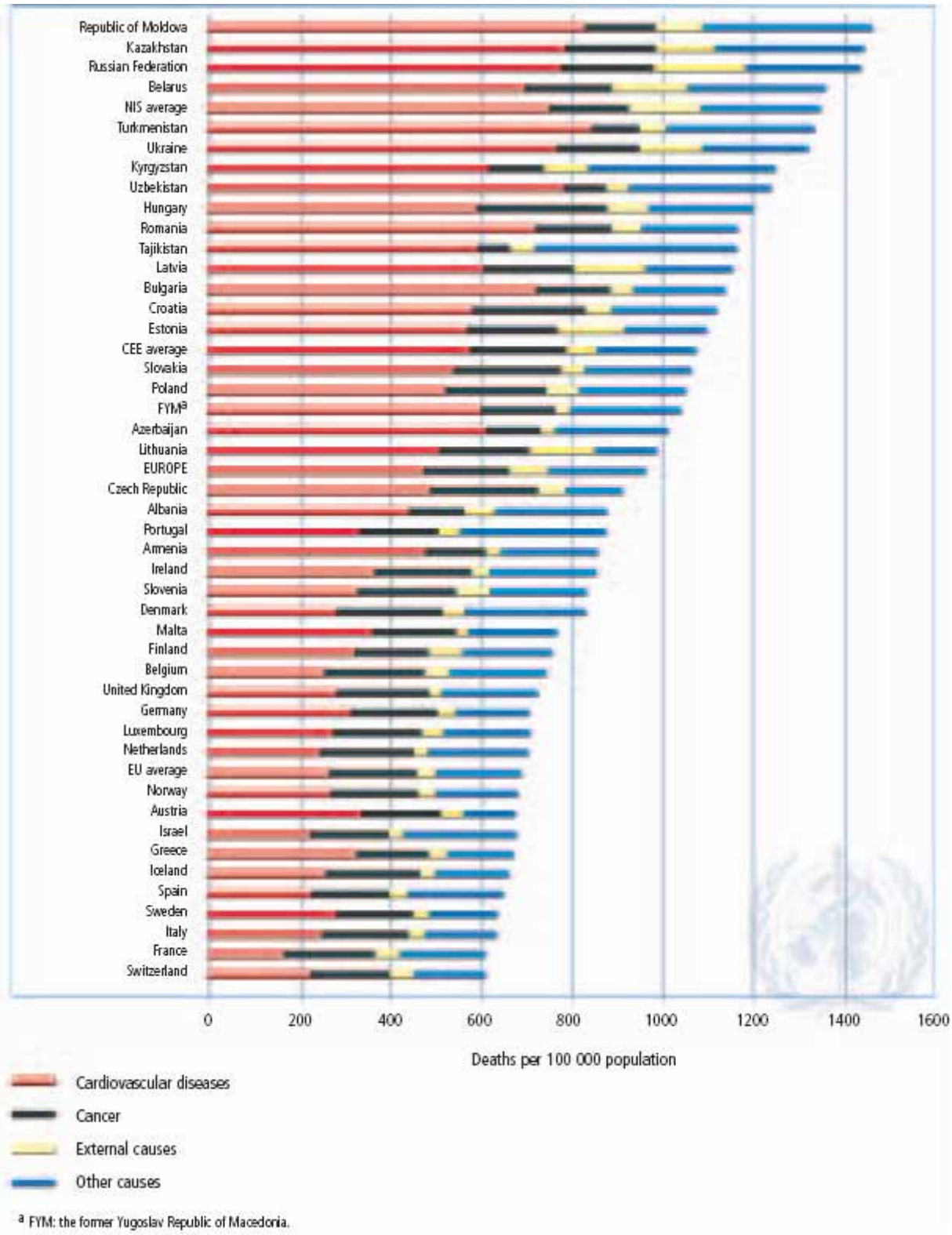
Mortality rates, reported in Table 2, have not changed since 1980. With these rates, Hungary is well above the EU average (see Figure 5). Of the neighbouring countries, only Ukraine had higher mortality rates. Perinatal mortality was 10.04 per 1,000 live births in 2002 (WHO, 2002).

Table 2. Mortality rates per 1,000 population (1980-2003)

Year	Men	Women	Total
1980	14.8	12.4	13.6
1990	15.4	12.7	14.0
2001	14.1	11.9	13.0
2002	14.3	12.0	13.1
2003	14.6	12.4	13.4

Source: KSH (2004).

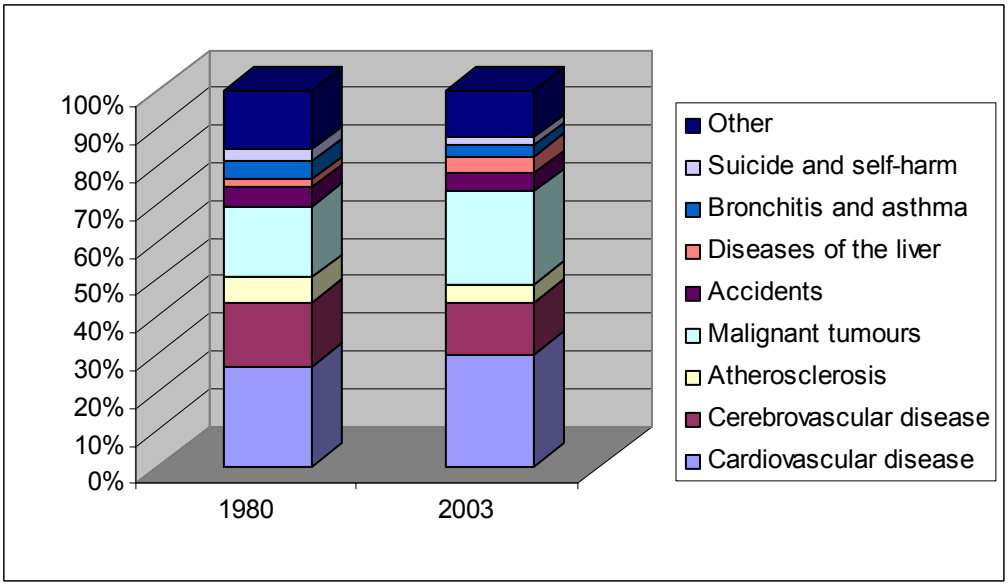
Figure 5. Mortality rates by leading causes of death in the WHO European region



Source: WHO (2002).

As shown in Figure 6, cardiovascular, cerebrovascular, circulatory diseases and cancer account for over 60% of deaths. While the mortality rate owing to ischaemic heart disease remains high, the rates related to cerebrovascular disease have fallen slightly. Deaths from chronic liver diseases and cirrhosis have risen dramatically. Unhealthy lifestyles, such as high consumption of alcohol, increasing rates of smoking and a high fat and high sugar diet, are thought to be important causative factors in explaining these trends. The factors contributing to the health status of a population are complex, however, and include social and economic factors as well as access to good health services. The health status of the Roma minority (~500,000 in 1998) is of particular concern. The Roma have less income than the rest of the population, many live in slum conditions, their infant mortality rates are high and life expectancy is much lower than for the rest of the population.

Figure 6. Leading causes of death in 1980 and 2003



Source: KSH (2004).

3.3 The health care system

Health insurance[2]

The history of health insurance in Hungary shows a clear trend towards centralisation and providing cover for all citizens. In chronological order, Hungary was the third state in Europe in which the insurance obligation in case of sickness was enacted by law, on 1 April 1892. Sick-relief funds provided health care services, medicines, medical aids, sick pay, maternity benefit and funeral allowances. The year 1907 was the next milestone in the development of sickness insurance, when employers' liability insurance for industrial and commercial workers was introduced. The Act on sickness and employers' liability insurance that was enforced in 1928 regulated the services provided by the OTI (National Social Insurance Institute) for decades. Unification and amalgamation of social insurance institutions came to an end in 1950. The SZTK (Social Insurance Centre of Trade Unions) was set up. At the same time, the county sub-centres and sub-offices of the SZTK were established to fulfil the local tasks related to social

[2] This section draws on OEP (2005).

insurance. As a result of a long codification, Act II of 1975 on Social Insurance separated health care services from social insurance and every citizen became authorised to use them. From 1 July 1984 the government replaced trade unions in the field of social insurance management. The OTF (National Social Insurance Directorate-General) became the central organisation for social insurance.

According to a decision made by parliament, on 1 January 1989 social insurance was separated from the state budget, and started operating as a fund that benefited from state guarantee. The contribution to social insurance, state subsidy and other social insurance fees served as its sources. Since 1 January 1992 the costs of preventive/curative care have been financed by the fund. In 1992 the Health and Pension Insurance Fund was established in order to set up independent insurance branches. From 1993 to 1998 the Health Insurance Authority supervised the fund, but in 1998 parliament ordered state control again over social insurance.

On 1 January 1997 contributions to health insurance were introduced, which are paid by employers to supplement the funds for health care services. On 1 January 1999 the Tax Control Office (APEH) took over the collection and executive tasks connected with contributions to social insurance, which involved approximately 2 million current accounts. Since that time APEH has been responsible for collecting and administrating contributions.

The health insurance system provides benefits for the insured, those entitled to health care services in terms of the law, their dependents and Hungarian citizens paying contributions to health insurance. Health insurance also finances the care provided to foreigners who have entered into a specific agreement.

The benefits in kind (health services provided by the suppliers financed by the National Health Insurance Fund (NHIF)) and benefits in cash provided by the NHIF are detailed below.

Health services provided free of charge according to the ‘in kind’ principle are:

- Preventive medical examinations
- Medical care by family physicians (primary health care services)
- Dental care
- Out patient care
- Inpatient care
- Delivery care
- Medical rehabilitation
- Patient transportation
- Provision of health care related to accidents

Cost allowances for health care services are provided for:

- Drugs
- Medical aids
- Reimbursement of travel costs
- Reimbursement of international medical costs

Co-payments are charged in the following instances:

- Orthodontic treatment for those under the age of 18
- Dental care and replacement for those over the age of 18
- Extra meals and accommodation for inpatients
- Sanatorium treatment

Medical services covered by neither the NHIF nor the state are classified as out-of-pocket expenses. Some out-of-pocket payments are for medicines and medical aids. Finally, informal gratitude payments constitute another category of out-of-pocket expenditure. The latter can be estimated at some 1 to 3% of total health care expenditure.

Membership in the health insurance scheme is compulsory and opting out is not permitted. Population coverage is virtually universal with only about 1% of the population not covered. Health services are provided on the basis of a health insurance personal identification number. There is currently no system in operation to check the payment of contributions at the level of providers. The health insurance premium is split between employer and employee and is, in effect, a payroll tax. The self-employed are also obliged to participate in the scheme, wherein they must pay at least 11% of the actual minimum wage (European Observatory on Health Care Systems, 1999). The possibility to form voluntary health funds was laid down in law in 1993. The range of services that can be covered by the voluntary fund is also regulated by law. The regulation of such private funds remains minimal.

The financing of health care operates within a dual system. The NHIF finances the recurrent costs in a framework of contracts with health care providers. The NHIF operates independently, covers the entire population and provides funding for all services. The role of private and supplementary insurance and that of health services is marginal. The investment and development costs of the health care institutions do not burden the budget of the Health Insurance Fund. Accordingly, their costs are covered by the owners of the institutions or by the state.

Health care provision

The 1949 Constitution of Hungary declared health to be a fundamental right for which the state is held responsible. Until 1989 the state was exclusively responsible for both the financing and delivery of health care services. This led to a hierarchical model of health service delivery, focusing more on quantitative achievements (such as the number of hospital beds), than quality of care.

Act CLIV of 1997 on Health assigned responsibility for health services to parliament, the government, the Ministry of Health, the National Public Health and Medical Officer Service, and the local governments. The ownership of health institutions is mixed, with approximately 98% of them being owned by local governments (communities). Health services were not privatised. Some supplementary services (e.g. provision of laboratory tests) may be undertaken by private companies.

Health care is provided in two tiers:

- primary care – general practitioners (GPs); and
- secondary care – outpatient specialist and inpatient services.

The GP system replaced the previous primary care districts in 1992. Since that time GPs have had the opportunity to work not as public servants but to contract with the NHIF as entrepreneurs (termed ‘functional privatisation’). The proportion of GPs working as entrepreneurs increased from 2.3% in 1992 to 91.2% in 2002. GPs are supposed to act as gate-keepers. Yet their gate-keeping role is limited, as many outpatient specialist services can be approached without referral.

Hungary spent 7.8% of its GDP on health care in 2002 (see Table 3) (OECD, 2004). This proportion is a return to the level of the early 1990s after a decrease in the second half of the 1990s. It should be noted, however, that official figures on health expenditures may be misleading as the magnitude of out-of-pocket ‘gratitude payments’ is considerable. Gratitude

payments are direct and unaccounted payments to medical staff for services otherwise reimbursed by the NHIF. Their magnitude can only be assessed using surveys and interviews.

Table 3. Health care expenditures

	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002
Total expenditure on health (% GDP)	7.7	7.7	8.3	7.5	7.2	7	7.3	7.4	7.1	7.4	7.8
Public expenditure on health (% total exp.)	88	87	87	84	82	81	75	72	71	69	70
Of which:											
General government without Social security	19	19	20	17	14	14	12	12	11	12	13
Social security	69	69	68	67	67	67	62	61	59	57	57
Private expenditure on health (% total exp.)	12	13	13	16	18	19	25	28	29	31	30
Of which:											
Out-of-pocket payments	12	13	13	16	18	19	22	25	26	28	26
Private insurance	–	–	–	–	–	–	0.0	0.1	0.2	0.3	0.4
All other private funds	–	–	–	–	–	–	2.9	2.7	2.8	3.0	3.1

Source: OECD (2004).

Primary care (by GPs) is financed according to an age-adjusted capitation system with supplementary payments (e.g. for certain regions, qualifications and additional services). Outpatient services have fee-for-service financing based on World Health Organisation (WHO) international classifications (ICPM/OENO) and using point values (adapted from the German health care system). Within the category of inpatient care, active beds are financed according to a homogenous disease-group system (similar to diagnosis-related groups or DRGs), while chronic beds are financed according to a differentiated care-day system.

The numbers of health personnel are reported in Table 4.

Table 4. Health care personnel per 100,000 population

Personnel	Number per 100,000
Physicians	361.42
Nurses	286.20
Dentists	57.83
Pharmacists	48.93

Source: WHO (2002).

4. Methods

4.1 Data sources

Most analyses presented here are based on the **National Health Interview Survey (NHIS)** carried out by the Johan Béla National Center for Epidemiology (2003). The survey was first undertaken in the year 2000 and then repeated in 2003. This report utilises the more recent dataset from 2003.

The NHIS included a random sample of 7,000 individuals, citizens of Hungary, aged 18 and over, from 447 communities across the country, who were selected from the registry of the national census. Data were collected through interviews carried out by the staff of TNS Hungary – a company awarded the project through an open public procurement tender. When compiling

the community sample the primary focus was to give proportional representation to each of the 19 counties while also ensuring that communities were represented proportionally on the basis of their size. Data collection took place between 30 October and 19 December 2003. The interviewers of TNS Hungary were able to successfully complete 5,072 questionnaires, representing a 72% response rate. It is important to note that a questionnaire-based health survey carried out on a representative sample of the population is also capable of providing data on individuals who have not sought medical treatment for their health problems.

The respondents of the survey are representative of the entire Hungarian adult population by age, gender and place of residence (more precisely by county of residence and by the size of their community). Therefore, the estimates presented here do not solely refer to the respondents, but are valid for the entire Hungarian adult population. The questionnaire used in the survey was developed in line with the recommendations of relevant international professional forums – the WHO and Eurostat among others – and also relied on existing national survey experience. Furthermore, the design for the NHIS 2003 questionnaire ensured that the data collected provides comparison with the results of both the NHIS 2000 and surveys carried out in other countries.

All documentation related to the NHIS is available on-line (see Johan Béla National Center for Epidemiology, 2003). Among others, information was collected on the following areas:

- socio-economic status – age, gender, marital status, living conditions, education, occupation and income;
- self-reported health status and functional capabilities;
- self-reported morbidity (confirmed by diagnosis) – hypertension, myocardial infarction, other cardiovascular diseases, stroke, other cerebrovascular diseases, high total cholesterol level, malignant tumours, diabetes, asthma, allergies, bronchitis, osteoporosis, anxiety or depression, arthritis; and
- use of medical resources in the previous 12 months – emergency room visits, GP visits, dental visits, outpatient visits, length of inpatient hospitalisation and drug prescriptions.

Information about people living in institutions was collected as part of the **2001 Census** (KSH, 2003). The census collected data on the type and features of the institutions, as well as on the socio-demographic characteristics of the people living in them. For the purposes of this report, data on the following types of institutions was selected:

- permanent social institutions for adult protection, which includes institutions providing permanent care, medical attendance or rehabilitation for the elderly, those with disabilities, those suffering from psychiatric or addictive illnesses and for the homeless;
- temporary social institutions for adult protection, which includes institutions providing temporary care or overnight accommodation for the elderly, those with disabilities, those suffering from psychiatric illnesses and for the homeless; and
- inpatient hospitals, which includes institutions providing temporary or permanent care and medical attendance for the sick, women in labour and their newborns, or for those with physical or psychiatric disabilities.

4.2 Analyses

4.2.1 Dataset variables and descriptions

This section gives a brief description of the variables selected from the NHIS 2003 dataset for the analyses, their interpretation and classification.

Socio-economic variables

Respondents were classified into three groups according to their age at the time of the interview:

- Age group 1 – 18-34
- Age group 2 – 35-64
- Age group 3 – 65 and older

Gender included the usual two categories: male and female.

Information on marital status was originally collected using six categories. These were collapsed into three categories to allow for more meaningful analyses:

- Single
- Married or living with partner
- Separated, divorced or widowed

The variable for the number of people living in the household was dichotomised:

- One or two people living in the household
- Three or more people living in the household

Educational status was collected in five categories according to the highest attained educational level corresponding to the Hungarian school system:

- Primary school only
- Secondary school without a graduation test
- Secondary school with a graduation test
- Three-year university degree (corresponding to a BA or BSc degree)
- Five-year university degree (corresponding to an MA or MSc degree)

The degree of economic activity was captured according to the following categories:

- Working
- Unemployed
- Disability pensioner – of working age, but not working and claiming a pension based on a documented disability
- Pensioner
- Otherwise inactive

The occupational status of respondents was classified as:

- Executive status
- Non-executive professional
- Independent tradesman, service provider, or professional
- Skilled worker
- Non-skilled or agricultural worker
- Not working

The definition of place of living was derived and categorised based on the population size of the township in which the respondent resided at the time of the interview.

In the survey, information on monthly household income was collected and groups devised according to quintiles:

- Less than HUF 65,000
- HUF 65,000–94,000
- HUF 94,000–120,000
- HUF 120,000–170,000
- More than HUF 170,000

For reference, the statutory minimum wage is currently set at HUF 53,000 per month.

Self-reported health status

To assess self-reported health status, the NHIS 2003 included the following question: "Looking back at the last 12 months, how was your health usually?" Answers were recorded in five categories:

- Very good
- Good
- Average/satisfactory
- Poor
- Very poor

The variable was dichotomised for some of the analyses according to the following rule:

- Bad – very poor or poor
- Good – average, good or very good

Morbidity

Data on the presence or history of chronic conditions was collected. The diagnosis had to be confirmed by a physician. The following diseases were selected for the analyses:

- High blood pressure
- High cholesterol levels
- Heart attack
- Diabetes
- Anxiety or depression

Contact with health services during last year

To assess health-care service utilisation, two types of questions were asked. The first type established whether the interviewee had had any contact with the specified health services during the previous 12 months. The second type of question established the number of visits or the number of days spent in hospital during the previous 12 months. The kinds of services included in the analyses were:

- GP
- Outpatient care – ambulatory care
- Inpatient care
- Dentistry

4.2.2 Statistical analyses

Analyses were carried out using SPSS 10.0 for Windows®.

Data weights were devised to allow for an unbiased estimation of population variables. The final weights were calculated from a combination of three weights:

- The first weight (base weight) was corrected for the uneven probabilities of the sampling method to be chosen for the sample.
- During the interviews some individuals were unreachable at their address or denied participation. The second set of weights corrected for bias due to non-response.
- A strong association can be assumed between gender, age, the size of the township and responses to the questionnaire. Representativeness across these factors, however, was not guaranteed during sampling. Therefore, as a last step, the sample was layered according to these factors to reproduce their population proportions.

Associations between variables and differences across categories were examined using cross-tabulations and assessed by Pearson's Chi-square tests (SPSS CROSSTABS procedure).

Logistic regression models were built using a stepwise selection method with removal testing based on the likelihood ratio statistic (SPSS syntax: LOGISTIC REGRESSION /METHOD=FSTEP(LR)/ /CRITERIA PIN(.05) POUT(.10) ITERATE(20) CUT(.5)). All categorical variables were redefined as a series of dummy variables, with the worst category serving as the base case and individuals belonging to other categories represented by indicator dummies. Table 5 shows the coding of the dummy variables.

Thus the results of the logistic regression analyses should be interpreted in comparison with the following reference case:

- Age group – 18-34
- Gender – male
- Single with one or two persons in the household
- Education – primary school only
- Household income of <=HUF 50,000 per month
- Living in a township with <1,000 inhabitants
- Occupation – not working

It should be noted that the NHIS 2003 is a cross-sectional dataset. Accordingly, the conclusions drawn from the analyses will be valid for the current situation and current generations, but do not necessarily predict the health service utilisation behaviour of the population over time.

Table 5. Dummy variable coding of the independent variables

Variable	Category	Parameter coding				
		(1)	(2)	(3)	(4)	(5)
Occupation	Executive status	1	0	0	0	0
	Non-executive professional	0	1	0	0	0
	Independent tradesman, service provider, professional	0	0	1	0	0
	Skilled worker	0	0	0	1	0
	Non-skilled or agricultural worker	0	0	0	0	1
	Not working	0	0	0	0	0
Population categories	<1,000	0	0	0	0	0
	<3,000	1	0	0	0	0
	<5,000	0	1	0	0	0
	<10,000	0	0	1	0	0
	<50,000	0	0	0	1	0
	50,001+	0	0	0	0	1
Household income categories	<=65,000	0	0	0	0	–
	65,000–94,000	1	0	0	0	–
	94,000–120,000	0	1	0	0	–
	120,000–170,000	0	0	1	0	–
	>170,000	0	0	0	1	–
Education	Primary school	0	0	0	0	–
	Secondary school without graduation test	1	0	0	0	–
	Secondary school with graduation test	0	1	0	0	–
	Three-year university degree (BA, BSc)	0	0	1	0	–
	Five-year university degree (MA, MSc)	0	0	0	1	–
Age group	18-34	0	0	–	–	–
	35-64	1	0	–	–	–
	65+	0	1	–	–	–
Marital status	Single	0	0	–	–	–
	Married or living with a partner	1	0	–	–	–
	Separated, divorced, or widowed	0	1	–	–	–
No. of people in household	1–2	0	–	–	–	–
	3+	1	–	–	–	–
Gender	Male	0	–	–	–	–
	Female	1	–	–	–	–

Source: Authors' data.

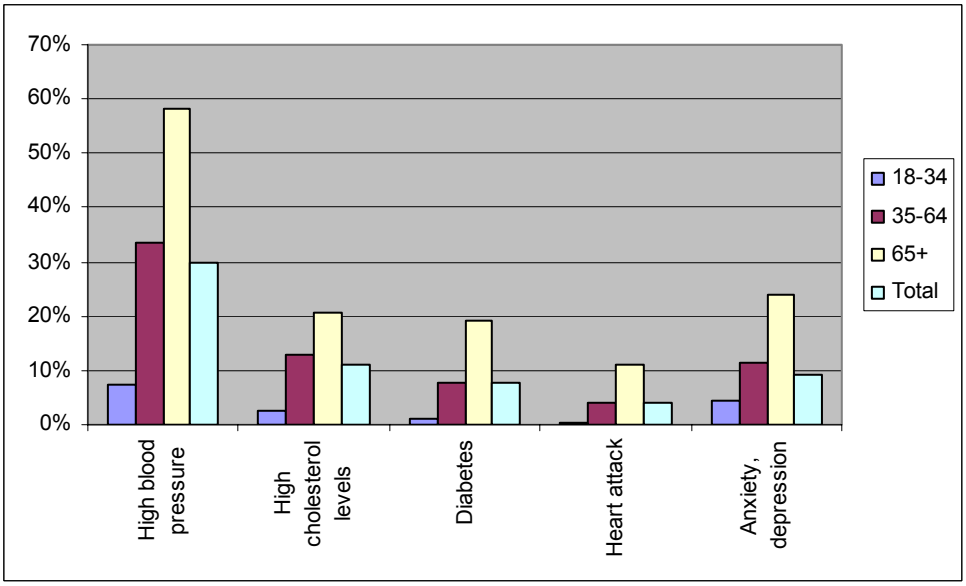
5. Results

5.1 Morbidity rates for specific diseases in Hungary

Statistical outputs are shown in Appendix 1, Tables 1–41.

High blood pressure and high cholesterol levels were reported by 30% and 11% of the population respectively. Some 4% had already suffered a heart attack, while 8% of the respondents had diabetes and 9% reported that they were suffering from anxiety or depression. Figure 7 shows the prevalence of these diseases by age group. The observed differences were statistically significant ($p<0.001$).

Figure 7. Prevalence of selected diseases by age group



There were also significant differences in the prevalence of diseases by gender, with the exception of diabetes. Table 6 shows the male to female odds ratios (OR) for the selected diseases (i.e. the odds of having the disease if a woman was substituted in the place of a man). Female gender was associated with a significantly higher risk of hypertension, high cholesterol levels and anxiety/depression, and with a significantly lower rate of heart attacks. These differences were not significant for the 18-34 age group, but showed the above pattern for the two age groups above 35.

Table 6. Male to female odds ratio of selected diseases

Disease	**OR**	**95% Confidence interval (CI)**	
		Lower	**Upper**
High blood pressure	1.409	1.247	1.592
High cholesterol levels	1.669	1.389	2.005
Diabetes	1.101	0.895	1.354
Heart attack	0.730	0.552	0.966
Anxiety, depression	2.612	2.109	3.235

Source: Authors' calculations.

The prevalence of all the selected diseases was lowest among single persons, higher among those who were married or living with a partner and highest among those who were separated, divorced or widowed ($p<0.001$ for all diseases). Households with more than three persons showed significantly lower prevalence rates than households with only one or two persons (again $p<0.001$).

Education had a non-linear impact on disease prevalence. Those who only had primary school education showed the highest prevalence rates, with fewer of those with higher education reporting morbidity. Yet persons with five-year university degrees or higher also had higher disease prevalence rates than those with lower education (except, of course, the 'primary school only' category).

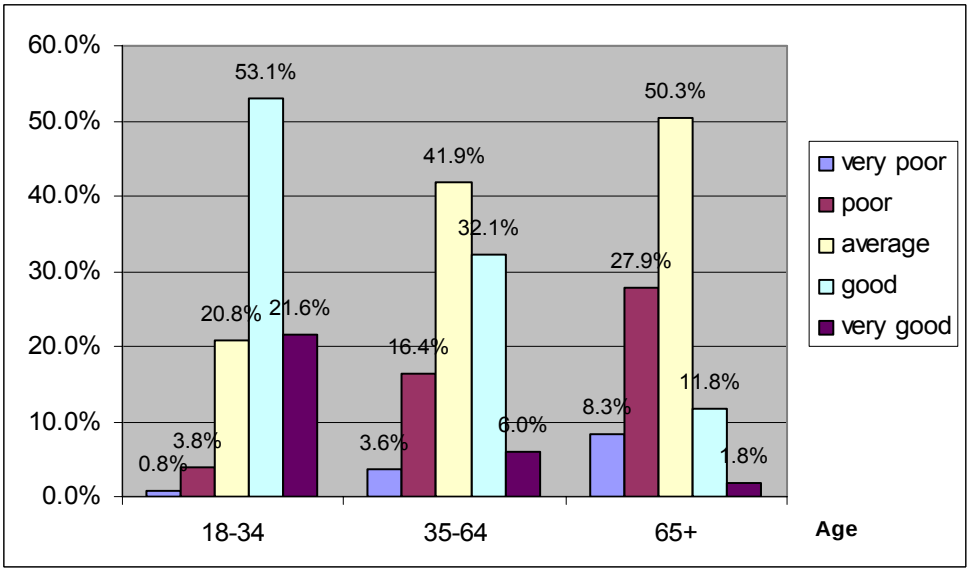
Pensioners and disability pensioners reported much higher prevalence rates for all diseases than persons in other economic activity categories (e.g. those working or unemployed). On the other hand, those not working had significantly higher prevalence rates for all the selected diseases compared with those working in any occupational category ($p<0.001$).

5.2 Social and economic factors behind good and bad health status

Statistical outputs are shown in Appendix 2, Tables 42–51.

Overall, 81.9% of the population reported themselves to be in average/satisfactory, good or very good health. But as Figure 8 shows, there were significant differences across age groups ($p<0.001$). A higher proportion of persons aged 65 and older reported that they were in poor or very poor health status than those aged 35-64. The prevalence of good health was highest among the youngest age group.

Figure 8. Self-reported health status by age group

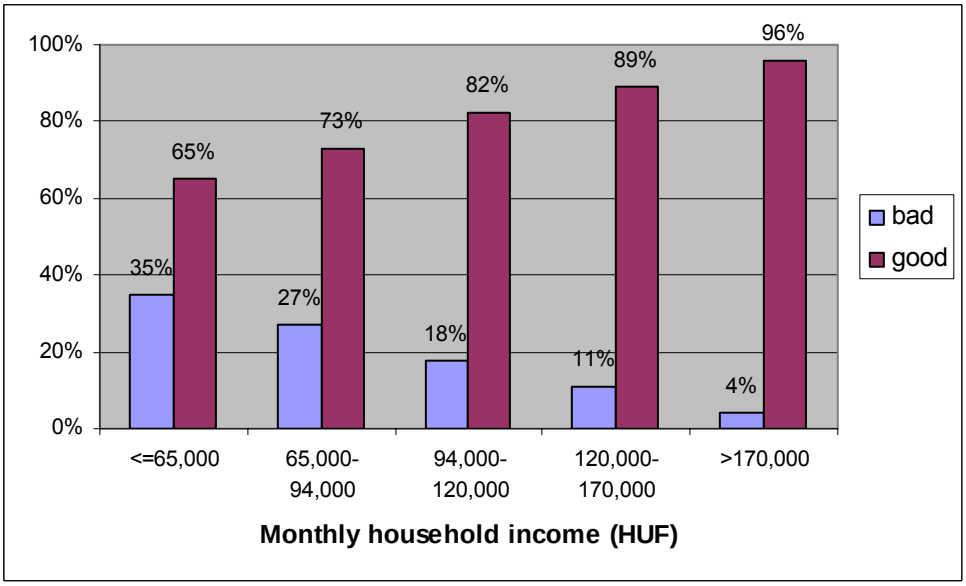


Women were much less likely to report good health than men with an odds ratio of 0.60 (95% CI: 0.52-0.69). This gender difference was true for all age categories. Individuals from larger households (with three or more persons) were more likely to report good health than those from smaller households (only one or two persons) with an odds ratio of 2.43 (95% CI: 2.10-2.81).

Good health was associated with higher education. The rate of good health showed a clear upward trend with the number of years spent in school. The prevalence of good health ranged from 68% to 95% from the education categories ‘primary school only’ to ‘five-year university degree’. Not surprisingly, the probability of reporting good health was higher among those working than those not working. Some 70% of non-workers reported that they were in good health versus a figure above 89% for any work categories.

Figure 9 shows the proportion of people reporting their health status to be good or bad across monthly household income quintiles. Individuals from lower-income households were more likely to report bad health status ($p<0.001$). The share of persons reporting bad health status from households with an income below HUF 65,000 per month (the lowest quintile) was more than eight times the share reporting bad health status from households with an income above HUF 170,000 per month (the highest quintile).

Figure 9. Self-reported good/bad health across household income quintiles



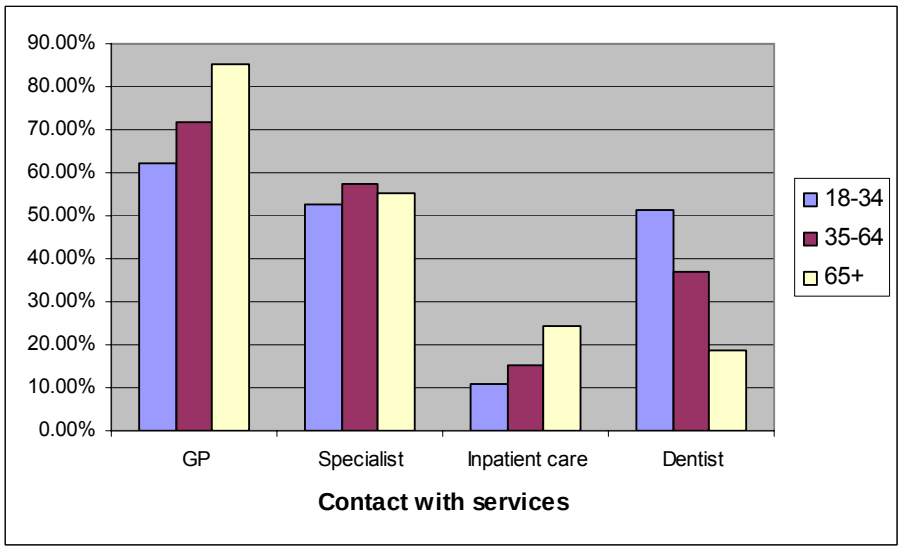
5.3 Health service utilisation by people in good and bad health

Statistical outputs are shown in Appendix 3, Tables 52–85.

Health service utilisation was high. Over 70% of the population reported that they had contacted their GP during the previous 12 months, 55% had had contact with specialist services and 16% had been hospitalised. Dental contacts were very low, however, with only 38% reporting that they had visited their dentist during the previous 12 months.

Age was associated with the proportion of persons reporting contact with different types of health services. The proportion contacting their GP and receiving inpatient care showed an increasing trend with age, while the share visiting a dentist showed a negative trend (see Figure 10).

Figure 10. Proportion reporting contact with health services by age group



As shown in Figure 11, individuals with good health were less likely to have had contact with health services with the exception of visits to a dentist. Although there was great variability in the number of visits made or the number of days spent in hospital, significant differences were shown between those in good and bad health as reported in Table 7. For example, those in bad health status visited their GP on average eight more times than those in good health.

Figure 11. Proportion reporting contact with health services by good/bad health status

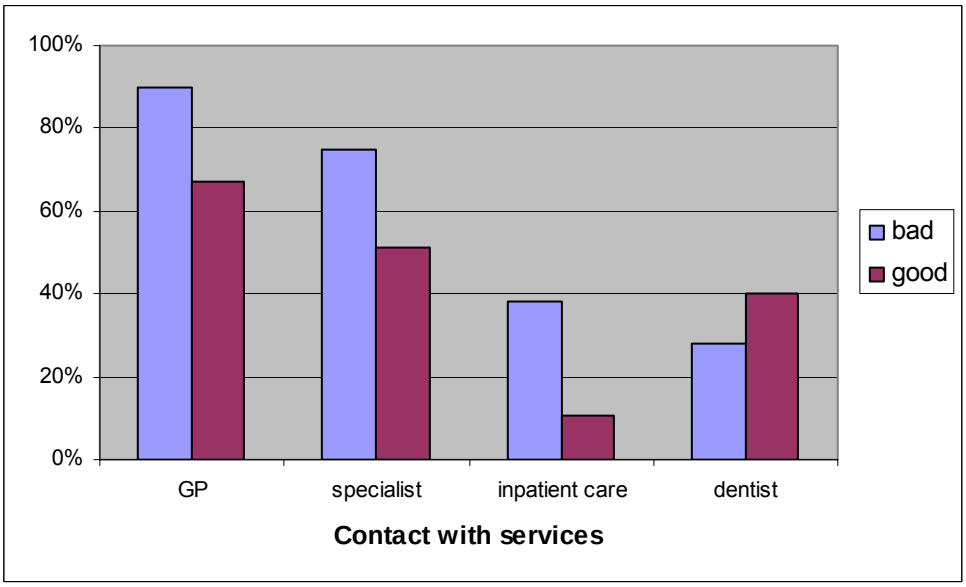


Table 7. Number of visits by persons with good/bad health status

Mean # of visits/days (interquartile range)	Self-reported health		Difference bad–good	p-value
	Bad	Good		
GP	11.33 (3-12)	3.64 (0-5)	7.69	<0.0001
Specialist	5.39 (1-6)	1.89 (0-2)	3.50	<0.0001
Inpatient care	6.99 (0-9)	1.32 (0-0)	5.67	<0.0001
Dentist	0.97 (0-1)	1.23 (0-1)	-0.26	<0.005

Source: Authors' calculations.

Overall, women were more likely to have had contact with all types of health services. But when age was also taken into account, this turned out to be true only for the two younger age groups (under 65 years). Differences between genders disappeared above the age of 65. The probability of contact with specialists and dentists increased with higher education, while the probability of inpatient hospitalisation decreased. The need for inpatient hospitalisation declined with higher income, while contact with a dentist rose with higher income.

5.4 Influence of age and other factors on health status and service utilisation

Logit models were developed to describe the influence of explanatory variables explored in the previous sections on self-reported health status and health service utilisation. Results of the models should be interpreted in comparison with the reference case described in the analyses section.

Table 8 shows the variables and their coefficients for the logit model explaining self-reported good health. The last column shows odds ratios for reporting good health compared with the reference case. The final model includes variables for age, gender, income, occupation and education, and confirms the results of previous sections. Women are less likely to report good health than men, and older persons are less likely to report good health than those aged 18 to 34. Individuals with higher education and more prestigious occupations are more likely to report good health. Generally, those with higher incomes are also more likely to report good health.

Table 8. Variables and coefficients for the logistic regression explaining good health

	B	S.E.	Wald	df	Sig.	Exp(B)
Constant	1.940	0.188	106.734	1	0.000	**6.957**
Gender: Female	-0.344	0.095	13.127	1	0.000	**0.709**
Age group categories	–	–	101.252	2	0.000	–
35-64	-1.561	0.155	100.839	1	0.000	**0.210**
65+	-1.425	0.171	69.398	1	0.000	**0.240**
Income quintiles	–	–	33.994	4	0.000	–
65,000-94,000	0.048	0.117	0.167	1	0.683	**1.049**
94,000-120,000	0.334	0.128	6.874	1	0.009	**1.397**
120,000-170,000	0.470	0.152	9.560	1	0.002	**1.600**
>170,000	1.103	0.211	27.251	1	0.000	**3.013**
Occupation categories	–	–	92.142	5	0.000	–
Executive status	1.417	0.356	15.865	1	0.000	**4.126**
Non-executive professional	1.159	0.225	26.530	1	0.000	**3.188**
Independent tradesman, service provider, professional	1.007	0.269	14.066	1	0.000	**2.737**
Skilled worker	1.150	0.192	35.780	1	0.000	**3.157**
Non-skilled or agricultural worker	1.071	0.171	39.467	1	0.000	**2.919**
Education categories	–	–	28.809	4	0.000	–
Secondary school without graduation test	0.097	0.122	0.640	1	0.424	**1.102**
Secondary school with graduation test	0.547	0.128	18.184	1	0.000	**1.728**
Three-year university degree	0.757	0.220	11.804	1	0.001	**2.132**
Five-year university degree	0.908	0.325	7.816	1	0.005	**2.480**

Source: Authors' calculations.

As seen in Table 9, self-reported health status, gender, age and occupation were also significant factors explaining whether someone had had contact with their GP during the previous 12 months. Individuals in good health had had less contact with their GP. Women and older persons were more likely to have contacted their GP. Persons in any occupational category were less likely to have visited their GP than the 'not working' reference case. In the case of explaining contact with a GP, the size of the household was also found to be significant: those from larger households were less likely to have had such contact.

Table 9. Variables and coefficients for the logistic regression explaining contact with a GP

	B	S.E.	Wald	df	Sig.	Exp(B)
Constant	1.809	0.164	122.345	1	0.000	**6.101**
Health: Good	-1.080	0.132	67.250	1	0.000	**0.339**
Gender: Female	0.316	0.077	16.678	1	0.000	**1.371**
Age group categories	–	–	22.479	2	0.000	–
35-64	0.279	0.082	11.490	1	0.001	**1.321**
65+	0.615	0.140	19.316	1	0.000	**1.851**
Household size: 3+	-0.267	0.084	10.176	1	0.001	**0.766**
Occupation categories	–	–	21.642	5	0.001	–
Executive status	-0.592	0.149	15.720	1	0.000	**0.553**
Non-executive professional	-0.133	0.121	1.218	1	0.270	**0.875**
Independent tradesman, service provider, professional	-0.352	0.157	5.012	1	0.025	**0.703**
Skilled worker	-0.379	0.117	10.557	1	0.001	**0.685**
Non-skilled or agricultural worker	-0.192	0.123	2.431	1	0.119	**0.825**

Source: Authors' calculations.

The same variables were found to influence contact with a specialist (see Table 10). As before, persons in good health were less likely and women were more likely to have had contact with a specialist, while the chances were likely for those with any type of job. A higher number of persons in the household was associated with a lower likelihood of specialist visits. Yet according to the regression results, older persons had less probability of having visited a specialist during the previous 12 months than the youngest age group when all other factors were taken into account. Those with higher education were also more likely to visit a specialist. This result may be explained by increased health awareness and better access to specialist services. In addition, younger women of childbearing age were likely to visit a gynaecologist on a regular basis.

Table 10. Variables and coefficients for the logistic regression explaining contact with a specialist

	B	S.E.	Wald	df	Sig.	Exp(B)
Constant	0.499	0.190	6.887	1	0.009	**1.648**
Health: Good	-1.197	0.101	140.365	1	0.000	**0.302**
Gender: Female	0.877	0.074	140.701	1	0.000	**20.404**
Age group categories	–	–	16.153	2	0.000	–
35-64	-0.154	0.090	2.933	1	0.087	**0.857**
65+	-0.530	0.134	15.629	1	0.000	**0.589**
Marital status	–	–	13.062	2	0.001	–
Married/with a partner	0.367	0.107	11.669	1	0.001	**1.443**
Separated/divorced/widowed	0.219	0.136	2.599	1	0.107	**1.244**
Household size: 3+	-0.221	0.080	7.693	1	0.006	**0.802**
Occupation categories	–	–	22.001	5	0.001	–
Executive status	-0.494	0.158	9.754	1	0.002	**0.610**
Non-executive professional	0.026	0.129	0.041	1	0.840	**1.026**

Table 10. Continued

Independent tradesman, service provider, professional	-0.463	0.157	8.705	1	0.003	**0.630**
Skilled worker	-0.288	0.118	5.990	1	0.014	**0.750**
Non-skilled or agricultural worker	-0.231	0.118	3.850	1	0.050	**0.794**
Education categories	–	–	32.194	4	0.000	–
Secondary school without graduation test	0.320	0.104	9.528	1	0.002	**1.376**
Secondary school with graduation test	0.382	0.103	13.653	1	0.000	**1.466**
Three-year university degree	0.594	0.149	15.884	1	0.000	**1.812**
Five-year university degree	0.936	0.187	25.031	1	0.000	**2.550**
Town size	–	–	14.990	5	0.010	–
<3,000	-0.005	0.145	0.001	1	0.971	**0.995**
<5,000	-0.095	0.171	0.313	1	0.576	**0.909**
<10,000	-0.105	0.166	0.403	1	0.525	**0.900**
<50,000	0.118	0.142	0.690	1	0.406	**1.125**
50,000+	0.267	0.139	3.685	1	0.055	**1.306**

Source: Authors' calculations.

The model explaining the need for inpatient hospitalisation included only self-reported health status, marital status and occupation. As shown in Table 11, persons in good health were again less likely to need inpatient care. Individuals who were married or separated/widowed had twice the odds of requiring inpatient care than their single counterparts. As seen consistently in all analyses, those working had a significantly reduced chance of hospitalisation compared with the 'not working' reference case.

Table 11. Variables and coefficients for the logistic regression explaining inpatient hospitalisation

	B	**S.E.**	**Wald**	**df**	**Sig.**	**Exp(B)**
Constant	-0.743	0.169	19.363	1	0.000	**0.476**
Health: Good	-1.383	0.100	190.106	1	0.000	**0.251**
Marital status	–	–	8.262	2	0.016	–
Married/with a partner	0.459	0.160	8.261	1	0.004	**1.583**
Separated/divorced/widowed	0.406	0.177	5.270	1	0.022	**1.500**
Occupation categories	–	–	65.010	5	0.000	–
Executive status	-1.188	0.284	17.472	1	0.000	**0.305**
Non-executive professional	-0.746	0.173	18.629	1	0.000	**0.474**
Independent tradesman, service provider, professional	-0.829	0.249	11.040	1	0.001	**0.437**
Skilled worker	-0.790	0.170	21.504	1	0.000	**0.454**
Non-skilled or agricultural worker	-0.849	0.180	22.276	1	0.000	**0.428**

Source: Authors' calculations.

Coefficients for the explanatory variables for the final regression examining contact with a dentist in the previous 12 months show the impact of changes in the importance and awareness of dental hygiene across age and education (Table 12). For example, individuals with a five-year university degree were six times more likely to visit a dentist compared with those who only had primary school education. Older generations were less likely to visit a dentist than the youngest age group.

Table 12. Variables and coefficients for the logistic regression explaining contact with a dentist

	B	S.E.	Wald	df	Sig.	Exp(B)
Constant	-0.856	0.102	69.884	1	0.000	**0.425**
Gender: Female	0.528	0.073	52.957	1	0.000	**1.695**
Age group categories	–	–	129.233	2	0.000	–
35-64	-0.592	0.078	58.121	1	0.000	**0.553**
65+	-1.278	0.117	119.029	1	0.000	**0.279**
Education categories	–	–	156.460	4	0.000	–
Secondary school without graduation test	0.470	0.103	20.961	1	0.000	**1.600**
Secondary school with graduation test	0.674	0.095	50.130	1	0.000	**1.961**
Three-year university degree	1.078	0.128	70.866	1	0.000	**2.938**
Five-year university degree	1.802	0.170	111.848	1	0.000	**6.064**

Source: Authors' calculations.

5.5 People living in institutions

The number of persons living in the selected types of institutions and their age distribution is reported in Table 13. No information was available regarding the health status or health-care service utilisation of people living in institutions.

Table 13. Number of institutions and persons living in institutions (2001)

Institution type	No. of institutions	Total no. of persons	Aged 0-29	Aged 30-59	Aged 60+
Permanent care institutions – Total	852	62,256	6,668	17,883	37,705
Elderly	594	37,472	289	5,023	32,160
Disabled	147	14,483	5,684	6,881	1,907
Psychiatric illness	54	7,540	382	4,164	2,994
Addictive illness	21	1,339	83	820	436
Homeless	36	1,422	230	984	208
Temporary care institutions – Total	195	5,851	650	3,251	1,951
Elderly	97	1,720	3	169	1,548
Disabled	3	41	23	17	1
Psychiatric and addictive illness	4	156	4	108	44
Homeless	91	3,934	519	2,957	358
Inpatient hospital	66	3,657	490	989	2,178

Source: KSH (2003).

6. Conclusions

According to historical data and predictions, the population of Hungary is ageing. This situation is more the result of low birth rates than an increase in life expectancy. As a result, the size of the population is also decreasing.

Age has had a significant impact on the prevalence of selected diseases and self-reported health status. A significantly higher proportion of older persons reported that they were in bad health. Individuals with bad health were more likely to have had contact with health care services and to have had a greater number of visits. With these trends in population ageing, pressures for more expenditure on health care are likely to increase further.

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Appendix 1.
Morbidity Owing to Specific Diseases in Hungary

Table A1. Prevalence of selected diseases

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Diabetes	5023	,00	1,00	7,844E-02	,2689
Anxiety, depression	5013	,00	1,00	9,213E-02	,2892
High cholesterol levels	4987	,00	1,00	,1108	,3140
High blood pressure	5019	,00	1,00	,2991	,4579
Heart attack	5026	,00	1,00	4,082E-02	,1979
Valid N (listwise)	4965				

Table A2. Age group/diabetes cross-tabulation

Agegroup * Diabetes Crosstabulation

			Diabetes		
			No	Yes	Total
Agegroup	18-34	Count	1565	18	1583
		% within Agegroup	98,9%	1,1%	100,0%
		% within Diabetes	33,8%	4,6%	31,5%
	35-64	Count	2300	197	2497
		% within Agegroup	92,1%	7,9%	100,0%
		% within Diabetes	49,7%	50,0%	49,7%
	65+	Count	764	179	943
		% within Agegroup	81,0%	19,0%	100,0%
		% within Diabetes	16,5%	45,4%	18,8%
Total		Count	4629	394	5023
		% within Agegroup	92,2%	7,8%	100,0%
		% within Diabetes	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	260,348[a]	2	,000
Likelihood Ratio	269,924	2	,000
Linear-by-Linear Association	252,387	1	,000
N of Valid Cases	5023		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 73,97.

Table A3. Age group/anxiety, depression cross-tabulation

Agegroup * Anxiety, depression Crosstabulation

			Anxiety, depression		
			No	Yes	Total
Agegroup	18-34	Count	1511	69	1580
		% within Agegroup	95,6%	4,4%	100,0%
		% within Anxiety, depression	33,2%	14,9%	31,5%
	35-64	Count	2210	282	2492
		% within Agegroup	88,7%	11,3%	100,0%
		% within Anxiety, depression	48,6%	61,0%	49,7%
	65+	Count	830	111	941
		% within Agegroup	88,2%	11,8%	100,0%
		% within Anxiety, depression	18,2%	24,0%	18,8%
Total		Count	4551	462	5013
		% within Agegroup	90,8%	9,2%	100,0%
		% within Anxiety, depression	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	65,025[a]	2	,000
Likelihood Ratio	73,449	2	,000
Linear-by-Linear Association	49,860	1	,000
N of Valid Cases	5013		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 86,72.

Table A4. Age group/high cholesterol levels cross-tabulation

Agegroup * High cholesterol levels Crosstabulation

			High cholesterol levels		
			No	Yes	Total
Agegroup	18-34	Count	1538	40	1578
		% within Agegroup	97,5%	2,5%	100,0%
		% within High cholesterol levels	34,7%	7,2%	31,6%
	35-64	Count	2159	322	2481
		% within Agegroup	87,0%	13,0%	100,0%
		% within High cholesterol levels	48,7%	58,2%	49,7%
	65+	Count	738	191	929
		% within Agegroup	79,4%	20,6%	100,0%
		% within High cholesterol levels	16,6%	34,5%	18,6%
Total		Count	4435	553	4988
		% within Agegroup	88,9%	11,1%	100,0%
		% within High cholesterol levels	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	210,655[a]	2	,000
Likelihood Ratio	242,663	2	,000
Linear-by-Linear Association	208,112	1	,000
N of Valid Cases	4988		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 102,99.

Table A5. Age group/high blood pressure cross-tabulation

Agegroup * High blood pressure Crosstabulation

			High blood pressure		
			No	Yes	Total
Agegroup	18-34	Count	1465	116	1581
		% within Agegroup	92,7%	7,3%	100,0%
		% within High blood pressure	41,7%	7,7%	31,5%
	35-64	Count	1657	839	2496
		% within Agegroup	66,4%	33,6%	100,0%
		% within High blood pressure	47,1%	55,9%	49,7%
	65+	Count	395	547	942
		% within Agegroup	41,9%	58,1%	100,0%
		% within High blood pressure	11,2%	36,4%	18,8%
Total		Count	3517	1502	5019
		% within Agegroup	70,1%	29,9%	100,0%
		% within High blood pressure	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	756,634[a]	2	,000
Likelihood Ratio	827,915	2	,000
Linear-by-Linear Association	756,003	1	,000
N of Valid Cases	5019		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 281,91.

Table A6. Age group/heart attack cross-tabulation

Agegroup * Heart attack Crosstabulation

			Heart attack		
			No	Yes	Total
Agegroup	18-34	Count	1579	4	1583
		% within Agegroup	99,7%	,3%	100,0%
		% within Heart attack	32,8%	1,9%	31,5%
	35-64	Count	2400	99	2499
		% within Agegroup	96,0%	4,0%	100,0%
		% within Heart attack	49,8%	48,1%	49,7%
	65+	Count	841	103	944
		% within Agegroup	89,1%	10,9%	100,0%
		% within Heart attack	17,4%	50,0%	18,8%
Total		Count	4820	206	5026
		% within Agegroup	95,9%	4,1%	100,0%
		% within Heart attack	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	171,144[a]	2	,000
Likelihood Ratio	179,764	2	,000
Linear-by-Linear Association	162,995	1	,000
N of Valid Cases	5026		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 38,69.

Table A7. Gender/diabetes cross-tabulation

Gender * Diabetes Crosstabulation

			Diabetes		
			No	Yes	Total
Gender	male	Count	2178	176	2354
		% within Gender	92,5%	7,5%	100,0%
		% within Diabetes	47,1%	44,7%	46,9%
	female	Count	2451	218	2669
		% within Gender	91,8%	8,2%	100,0%
		% within Diabetes	52,9%	55,3%	53,1%
Total		Count	4629	394	5023
		% within Gender	92,2%	7,8%	100,0%
		% within Diabetes	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	,827[b]	1	,363		
Continuity Correction[a]	,734	1	,392		
Likelihood Ratio	,828	1	,363		
Fisher's Exact Test				,372	,196
Linear-by-Linear Association	,827	1	,363		
N of Valid Cases	5023				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 184,65.

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Gender (male / female)	1,101	,895	1,354
For cohort Diabetes = No	1,008	,991	1,024
For cohort Diabetes = Yes	,915	,756	1,108
N of Valid Cases	5023		

Table A8. Gender/anxiety, depression cross-tabulation

Gender * Anxiety, depression Crosstabulation

			Anxiety, depression		
			No	Yes	Total
Gender	male	Count	2227	124	2351
		% within Gender	94,7%	5,3%	100,0%
		% within Anxiety, depression	48,9%	26,8%	46,9%
	female	Count	2324	338	2662
		% within Gender	87,3%	12,7%	100,0%
		% within Anxiety, depression	51,1%	73,2%	53,1%
Total		Count	4551	462	5013
		% within Gender	90,8%	9,2%	100,0%
		% within Anxiety, depression	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	82,215[b]	1	,000		
Continuity Correction[a]	81,331	1	,000		
Likelihood Ratio	85,776	1	,000		
Fisher's Exact Test				,000	,000
Linear-by-Linear Association	82,199	1	,000		
N of Valid Cases	5013				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 216,67.

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Gender (male / female)	2,612	2,109	3,235
For cohort Anxiety, depression = No	1,085	1,066	1,104
For cohort Anxiety, depression = Yes	,415	,341	,506
N of Valid Cases	5013		

Table A9. Gender/high cholesterol levels cross-tabulation

Gender * High cholesterol levels Crosstabulation

			High cholesterol levels		
			No	Yes	Total
Gender	male	Count	2141	198	2339
		% within Gender	91,5%	8,5%	100,0%
		% within High cholesterol levels	48,3%	35,9%	46,9%
	female	Count	2294	354	2648
		% within Gender	86,6%	13,4%	100,0%
		% within High cholesterol levels	51,7%	64,1%	53,1%
Total		Count	4435	552	4987
		% within Gender	88,9%	11,1%	100,0%
		% within High cholesterol levels	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	30,336[b]	1	,000		
Continuity Correction[a]	29,840	1	,000		
Likelihood Ratio	30,814	1	,000		
Fisher's Exact Test				,000	,000
Linear-by-Linear Association	30,330	1	,000		
N of Valid Cases	4987				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 258,90.

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Gender (male / female)	1,669	1,389	2,005
For cohort High cholesterol levels = No	1,057	1,036	1,077
For cohort High cholesterol levels = Yes	,633	,537	,747
N of Valid Cases	4987		

Table A10. Gender/high blood pressure cross-tabulation

Gender * High blood pressure Crosstabulation

			High blood pressure		
			No	Yes	Total
Gender	male	Count	1737	614	2351
		% within Gender	73,9%	26,1%	100,0%
		% within High blood pressure	49,4%	40,9%	46,8%
	female	Count	1781	887	2668
		% within Gender	66,8%	33,2%	100,0%
		% within High blood pressure	50,6%	59,1%	53,2%
Total		Count	3518	1501	5019
		% within Gender	70,1%	29,9%	100,0%
		% within High blood pressure	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	30,302[b]	1	,000		
Continuity Correction[a]	29,963	1	,000		
Likelihood Ratio	30,446	1	,000		
Fisher's Exact Test				,000	,000
Linear-by-Linear Association	30,296	1	,000		
N of Valid Cases	5019				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 703,10.

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Gender (male / female)	1,409	1,247	1,592
For cohort High blood pressure = No	1,107	1,068	1,147
For cohort High blood pressure = Yes	,786	,720	,857
N of Valid Cases	5019		

Table A11. Gender/heart attack cross-tabulation

Gender * Heart attack Crosstabulation

			Heart attack		
			No	Yes	Total
Gender	male	Count	2243	112	2355
		% within Gender	95,2%	4,8%	100,0%
		% within Heart attack	46,5%	54,4%	46,8%
	female	Count	2578	94	2672
		% within Gender	96,5%	3,5%	100,0%
		% within Heart attack	53,5%	45,6%	53,2%
Total		Count	4821	206	5027
		% within Gender	95,9%	4,1%	100,0%
		% within Heart attack	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	4,881[b]	1	,027		
Continuity Correction[a]	4,571	1	,033		
Likelihood Ratio	4,869	1	,027		
Fisher's Exact Test				,032	,016
Linear-by-Linear Association	4,880	1	,027		
N of Valid Cases	5027				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 96,50.

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Gender (male / female)	,730	,552	,966
For cohort Heart attack = No	,987	,976	,999
For cohort Heart attack = Yes	1,352	1,034	1,768
N of Valid Cases	5027		

Table A12. Gender/diabetes cross-tabulation for diabetes by age group

Gender * Diabetes * Agegroup Crosstabulation

Agegroup				Diabetes		Total
				No	Yes	
18-34	Gender	male	Count	799	3	802
			% within Gender	99,6%	,4%	100,0%
			% within Diabetes	51,1%	16,7%	50,7%
		female	Count	766	15	781
			% within Gender	98,1%	1,9%	100,0%
			% within Diabetes	48,9%	83,3%	49,3%
	Total		Count	1565	18	1583
			% within Gender	98,9%	1,1%	100,0%
			% within Diabetes	100,0%	100,0%	100,0%
35-64	Gender	male	Count	1099	101	1200
			% within Gender	91,6%	8,4%	100,0%
			% within Diabetes	47,8%	51,3%	48,1%
		female	Count	1201	96	1297
			% within Gender	92,6%	7,4%	100,0%
			% within Diabetes	52,2%	48,7%	51,9%
	Total		Count	2300	197	2497
			% within Gender	92,1%	7,9%	100,0%
			% within Diabetes	100,0%	100,0%	100,0%
65+	Gender	male	Count	280	72	352
			% within Gender	79,5%	20,5%	100,0%
			% within Diabetes	36,6%	40,2%	37,3%
		female	Count	484	107	591
			% within Gender	81,9%	18,1%	100,0%
			% within Diabetes	63,4%	59,8%	62,7%
	Total		Count	764	179	943
			% within Gender	81,0%	19,0%	100,0%
			% within Diabetes	100,0%	100,0%	100,0%

Table A12. Continued

Chi-Square Tests

Agegroup		Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
18-34	Pearson Chi-Square	8,419[b]	1	,004		
	Continuity Correction[a]	7,099	1	,008		
	Likelihood Ratio	9,150	1	,002		
	Fisher's Exact Test				,004	,003
	Linear-by-Linear Association	8,413	1	,004		
	N of Valid Cases	1583				
35-64	Pearson Chi-Square	,884[c]	1	,347		
	Continuity Correction[a]	,749	1	,387		
	Likelihood Ratio	,883	1	,347		
	Fisher's Exact Test				,373	,193
	Linear-by-Linear Association	,883	1	,347		
	N of Valid Cases	2497				
65+	Pearson Chi-Square	,792[d]	1	,374		
	Continuity Correction[a]	,647	1	,421		
	Likelihood Ratio	,786	1	,375		
	Fisher's Exact Test				,391	,210
	Linear-by-Linear Association	,791	1	,374		
	N of Valid Cases	943				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 8,88.

c. 0 cells (,0%) have expected count less than 5. The minimum expected count is 94,67.

d. 0 cells (,0%) have expected count less than 5. The minimum expected count is 66,82.

Risk Estimate

Agegroup		Value	95% Confidence Interval	
			Lower	Upper
18-34	Odds Ratio for Gender (male / female)	5,215	1,504	18,086
	For cohort Diabetes = No	1,016	1,005	1,027
	For cohort Diabetes = Yes	,195	,057	,670
	N of Valid Cases	1583		
35-64	Odds Ratio for Gender (male / female)	,870	,650	1,164
	For cohort Diabetes = No	,989	,967	1,012
	For cohort Diabetes = Yes	1,137	,870	1,487
	N of Valid Cases	2497		
65+	Odds Ratio for Gender (male / female)	,860	,616	1,199
	For cohort Diabetes = No	,971	,910	1,037
	For cohort Diabetes = Yes	1,130	,864	1,477
	N of Valid Cases	943		

Table A13. Gender/anxiety, depression cross-tabulation by age group

Gender * Anxiety, depression * Agegroup Crosstabulation

Agegroup				Anxiety, depression		Total
				No	Yes	
18-34	Gender	male	Count	773	27	800
			% within Gender	96,6%	3,4%	100,0%
			% within Anxiety, depression	51,2%	39,1%	50,6%
		female	Count	738	42	780
			% within Gender	94,6%	5,4%	100,0%
			% within Anxiety, depression	48,8%	60,9%	49,4%
	Total		Count	1511	69	1580
			% within Gender	95,6%	4,4%	100,0%
			% within Anxiety, depression	100,0%	100,0%	100,0%
35-64	Gender	male	Count	1123	75	1198
			% within Gender	93,7%	6,3%	100,0%
			% within Anxiety, depression	50,8%	26,6%	48,1%
		female	Count	1087	207	1294
			% within Gender	84,0%	16,0%	100,0%
			% within Anxiety, depression	49,2%	73,4%	51,9%
	Total		Count	2210	282	2492
			% within Gender	88,7%	11,3%	100,0%
			% within Anxiety, depression	100,0%	100,0%	100,0%
65+	Gender	male	Count	331	22	353
			% within Gender	93,8%	6,2%	100,0%
			% within Anxiety, depression	39,9%	20,0%	37,6%
		female	Count	499	88	587
			% within Gender	85,0%	15,0%	100,0%
			% within Anxiety, depression	60,1%	80,0%	62,4%
	Total		Count	830	110	940
			% within Gender	88,3%	11,7%	100,0%
			% within Anxiety, depression	100,0%	100,0%	100,0%

Table A13. Continued

Chi-Square Tests

Agegroup		Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
18-34	Pearson Chi-Square	3,819[b]	1	,051		
	Continuity Correction[a]	3,353	1	,067		
	Likelihood Ratio	3,845	1	,050		
	Fisher's Exact Test				,064	,033
	Linear-by-Linear Association	3,817	1	,051		
	N of Valid Cases	1580				
35-64	Pearson Chi-Square	58,763[c]	1	,000		
	Continuity Correction[a]	57,796	1	,000		
	Likelihood Ratio	61,156	1	,000		
	Fisher's Exact Test				,000	,000
	Linear-by-Linear Association	58,739	1	,000		
	N of Valid Cases	2492				
65+	Pearson Chi-Square	16,368[d]	1	,000		
	Continuity Correction[a]	15,531	1	,000		
	Likelihood Ratio	17,777	1	,000		
	Fisher's Exact Test				,000	,000
	Linear-by-Linear Association	16,351	1	,000		
	N of Valid Cases	940				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 34,06.

c. 0 cells (,0%) have expected count less than 5. The minimum expected count is 135,57.

d. 0 cells (,0%) have expected count less than 5. The minimum expected count is 41,31.

Risk Estimate

Agegroup		Value	95% Confidence Interval	
			Lower	Upper
18-34	Odds Ratio for Gender (male / female)	1,629	,994	2,670
	For cohort Anxiety, depression = No	1,021	1,000	1,043
	For cohort Anxiety, depression = Yes	,627	,390	1,006
	N of Valid Cases	1580		
35-64	Odds Ratio for Gender (male / female)	2,851	2,162	3,762
	For cohort Anxiety, depression = No	1,116	1,085	1,148
	For cohort Anxiety, depression = Yes	,391	,304	,504
	N of Valid Cases	2492		
65+	Odds Ratio for Gender (male / female)	2,653	1,630	4,320
	For cohort Anxiety, depression = No	1,103	1,056	1,152
	For cohort Anxiety, depression = Yes	,416	,266	,651
	N of Valid Cases	940		

Table A14. Gender/high cholesterol levels cross-tabulation by age group

Gender * High cholesterol levels * Agegroup Crosstabulation

Agegroup				High cholesterol levels		Total
				No	Yes	
18-34	Gender	male	Count	781	18	799
			% within Gender	97,7%	2,3%	100,0%
			% within High cholesterol levels	50,8%	45,0%	50,6%
		female	Count	757	22	779
			% within Gender	97,2%	2,8%	100,0%
			% within High cholesterol levels	49,2%	55,0%	49,4%
	Total		Count	1538	40	1578
			% within Gender	97,5%	2,5%	100,0%
			% within High cholesterol levels	100,0%	100,0%	100,0%
35-64	Gender	male	Count	1062	132	1194
			% within Gender	88,9%	11,1%	100,0%
			% within High cholesterol levels	49,2%	40,9%	48,1%
		female	Count	1097	191	1288
			% within Gender	85,2%	14,8%	100,0%
			% within High cholesterol levels	50,8%	59,1%	51,9%
	Total		Count	2159	323	2482
			% within Gender	87,0%	13,0%	100,0%
			% within High cholesterol levels	100,0%	100,0%	100,0%
65+	Gender	male	Count	298	49	347
			% within Gender	85,9%	14,1%	100,0%
			% within High cholesterol levels	40,4%	25,7%	37,4%
		female	Count	440	142	582
			% within Gender	75,6%	24,4%	100,0%
			% within High cholesterol levels	59,6%	74,3%	62,6%
	Total		Count	738	191	929
			% within Gender	79,4%	20,6%	100,0%
			% within High cholesterol levels	100,0%	100,0%	100,0%

Table A14. Continued

Chi-Square Tests

Agegroup		Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
18-34	Pearson Chi-Square	,521[b]	1	,470		
	Continuity Correction[a]	,316	1	,574		
	Likelihood Ratio	,522	1	,470		
	Fisher's Exact Test				,523	,287
	Linear-by-Linear Association	,521	1	,471		
	N of Valid Cases	1578				
35-64	Pearson Chi-Square	7,796[c]	1	,005		
	Continuity Correction[a]	7,466	1	,006		
	Likelihood Ratio	7,844	1	,005		
	Fisher's Exact Test				,006	,003
	Linear-by-Linear Association	7,792	1	,005		
	N of Valid Cases	2482				
65+	Pearson Chi-Square	14,059[d]	1	,000		
	Continuity Correction[a]	13,437	1	,000		
	Likelihood Ratio	14,664	1	,000		
	Fisher's Exact Test				,000	,000
	Linear-by-Linear Association	14,044	1	,000		
	N of Valid Cases	929				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 19,75.

c. 0 cells (,0%) have expected count less than 5. The minimum expected count is 155,38.

d. 0 cells (,0%) have expected count less than 5. The minimum expected count is 71,34.

Risk Estimate

Agegroup		Value	95% Confidence Interval	
			Lower	Upper
18-34	Odds Ratio for Gender (male / female)	1,261	,671	2,370
	For cohort High cholesterol levels = No	1,006	,990	1,022
	For cohort High cholesterol levels = Yes	,798	,431	1,476
	N of Valid Cases	1578		
35-64	Odds Ratio for Gender (male / female)	1,401	1,105	1,776
	For cohort High cholesterol levels = No	1,044	1,013	1,076
	For cohort High cholesterol levels = Yes	,746	,606	,917
	N of Valid Cases	2482		
65+	Odds Ratio for Gender (male / female)	1,963	1,374	2,803
	For cohort High cholesterol levels = No	1,136	1,067	1,210
	For cohort High cholesterol levels = Yes	,579	,430	,778
	N of Valid Cases	929		

Table A15. Gender/high blood pressure cross-tabulation by age group

Gender * High blood pressure * Agegroup Crosstabulation

Agegroup				High blood pressure		Total
				No	Yes	
18-34	Gender	male	Count	733	67	800
			% within Gender	91,6%	8,4%	100,0%
			% within High blood pressure	50,0%	58,3%	50,6%
		female	Count	733	48	781
			% within Gender	93,9%	6,1%	100,0%
			% within High blood pressure	50,0%	41,7%	49,4%
	Total		Count	1466	115	1581
			% within Gender	92,7%	7,3%	100,0%
			% within High blood pressure	100,0%	100,0%	100,0%
35-64	Gender	male	Count	820	379	1199
			% within Gender	68,4%	31,6%	100,0%
			% within High blood pressure	49,5%	45,2%	48,0%
		female	Count	837	460	1297
			% within Gender	64,5%	35,5%	100,0%
			% within High blood pressure	50,5%	54,8%	52,0%
	Total		Count	1657	839	2496
			% within Gender	66,4%	33,6%	100,0%
			% within High blood pressure	100,0%	100,0%	100,0%
65+	Gender	male	Count	184	168	352
			% within Gender	52,3%	47,7%	100,0%
			% within High blood pressure	46,6%	30,7%	37,4%
		female	Count	211	379	590
			% within Gender	35,8%	64,2%	100,0%
			% within High blood pressure	53,4%	69,3%	62,6%
	Total		Count	395	547	942
			% within Gender	41,9%	58,1%	100,0%
			% within High blood pressure	100,0%	100,0%	100,0%

Table A15. Continued

Chi-Square Tests

Agegroup		Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
18-34	Pearson Chi-Square	2,911[b]	1	,088		
	Continuity Correction[a]	2,590	1	,108		
	Likelihood Ratio	2,925	1	,087		
	Fisher's Exact Test				,100	,054
	Linear-by-Linear Association	2,909	1	,088		
	N of Valid Cases	1581				
35-64	Pearson Chi-Square	4,153[c]	1	,042		
	Continuity Correction[a]	3,982	1	,046		
	Likelihood Ratio	4,158	1	,041		
	Fisher's Exact Test				,042	,023
	Linear-by-Linear Association	4,151	1	,042		
	N of Valid Cases	2496				
65+	Pearson Chi-Square	24,681[d]	1	,000		
	Continuity Correction[a]	24,007	1	,000		
	Likelihood Ratio	24,599	1	,000		
	Fisher's Exact Test				,000	,000
	Linear-by-Linear Association	24,654	1	,000		
	N of Valid Cases	942				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 56,81.

c. 0 cells (,0%) have expected count less than 5. The minimum expected count is 403,03.

d. 0 cells (,0%) have expected count less than 5. The minimum expected count is 147,60.

Risk Estimate

Agegroup		Value	95% Confidence Interval	
			Lower	Upper
18-34	Odds Ratio for Gender (male / female)	,716	,488	1,052
	For cohort High blood pressure = No	,976	,950	1,004
	For cohort High blood pressure = Yes	1,363	,953	1,948
	N of Valid Cases	1581		
35-64	Odds Ratio for Gender (male / female)	1,189	1,007	1,405
	For cohort High blood pressure = No	1,060	1,002	1,121
	For cohort High blood pressure = Yes	,891	,798	,996
	N of Valid Cases	2496		
65+	Odds Ratio for Gender (male / female)	1,967	1,504	2,573
	For cohort High blood pressure = No	1,462	1,262	1,693
	For cohort High blood pressure = Yes	,743	,656	,842
	N of Valid Cases	942		

Table A16. Gender/heart attack cross-tabulation by age group

Gender * Heart attack * Agegroup Crosstabulation

Agegroup				Heart attack		Total
				No	Yes	
18-34	Gender	male	Count	800	2	802
			% within Gender	99,8%	,2%	100,0%
			% within Heart attack	50,7%	50,0%	50,7%
		female	Count	779	2	781
			% within Gender	99,7%	,3%	100,0%
			% within Heart attack	49,3%	50,0%	49,3%
	Total		Count	1579	4	1583
			% within Gender	99,7%	,3%	100,0%
			% within Heart attack	100,0%	100,0%	100,0%
35-64	Gender	male	Count	1136	64	1200
			% within Gender	94,7%	5,3%	100,0%
			% within Heart attack	47,3%	64,6%	48,0%
		female	Count	1264	35	1299
			% within Gender	97,3%	2,7%	100,0%
			% within Heart attack	52,7%	35,4%	52,0%
	Total		Count	2400	99	2499
			% within Gender	96,0%	4,0%	100,0%
			% within Heart attack	100,0%	100,0%	100,0%
65+	Gender	male	Count	307	46	353
			% within Gender	87,0%	13,0%	100,0%
			% within Heart attack	36,5%	44,7%	37,4%
		female	Count	534	57	591
			% within Gender	90,4%	9,6%	100,0%
			% within Heart attack	63,5%	55,3%	62,6%
	Total		Count	841	103	944
			% within Gender	89,1%	10,9%	100,0%
			% within Heart attack	100,0%	100,0%	100,0%

Table A16. Continued

Chi-Square Tests

Agegroup		Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
18-34	Pearson Chi-Square	,001[b]	1	,979		
	Continuity Correction[a]	,000	1	1,000		
	Likelihood Ratio	,001	1	,979		
	Fisher's Exact Test				1,000	,678
	Linear-by-Linear Association	,001	1	,979		
	N of Valid Cases	1583				
35-64	Pearson Chi-Square	11,418[c]	1	,001		
	Continuity Correction[a]	10,734	1	,001		
	Likelihood Ratio	11,528	1	,001		
	Fisher's Exact Test				,001	,001
	Linear-by-Linear Association	11,413	1	,001		
	N of Valid Cases	2499				
65+	Pearson Chi-Square	2,607[d]	1	,106		
	Continuity Correction[a]	2,271	1	,132		
	Likelihood Ratio	2,558	1	,110		
	Fisher's Exact Test				,131	,067
	Linear-by-Linear Association	2,605	1	,107		
	N of Valid Cases	944				

a. Computed only for a 2x2 table

b. 2 cells (50,0%) have expected count less than 5. The minimum expected count is 1,97.

c. 0 cells (,0%) have expected count less than 5. The minimum expected count is 47,54.

d. 0 cells (,0%) have expected count less than 5. The minimum expected count is 38,52.

Risk Estimate

Agegroup		Value	95% Confidence Interval	
			Lower	Upper
18-34	Odds Ratio for Gender (male / female)	1,027	,144	7,309
	For cohort Heart attack = No	1,000	,995	1,005
	For cohort Heart attack = Yes	,974	,138	6,896
	N of Valid Cases	1583		
35-64	Odds Ratio for Gender (male / female)	,491	,323	,748
	For cohort Heart attack = No	,973	,957	,989
	For cohort Heart attack = Yes	1,979	1,321	2,966
	N of Valid Cases	2499		
65+	Odds Ratio for Gender (male / female)	,712	,471	1,077
	For cohort Heart attack = No	,963	,917	1,010
	For cohort Heart attack = Yes	1,351	,938	1,947
	N of Valid Cases	944		

Table A17. Martial status/diabetes cross-tabulation

Marital status * Diabetes Crosstabulation

			Diabetes		
			No	Yes	Total
Marital status	single	Count	893	19	912
		% within Marital status	97,9%	2,1%	100,0%
		% within Diabetes	19,3%	4,8%	18,2%
	married or living with partner	Count	2820	252	3072
		% within Marital status	91,8%	8,2%	100,0%
		% within Diabetes	61,0%	64,1%	61,2%
	separated, divorced, or widowed	Count	912	122	1034
		% within Marital status	88,2%	11,8%	100,0%
		% within Diabetes	19,7%	31,0%	20,6%
Total		Count	4625	393	5018
		% within Marital status	92,2%	7,8%	100,0%
		% within Diabetes	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	64,880[a]	2	,000
Likelihood Ratio	78,060	2	,000
Linear-by-Linear Association	62,245	1	,000
N of Valid Cases	5018		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 71,43.

Table A18. Marital status/anxiety, depression cross-tabulation

Marital status * Anxiety, depression Crosstabulation

			Anxiety, depression		
			No	Yes	Total
Marital status	single	Count	867	41	908
		% within Marital status	95,5%	4,5%	100,0%
		% within Anxiety, depression	19,1%	8,9%	18,1%
	married or living with partner	Count	2818	253	3071
		% within Marital status	91,8%	8,2%	100,0%
		% within Anxiety, depression	62,0%	54,8%	61,3%
	separated, divorced, or widowed	Count	861	168	1029
		% within Marital status	83,7%	16,3%	100,0%
		% within Anxiety, depression	18,9%	36,4%	20,5%
Total		Count	4546	462	5008
		% within Marital status	90,8%	9,2%	100,0%
		% within Anxiety, depression	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	89,589[a]	2	,000
Likelihood Ratio	84,352	2	,000
Linear-by-Linear Association	82,831	1	,000
N of Valid Cases	5008		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 83,77.

Table A19. Marital status/high cholesterol levels cross-tabulation

Marital status * High cholesterol levels Crosstabulation

			High cholesterol levels		
			No	Yes	Total
Marital status	single	Count	880	27	907
		% within Marital status	97,0%	3,0%	100,0%
		% within High cholesterol levels	19,9%	4,9%	18,2%
	married or living with partner	Count	2685	366	3051
		% within Marital status	88,0%	12,0%	100,0%
		% within High cholesterol levels	60,6%	66,4%	61,2%
	separated, divorced, or widowed	Count	866	158	1024
		% within Marital status	84,6%	15,4%	100,0%
		% within High cholesterol levels	19,5%	28,7%	20,6%
Total		Count	4431	551	4982
		% within Marital status	88,9%	11,1%	100,0%
		% within High cholesterol levels	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	82,840[a]	2	,000
Likelihood Ratio	102,837	2	,000
Linear-by-Linear Association	73,470	1	,000
N of Valid Cases	4982		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 100,31.

Table A20. Marital status/high blood pressure cross-tabulation

Marital status * High blood pressure Crosstabulation

			High blood pressure		
			No	Yes	Total
Marital status	single	Count	820	91	911
		% within Marital status	90,0%	10,0%	100,0%
		% within High blood pressure	23,3%	6,1%	18,2%
	married or living with partner	Count	2119	951	3070
		% within Marital status	69,0%	31,0%	100,0%
		% within High blood pressure	60,3%	63,4%	61,2%
	separated, divorced, or widowed	Count	577	457	1034
		% within Marital status	55,8%	44,2%	100,0%
		% within High blood pressure	16,4%	30,5%	20,6%
Total		Count	3516	1499	5015
		% within Marital status	70,1%	29,9%	100,0%
		% within High blood pressure	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	274,903[a]	2	,000
Likelihood Ratio	306,131	2	,000
Linear-by-Linear Association	266,300	1	,000
N of Valid Cases	5015		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 272,30.

Table A21. Marital status/heart attack cross-tabulation

Marital status * Heart attack Crosstabulation

			Heart attack		
			No	Yes	Total
Marital status	single	Count	909	3	912
		% within Marital status	99,7%	,3%	100,0%
		% within Heart attack	18,9%	1,5%	18,2%
	married or living with partner	Count	2950	123	3073
		% within Marital status	96,0%	4,0%	100,0%
		% within Heart attack	61,2%	60,3%	61,2%
	separated, divorced, or widowed	Count	958	78	1036
		% within Marital status	92,5%	7,5%	100,0%
		% within Heart attack	19,9%	38,2%	20,6%
Total		Count	4817	204	5021
		% within Marital status	95,9%	4,1%	100,0%
		% within Heart attack	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	64,581[a]	2	,000
Likelihood Ratio	80,089	2	,000
Linear-by-Linear Association	64,551	1	,000
N of Valid Cases	5021		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 37,05.

Table A22. Household size/diabetes cross-tabulation

No. of people in house hold (2 categories) * Diabetes Crosstabulation

			Diabetes		
			No	Yes	Total
No. of people in house hold (2 categories)	1-2	Count	1802	259	2061
		% within No. of people in house hold (2 categories)	87,4%	12,6%	100,0%
		% within Diabetes	38,9%	65,7%	41,0%
	3+	Count	2828	135	2963
		% within No. of people in house hold (2 categories)	95,4%	4,6%	100,0%
		% within Diabetes	61,1%	34,3%	59,0%
Total		Count	4630	394	5024
		% within No. of people in house hold (2 categories)	92,2%	7,8%	100,0%
		% within Diabetes	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	107,920[b]	1	,000		
Continuity Correction[a]	106,815	1	,000		
Likelihood Ratio	106,130	1	,000		
Fisher's Exact Test				,000	,000
Linear-by-Linear Association	107,899	1	,000		
N of Valid Cases	5024				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 161,63.

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for No. of people in house hold (2 categories) (1-2 / 3+)	,332	,268	,412
For cohort Diabetes = No	,916	,900	,933
For cohort Diabetes = Yes	2,758	2,257	3,370
N of Valid Cases	5024		

Table A23. Household size/anxiety, depression cross-tabulation

No. of people in house hold (2 categories) * Anxiety, depression Crosstabulation

			Anxiety, depression		
			No	Yes	Total
No. of people in house hold (2 categories)	1-2	Count	1822	232	2054
		% within No. of people in house hold (2 categories)	88,7%	11,3%	100,0%
		% within Anxiety, depression	40,0%	50,2%	41,0%
	3+	Count	2729	230	2959
		% within No. of people in house hold (2 categories)	92,2%	7,8%	100,0%
		% within Anxiety, depression	60,0%	49,8%	59,0%
Total		Count	4551	462	5013
		% within No. of people in house hold (2 categories)	90,8%	9,2%	100,0%
		% within Anxiety, depression	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	17,977[b]	1	,000		
Continuity Correction[a]	17,558	1	,000		
Likelihood Ratio	17,708	1	,000		
Fisher's Exact Test				,000	,000
Linear-by-Linear Association	17,973	1	,000		
N of Valid Cases	5013				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 189,30.

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for No. of people in house hold (2 categories) (1-2 / 3+)	,662	,546	,802
For cohort Anxiety, depression = No	,962	,944	,980
For cohort Anxiety, depression = Yes	1,453	1,222	1,728
N of Valid Cases	5013		

Table A24. Household size/high cholesterol levels cross-tabulation

No. of people in house hold (2 categories) * High cholesterol levels Crosstabulation

			High cholesterol levels		
			No	Yes	Total
No. of people in house hold (2 categories)	1-2	Count	1710	327	2037
		% within No. of people in house hold (2 categories)	83,9%	16,1%	100,0%
		% within High cholesterol levels	38,6%	59,2%	40,9%
	3+	Count	2724	225	2949
		% within No. of people in house hold (2 categories)	92,4%	7,6%	100,0%
		% within High cholesterol levels	61,4%	40,8%	59,1%
Total		Count	4434	552	4986
		% within No. of people in house hold (2 categories)	88,9%	11,1%	100,0%
		% within High cholesterol levels	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	86,826[b]	1	,000		
Continuity Correction[a]	85,972	1	,000		
Likelihood Ratio	85,152	1	,000		
Fisher's Exact Test				,000	,000
Linear-by-Linear Association	86,808	1	,000		
N of Valid Cases	4986				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 225,52.

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for No. of people in house hold (2 categories) (1-2 / 3+)	,432	,361	,517
For cohort High cholesterol levels = No	,909	,889	,929
For cohort High cholesterol levels = Yes	2,104	1,793	2,469
N of Valid Cases	4986		

Table A25. Household size/high blood pressure cross-tabulation

No. of people in house hold (2 categories) * High blood pressure Crosstabulation

			High blood pressure		
			No	Yes	Total
No. of people in house hold (2 categories)	1-2	Count	1196	862	2058
		% within No. of people in house hold (2 categories)	58,1%	41,9%	100,0%
		% within High blood pressure	34,0%	57,4%	41,0%
	3+	Count	2321	640	2961
		% within No. of people in house hold (2 categories)	78,4%	21,6%	100,0%
		% within High blood pressure	66,0%	42,6%	59,0%
Total		Count	3517	1502	5019
		% within No. of people in house hold (2 categories)	70,1%	29,9%	100,0%
		% within High blood pressure	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	237,908[b]	1	,000		
Continuity Correction[a]	236,942	1	,000		
Likelihood Ratio	235,842	1	,000		
Fisher's Exact Test				,000	,000
Linear-by-Linear Association	237,861	1	,000		
N of Valid Cases	5019				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 615,88.

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for No. of people in house hold (2 categories) (1-2 / 3+)	,383	,338	,433
For cohort High blood pressure = No	,741	,711	,773
For cohort High blood pressure = Yes	1,938	1,779	2,111
N of Valid Cases	5019		

Table A26. Household size/heart attack cross-tabulation

No. of people in house hold (2 categories) * Heart attack Crosstabulation

			Heart attack		
			No	Yes	Total
No. of people in house hold (2 categories)	1-2	Count	1931	131	2062
		% within No. of people in house hold (2 categories)	93,6%	6,4%	100,0%
		% within Heart attack	40,1%	63,9%	41,0%
	3+	Count	2890	74	2964
		% within No. of people in house hold (2 categories)	97,5%	2,5%	100,0%
		% within Heart attack	59,9%	36,1%	59,0%
Total		Count	4821	205	5026
		% within No. of people in house hold (2 categories)	95,9%	4,1%	100,0%
		% within Heart attack	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	46,224[b]	1	,000		
Continuity Correction[a]	45,244	1	,000		
Likelihood Ratio	45,344	1	,000		
Fisher's Exact Test				,000	,000
Linear-by-Linear Association	46,215	1	,000		
N of Valid Cases	5026				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 84,10.

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for No. of people in house hold (2 categories) (1-2 / 3+)	,377	,282	,505
For cohort Heart attack = No	,960	,948	,973
For cohort Heart attack = Yes	2,545	1,924	3,365
N of Valid Cases	5026		

Table A27. Education/diabetes cross-tabulation

Education * Diabetes Crosstabulation

			Diabetes		
			No	Yes	Total
Education	primary school	Count	1279	211	1490
		% within Education	85,8%	14,2%	100,0%
		% within Diabetes	27,7%	53,7%	29,7%
	secondary school w/out graduation test	Count	1091	76	1167
		% within Education	93,5%	6,5%	100,0%
		% within Diabetes	23,6%	19,3%	23,3%
	secondary school with graduation test	Count	1528	71	1599
		% within Education	95,6%	4,4%	100,0%
		% within Diabetes	33,1%	18,1%	31,9%
	3-year university degree (BA, BSc)	Count	460	18	478
		% within Education	96,2%	3,8%	100,0%
		% within Diabetes	10,0%	4,6%	9,5%
	5-year university degree (MA, MSc)	Count	262	17	279
		% within Education	93,9%	6,1%	100,0%
		% within Diabetes	5,7%	4,3%	5,6%
Total		Count	4620	393	5013
		% within Education	92,2%	7,8%	100,0%
		% within Diabetes	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	122,988[a]	4	,000
Likelihood Ratio	115,406	4	,000
Linear-by-Linear Association	83,244	1	,000
N of Valid Cases	5013		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 21,87.

Table A28. Education/anxiety, depression cross-tabulation

Education * Anxiety, depression Crosstabulation

			Anxiety, depression		
			No	Yes	Total
Education	primary school	Count	1287	200	1487
		% within Education	86,6%	13,4%	100,0%
		% within Anxiety, depression	28,3%	43,5%	29,7%
	secondary school w/out graduation test	Count	1056	110	1166
		% within Education	90,6%	9,4%	100,0%
		% within Anxiety, depression	23,3%	23,9%	23,3%
	secondary school with graduation test	Count	1485	111	1596
		% within Education	93,0%	7,0%	100,0%
		% within Anxiety, depression	32,7%	24,1%	31,9%
	3-year university degree (BA, BSc)	Count	441	33	474
		% within Education	93,0%	7,0%	100,0%
		% within Anxiety, depression	9,7%	7,2%	9,5%
	5-year university degree (MA, MSc)	Count	271	6	277
		% within Education	97,8%	2,2%	100,0%
		% within Anxiety, depression	6,0%	1,3%	5,5%
Total		Count	4540	460	5000
		% within Education	90,8%	9,2%	100,0%
		% within Anxiety, depression	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	61,106[a]	4	,000
Likelihood Ratio	65,196	4	,000
Linear-by-Linear Association	56,543	1	,000
N of Valid Cases	5000		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 25,48.

Table A29. Education/high cholesterol levels cross-tabulation

Education * High cholesterol levels Crosstabulation

			High cholesterol levels		
			No	Yes	Total
Education	primary school	Count	1266	207	1473
		% within Education	85,9%	14,1%	100,0%
		% within High cholesterol levels	28,6%	37,6%	29,6%
	secondary school w/out graduation test	Count	1045	113	1158
		% within Education	90,2%	9,8%	100,0%
		% within High cholesterol levels	23,6%	20,5%	23,3%
	secondary school with graduation test	Count	1451	139	1590
		% within Education	91,3%	8,7%	100,0%
		% within High cholesterol levels	32,8%	25,2%	32,0%
	3-year university degree (BA, BSc)	Count	423	53	476
		% within Education	88,9%	11,1%	100,0%
		% within High cholesterol levels	9,6%	9,6%	9,6%
	5-year university degree (MA, MSc)	Count	238	39	277
		% within Education	85,9%	14,1%	100,0%
		% within High cholesterol levels	5,4%	7,1%	5,6%
Total		Count	4423	551	4974
		% within Education	88,9%	11,1%	100,0%
		% within High cholesterol levels	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	26,624[a]	4	,000
Likelihood Ratio	26,216	4	,000
Linear-by-Linear Association	4,638	1	,031
N of Valid Cases	4974		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 30,68.

Table A30. Education/high blood pressure cross-tabulation

Education * High blood pressure Crosstabulation

			High blood pressure		
			No	Yes	Total
Education	primary school	Count	820	668	1488
		% within Education	55,1%	44,9%	100,0%
		% within High blood pressure	23,3%	44,6%	29,7%
	secondary school w/out graduation test	Count	859	307	1166
		% within Education	73,7%	26,3%	100,0%
		% within High blood pressure	24,5%	20,5%	23,3%
	secondary school with graduation test	Count	1259	341	1600
		% within Education	78,7%	21,3%	100,0%
		% within High blood pressure	35,8%	22,8%	31,9%
	3-year university degree (BA, BSc)	Count	370	107	477
		% within Education	77,6%	22,4%	100,0%
		% within High blood pressure	10,5%	7,1%	9,5%
	5-year university degree (MA, MSc)	Count	204	74	278
		% within Education	73,4%	26,6%	100,0%
		% within High blood pressure	5,8%	4,9%	5,6%
Total		Count	3512	1497	5009
		% within Education	70,1%	29,9%	100,0%
		% within High blood pressure	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	237,143[a]	4	,000
Likelihood Ratio	230,548	4	,000
Linear-by-Linear Association	148,218	1	,000
N of Valid Cases	5009		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 83,08.

Table A31. Education/heart attack cross-tabulation

Education * Heart attack Crosstabulation

			Heart attack		
			No	Yes	Total
Education	primary school	Count	1398	92	1490
		% within Education	93,8%	6,2%	100,0%
		% within Heart attack	29,1%	44,9%	29,7%
	secondary school w/out graduation test	Count	1126	43	1169
		% within Education	96,3%	3,7%	100,0%
		% within Heart attack	23,4%	21,0%	23,3%
	secondary school with graduation test	Count	1550	50	1600
		% within Education	96,9%	3,1%	100,0%
		% within Heart attack	32,2%	24,4%	31,9%
	3-year university degree (BA, BSc)	Count	468	9	477
		% within Education	98,1%	1,9%	100,0%
		% within Heart attack	9,7%	4,4%	9,5%
	5-year university degree (MA, MSc)	Count	267	11	278
		% within Education	96,0%	4,0%	100,0%
		% within Heart attack	5,6%	5,4%	5,5%
Total		Count	4809	205	5014
		% within Education	95,9%	4,1%	100,0%
		% within Heart attack	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	26,732[a]	4	,000
Likelihood Ratio	26,339	4	,000
Linear-by-Linear Association	17,693	1	,000
N of Valid Cases	5014		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 11,37.

Table A32. Economic activity/diabetes cross-tabulation

Economic activity * Diabetes Crosstabulation

			Diabetes		
			No	Yes	Total
Economic activity	working	Count	2537	90	2627
		% within Economic activity	96,6%	3,4%	100,0%
		% within Diabetes	54,9%	22,8%	52,4%
	unemployed	Count	189	6	195
		% within Economic activity	96,9%	3,1%	100,0%
		% within Diabetes	4,1%	1,5%	3,9%
	disability pensioner	Count	318	76	394
		% within Economic activity	80,7%	19,3%	100,0%
		% within Diabetes	6,9%	19,3%	7,9%
	pensioner	Count	1010	208	1218
		% within Economic activity	82,9%	17,1%	100,0%
		% within Diabetes	21,9%	52,8%	24,3%
	other inactive	Count	567	14	581
		% within Economic activity	97,6%	2,4%	100,0%
		% within Diabetes	12,3%	3,6%	11,6%
Total		Count	4621	394	5015
		% within Economic activity	92,1%	7,9%	100,0%
		% within Diabetes	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	315,386[a]	4	,000
Likelihood Ratio	291,072	4	,000
Linear-by-Linear Association	94,643	1	,000
N of Valid Cases	5015		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 15,32.

Table A33. Economic activity/anxiety, depression cross-tabulation

Economic activity * Anxiety, depression Crosstabulation

			Anxiety, depression		
			No	Yes	Total
Economic activity	working	Count	2481	143	2624
		% within Economic activit	94,6%	5,4%	100,0%
		% within Anxiety, depression	54,6%	31,1%	52,4%
	unemployed	Count	186	8	194
		% within Economic activit	95,9%	4,1%	100,0%
		% within Anxiety, depression	4,1%	1,7%	3,9%
	disability pensioner	Count	281	109	390
		% within Economic activit	72,1%	27,9%	100,0%
		% within Anxiety, depression	6,2%	23,7%	7,8%
	pensioner	Count	1059	156	1215
		% within Economic activit	87,2%	12,8%	100,0%
		% within Anxiety, depression	23,3%	33,9%	24,3%
	other inactive	Count	536	44	580
		% within Economic activit	92,4%	7,6%	100,0%
		% within Anxiety, depression	11,8%	9,6%	11,6%
Total		Count	4543	460	5003
		% within Economic activit	90,8%	9,2%	100,0%
		% within Anxiety, depression	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	235,475[a]	4	,000
Likelihood Ratio	189,982	4	,000
Linear-by-Linear Association	52,209	1	,000
N of Valid Cases	5003		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 17,84.

Table A34. Economic activity/high cholesterol levels cross-tabulation

Economic activity * High cholesterol levels Crosstabulation

			High cholesterol levels		
			No	Yes	Total
Economic activity	working	Count	2432	180	2612
		% within Economic activity	93,1%	6,9%	100,0%
		% within High cholesterol levels	54,9%	32,6%	52,5%
	unemployed	Count	182	11	193
		% within Economic activity	94,3%	5,7%	100,0%
		% within High cholesterol levels	4,1%	2,0%	3,9%
	disability pensioner	Count	299	92	391
		% within Economic activity	76,5%	23,5%	100,0%
		% within High cholesterol levels	6,8%	16,7%	7,9%
	pensioner	Count	962	241	1203
		% within Economic activity	80,0%	20,0%	100,0%
		% within High cholesterol levels	21,7%	43,7%	24,2%
	other inactive	Count	552	28	580
		% within Economic activity	95,2%	4,8%	100,0%
		% within High cholesterol levels	12,5%	5,1%	11,6%
Total		Count	4427	552	4979
		% within Economic activity	88,9%	11,1%	100,0%
		% within High cholesterol levels	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	234,466[a]	4	,000
Likelihood Ratio	217,844	4	,000
Linear-by-Linear Association	57,769	1	,000
N of Valid Cases	4979		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 21,40.

Table A35. Economic activity/high blood pressure cross-tabulation

Economic activity * High blood pressure Crosstabulation

			High blood pressure		
			No	Yes	Total
Economic activity	working	Count	2129	495	2624
		% within Economic activity	81,1%	18,9%	100,0%
		% within High blood pressure	60,7%	33,0%	52,4%
	unemployed	Count	157	36	193
		% within Economic activity	81,3%	18,7%	100,0%
		% within High blood pressure	4,5%	2,4%	3,9%
	disability pensioner	Count	180	213	393
		% within Economic activity	45,8%	54,2%	100,0%
		% within High blood pressure	5,1%	14,2%	7,8%
	pensioner	Count	547	671	1218
		% within Economic activity	44,9%	55,1%	100,0%
		% within High blood pressure	15,6%	44,7%	24,3%
	other inactive	Count	496	85	581
		% within Economic activity	85,4%	14,6%	100,0%
		% within High blood pressure	14,1%	5,7%	11,6%
Total		Count	3509	1500	5009
		% within Economic activity	70,1%	29,9%	100,0%
		% within High blood pressure	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	707,566[a]	4	,000
Likelihood Ratio	686,423	4	,000
Linear-by-Linear Association	206,402	1	,000
N of Valid Cases	5009		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 57,80.

Table A36. Economic activity/heart attack cross-tabulation

Economic activity * Heart attack Crosstabulation

			Heart attack		
			No	Yes	Total
Economic activity	working	Count	2599	28	2627
		% within Economic activity	98,9%	1,1%	100,0%
		% within Heart attack	54,0%	13,8%	52,4%
	unemployed	Count	193	2	195
		% within Economic activity	99,0%	1,0%	100,0%
		% within Heart attack	4,0%	1,0%	3,9%
	disability pensioner	Count	338	55	393
		% within Economic activity	86,0%	14,0%	100,0%
		% within Heart attack	7,0%	27,1%	7,8%
	pensioner	Count	1110	110	1220
		% within Economic activity	91,0%	9,0%	100,0%
		% within Heart attack	23,1%	54,2%	24,3%
	other inactive	Count	573	8	581
		% within Economic activity	98,6%	1,4%	100,0%
		% within Heart attack	11,9%	3,9%	11,6%
Total		Count	4813	203	5016
		% within Economic activity	96,0%	4,0%	100,0%
		% within Heart attack	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	253,107[a]	4	,000
Likelihood Ratio	225,670	4	,000
Linear-by-Linear Association	76,815	1	,000
N of Valid Cases	5016		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 7,89.

Table A37. Occupation/diabetes cross-tabulation

Occupation * Diabetes Crosstabulation

			Diabetes		
			No	Yes	Total
Occupation	Executive status	Count	302	11	313
		% within Occupation	96,5%	3,5%	100,0%
		% within Diabetes	6,7%	2,8%	6,4%
	Non-executive intellectual	Count	642	15	657
		% within Occupation	97,7%	2,3%	100,0%
		% within Diabetes	14,2%	3,8%	13,4%
	Independent tradesman, service provider, intellectual	Count	363	16	379
		% within Occupation	95,8%	4,2%	100,0%
		% within Diabetes	8,0%	4,1%	7,7%
	Skilled worker	Count	621	25	646
		% within Occupation	96,1%	3,9%	100,0%
		% within Diabetes	13,7%	6,4%	13,1%
	Non-skilled or agricultural worker	Count	512	21	533
		% within Occupation	96,1%	3,9%	100,0%
		% within Diabetes	11,3%	5,4%	10,8%
	Not working	Count	2085	302	2387
		% within Occupation	87,3%	12,7%	100,0%
		% within Diabetes	46,1%	77,4%	48,6%
Total		Count	4525	390	4915
		% within Occupation	92,1%	7,9%	100,0%
		% within Diabetes	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	143,211[a]	5	,000
Likelihood Ratio	152,371	5	,000
Linear-by-Linear Association	105,501	1	,000
N of Valid Cases	4915		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 24,84.

Table A38. Occupation/anxiety, depression cross-tabulation

Occupation * Anxiety, depression Crosstabulation

			Anxiety, depression		
			No	Yes	Total
Occupation	Executive status	Count	306	8	314
		% within Occupation	97,5%	2,5%	100,0%
		% within Anxiety, depression	6,9%	1,8%	6,4%
	Non-executive intellectual	Count	620	35	655
		% within Occupation	94,7%	5,3%	100,0%
		% within Anxiety, depression	13,9%	7,7%	13,4%
	Independent tradesman, service provider, intellectual	Count	359	19	378
		% within Occupation	95,0%	5,0%	100,0%
		% within Anxiety, depression	8,1%	4,2%	7,7%
	Skilled worker	Count	615	30	645
		% within Occupation	95,3%	4,7%	100,0%
		% within Anxiety, depression	13,8%	6,6%	13,2%
	Non-skilled or agricultural worker	Count	488	44	532
		% within Occupation	91,7%	8,3%	100,0%
		% within Anxiety, depression	11,0%	9,7%	10,9%
	Not working	Count	2062	317	2379
		% within Occupation	86,7%	13,3%	100,0%
		% within Anxiety, depression	46,3%	70,0%	48,5%
Total		Count	4450	453	4903
		% within Occupation	90,8%	9,2%	100,0%
		% within Anxiety, depression	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	100,765[a]	5	,000
Likelihood Ratio	108,445	5	,000
Linear-by-Linear Association	84,211	1	,000
N of Valid Cases	4903		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 29,01.

Table A39. Occupation/high cholesterol levels cross-tabulation

Occupation * High cholesterol levels Crosstabulation

			High cholesterol levels		
			No	Yes	Total
Occupation	Executive status	Count	288	23	311
		% within Occupation	92,6%	7,4%	100,0%
		% within High cholesterol levels	6,6%	4,2%	6,4%
	Non-executive intellectua	Count	593	62	655
		% within Occupation	90,5%	9,5%	100,0%
		% within High cholesterol levels	13,7%	11,4%	13,4%
	Independent tradesman, service provider, intellectual	Count	351	27	378
		% within Occupation	92,9%	7,1%	100,0%
		% within High cholesterol levels	8,1%	4,9%	7,7%
	Skilled worker	Count	609	34	643
		% within Occupation	94,7%	5,3%	100,0%
		% within High cholesterol levels	14,1%	6,2%	13,2%
	Non-skilled or agricultural worker	Count	498	29	527
		% within Occupation	94,5%	5,5%	100,0%
		% within High cholesterol levels	11,5%	5,3%	10,8%
	Not working	Count	1995	371	2366
		% within Occupation	84,3%	15,7%	100,0%
		% within High cholesterol levels	46,0%	67,9%	48,5%
Total		Count	4334	546	4880
		% within Occupation	88,8%	11,2%	100,0%
		% within High cholesterol levels	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	100,407[a]	5	,000
Likelihood Ratio	105,522	5	,000
Linear-by-Linear Association	45,858	1	,000
N of Valid Cases	4880		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 34,80.

Table A40. Occupation/high blood pressure cross-tabulation

Occupation * High blood pressure Crosstabulation

			High blood pressure		
			No	Yes	Total
Occupation	Executive status	Count	245	69	314
		% within Occupation	78,0%	22,0%	100,0%
		% within High blood pressure	7,1%	4,7%	6,4%
	Non-executive intellectual	Count	544	112	656
		% within Occupation	82,9%	17,1%	100,0%
		% within High blood pressure	15,9%	7,6%	13,4%
	Independent tradesman, service provider, intellectual	Count	301	77	378
		% within Occupation	79,6%	20,4%	100,0%
		% within High blood pressure	8,8%	5,2%	7,7%
	Skilled worker	Count	540	104	644
		% within Occupation	83,9%	16,1%	100,0%
		% within High blood pressure	15,7%	7,0%	13,1%
	Non-skilled or agricultural worker	Count	417	114	531
		% within Occupation	78,5%	21,5%	100,0%
		% within High blood pressure	12,2%	7,7%	10,8%
	Not working	Count	1383	1003	2386
		% within Occupation	58,0%	42,0%	100,0%
		% within High blood pressure	40,3%	67,8%	48,6%
Total		Count	3430	1479	4909
		% within Occupation	69,9%	30,1%	100,0%
		% within High blood pressure	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	319,559[a]	5	,000
Likelihood Ratio	326,873	5	,000
Linear-by-Linear Association	214,198	1	,000
N of Valid Cases	4909		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 94,60.

Table A41. Occupation/heart attack cross-tabulation

Occupation * Heart attack Crosstabulation

			Heart attack		
			No	Yes	Total
Occupation	Executive status	Count	312	2	314
		% within Occupation	99,4%	,6%	100,0%
		% within Heart attack	6,6%	1,0%	6,4%
	Non-executive intellectual	Count	652	4	656
		% within Occupation	99,4%	,6%	100,0%
		% within Heart attack	13,8%	2,0%	13,3%
	Independent tradesman, service provider, intellectual	Count	369	8	377
		% within Occupation	97,9%	2,1%	100,0%
		% within Heart attack	7,8%	4,0%	7,7%
	Skilled worker	Count	641	6	647
		% within Occupation	99,1%	,9%	100,0%
		% within Heart attack	13,6%	3,0%	13,2%
	Non-skilled or agricultural worker	Count	528	5	533
		% within Occupation	99,1%	,9%	100,0%
		% within Heart attack	11,2%	2,5%	10,8%
	Not working	Count	2214	175	2389
		% within Occupation	92,7%	7,3%	100,0%
		% within Heart attack	46,9%	87,5%	48,6%
Total		Count	4716	200	4916
		% within Occupation	95,9%	4,1%	100,0%
		% within Heart attack	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	127,905[a]	5	,000
Likelihood Ratio	145,607	5	,000
Linear-by-Linear Association	88,897	1	,000
N of Valid Cases	4916		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 12,77.

Appendix 2. Social and Economic Factors behind Good or Bad Health Status

Table A42. Self-reported health status

Self reported health status during last 12 months

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	very poor	180	3,6	3,6	3,6
	poor	732	14,6	14,6	18,1
	average	1852	36,8	36,8	55,0
	good	1755	34,9	34,9	89,9
	very good	507	10,1	10,1	100,0
	Total	5026	99,9	100,0	
Missing	System	3	,1		
Total		5029	100,0		

Table A43. Age group/health status cross-tabulation

Agegroup * Self reported health status during last 12 months Crosstabulation

			Self reported health status during last 12 months					
			very poor	poor	average	good	very good	Total
Agegroup	18-34	Count	12	60	330	842	342	1586
		% within Agegroup	,8%	3,8%	20,8%	53,1%	21,6%	100,0%
		% within Self reporte health status during last 12 months	6,6%	8,2%	17,8%	47,9%	67,3%	31,5%
	35-64	Count	91	409	1048	803	149	2500
		% within Agegroup	3,6%	16,4%	41,9%	32,1%	6,0%	100,0%
		% within Self reporte health status during last 12 months	50,3%	55,9%	56,6%	45,7%	29,3%	49,7%
	65+	Count	78	263	474	111	17	943
		% within Agegroup	8,3%	27,9%	50,3%	11,8%	1,8%	100,0%
		% within Self reporte health status during last 12 months	43,1%	35,9%	25,6%	6,3%	3,3%	18,8%
Total		Count	181	732	1852	1756	508	5029
		% within Agegroup	3,6%	14,6%	36,8%	34,9%	10,1%	100,0%
		% within Self reporte health status during last 12 months	100,0%	100,0%	100,0%	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	1127,725[a]	8	,000
Likelihood Ratio	1192,989	8	,000
Linear-by-Linear Association	988,999	1	,000
N of Valid Cases	5029		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 33,94.

Table A44. Age group/good and bad health cross-tabulation

Agegroup * Self reported good/bad health during last 12 months Crosstabulation

			Self reported good/bad health during last 12 months		
			bad	good	Total
Agegroup	18-34	Count	71	1513	1584
		% within Agegroup	4,5%	95,5%	100,0%
		% within Self reported good/bad health during last 12 months	7,8%	36,8%	31,5%
	35-64	Count	500	2000	2500
		% within Agegroup	20,0%	80,0%	100,0%
		% within Self reported good/bad health during last 12 months	54,8%	48,6%	49,7%
	65+	Count	341	601	942
		% within Agegroup	36,2%	63,8%	100,0%
		% within Self reported good/bad health during last 12 months	37,4%	14,6%	18,7%
Total		Count	912	4114	5026
		% within Agegroup	18,1%	81,9%	100,0%
		% within Self reported good/bad health during last 12 months	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	411,599[a]	2	,000
Likelihood Ratio	445,693	2	,000
Linear-by-Linear Association	411,422	1	,000
N of Valid Cases	5026		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 170,93.

Table A45. Gender/good and bad health cross-tabulation

Gender * Self reported good/bad health during last 12 months Crosstabulation

			Self reported good/bad health during last 12 months		
			bad	good	Total
Gender	male	Count	334	2022	2356
		% within Gender	14,2%	85,8%	100,0%
		% within Self reported good/bad health during last 12 months	36,6%	49,1%	46,9%
	female	Count	578	2092	2670
		% within Gender	21,6%	78,4%	100,0%
		% within Self reported good/bad health during last 12 months	63,4%	50,9%	53,1%
Total		Count	912	4114	5026
		% within Gender	18,1%	81,9%	100,0%
		% within Self reported good/bad health during last 12 months	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	47,038[b]	1	,000		
Continuity Correction[a]	46,536	1	,000		
Likelihood Ratio	47,644	1	,000		
Fisher's Exact Test				,000	,000
Linear-by-Linear Association	47,029	1	,000		
N of Valid Cases	5026				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 427,51.

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Gender (male / female)	,598	,516	,693
For cohort Self reported good/bad health during last 12 months = bad	,655	,579	,740
For cohort Self reported good/bad health during last 12 months = good	1,095	1,067	1,124
N of Valid Cases	5026		

Table A46. Marital status/good and bad health cross-tabulation

Marital status * Self reported good/bad health during last 12 months Crosstabulation

			Self reported good/bad health during last 12 months		
			bad	good	Total
Marital status	single	Count	68	843	911
		% within Marital status	7,5%	92,5%	100,0%
		% within Self reported good/bad health during last 12 months	7,5%	20,5%	18,1%
	married or living with partner	Count	528	2547	3075
		% within Marital status	17,2%	82,8%	100,0%
		% within Self reported good/bad health during last 12 months	58,0%	62,0%	61,2%
	separated, divorced, or widowed	Count	315	721	1036
		% within Marital status	30,4%	69,6%	100,0%
		% within Self reported good/bad health during last 12 months	34,6%	17,5%	20,6%
Total		Count	911	4111	5022
		% within Marital status	18,1%	81,9%	100,0%
		% within Self reported good/bad health during last 12 months	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	176,822[a]	2	,000
Likelihood Ratio	179,209	2	,000
Linear-by-Linear Association	174,295	1	,000
N of Valid Cases	5022		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 165,26.

Table A47. Township size/good and bad health cross-tabulation

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	24,145[a]	5	,000
Likelihood Ratio	24,414	5	,000
Linear-by-Linear Association	18,011	1	,000
N of Valid Cases	5026		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 68,95.

Table A48. Household size/good and bad health cross-tabulation

No. of people in house hold (2 categories) * Self reported good/bad health during last 12 months Crosstabulation

			Self reported good/bad health during last 12 months		
			bad	good	Total
No. of people in house hold (2 categories)	1-2	Count	536	1523	2059
		% within No. of people in house hold (2 categories)	26,0%	74,0%	100,0%
		% within Self reported good/bad health during last 12 months	58,8%	37,0%	41,0%
	3+	Count	376	2591	2967
		% within No. of people in house hold (2 categories)	12,7%	87,3%	100,0%
		% within Self reported good/bad health during last 12 months	41,2%	63,0%	59,0%
Total		Count	912	4114	5026
		% within No. of people in house hold (2 categories)	18,1%	81,9%	100,0%
		% within Self reported good/bad health during last 12 months	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	146,052[b]	1	,000		
Continuity Correction[a]	145,153	1	,000		
Likelihood Ratio	143,728	1	,000		
Fisher's Exact Test				,000	,000
Linear-by-Linear Association	146,022	1	,000		
N of Valid Cases	5026				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 373,62.

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for No. of people in house hold (2 categories) (1-2 / 3+)	2,425	2,095	2,807
For cohort Self reported good/bad health during last 12 months = bad	2,054	1,823	2,314
For cohort Self reported good/bad health during last 12 months = good	,847	,823	,872
N of Valid Cases	5026		

Table A49. Education/good and bad health cross-tabulation

Education * Self reported good/bad health during last 12 months Crosstabulation

			Self reported good/bad health during last 12 months		
			bad	good	Total
Education	primary school	Count	483	1006	1489
		% within Education	32,4%	67,6%	100,0%
		% within Self reported good/bad health during last 12 months	53,1%	24,5%	29,7%
	secondary school w/out graduation test	Count	204	966	1170
		% within Education	17,4%	82,6%	100,0%
		% within Self reported good/bad health during last 12 months	22,4%	23,5%	23,3%
	secondary school with graduation test	Count	169	1430	1599
		% within Education	10,6%	89,4%	100,0%
		% within Self reported good/bad health during last 12 months	18,6%	34,8%	31,9%
	3-year university degree (BA, BSc)	Count	40	438	478
		% within Education	8,4%	91,6%	100,0%
		% within Self reported good/bad health during last 12 months	4,4%	10,7%	9,5%
	5-year university degree (MA, MSc)	Count	14	264	278
		% within Education	5,0%	95,0%	100,0%
		% within Self reported good/bad health during last 12 months	1,5%	6,4%	5,5%
Total		Count	910	4104	5014
		% within Education	18,1%	81,9%	100,0%
		% within Self reported good/bad health during last 12 months	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	329,855[a]	4	,000
Likelihood Ratio	325,422	4	,000
Linear-by-Linear Association	285,993	1	,000
N of Valid Cases	5014		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 50,45.

Table A50. Occupation/good and bad health cross-tabulation

Occupation * Self reported good/bad health during last 12 months Crosstabulation

			Self reported good/bad health during last 12 months		
			bad	good	Total
Occupation	Executive status	Count	14	300	314
		% within Occupation	4,5%	95,5%	100,0%
		% within Self reported good/bad health during last 12 months	1,6%	7,5%	6,4%
	Non-executive intellectua	Count	33	623	656
		% within Occupation	5,0%	95,0%	100,0%
		% within Self reported good/bad health during last 12 months	3,7%	15,5%	13,3%
	Independent tradesman, service provider, intellectual	Count	26	352	378
		% within Occupation	6,9%	93,1%	100,0%
		% within Self reported good/bad health during last 12 months	2,9%	8,8%	7,7%
	Skilled worker	Count	52	596	648
		% within Occupation	8,0%	92,0%	100,0%
		% within Self reported good/bad health during last 12 months	5,8%	14,8%	13,2%
	Non-skilled or agricultural worker	Count	55	478	533
		% within Occupation	10,3%	89,7%	100,0%
		% within Self reported good/bad health during last 12 months	6,1%	11,9%	10,8%
	Not working	Count	717	1671	2388
		% within Occupation	30,0%	70,0%	100,0%
		% within Self reported good/bad health during last 12 months	79,9%	41,6%	48,6%
Total		Count	897	4020	4917
		% within Occupation	18,2%	81,8%	100,0%
		% within Self reported good/bad health during last 12 months	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	439,582[a]	5	,000
Likelihood Ratio	471,732	5	,000
Linear-by-Linear Association	348,286	1	,000
N of Valid Cases	4917		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 57,28.

Table A51. Income/good and bad health cross-tabulation

Income quintiles * Self reported good/bad health during last 12 months Crosstabulation

			Self reported good/bad health during last 12 months		
			bad	good	Total
Income quintiles	<=65,000	Count	290	546	836
		% within Income quintiles	34,7%	65,3%	100,0%
		% within Self reported good/bad health during last 12 months	37,2%	16,7%	20,6%
	65,000-94,000	Count	213	573	786
		% within Income quintiles	27,1%	72,9%	100,0%
		% within Self reported good/bad health during last 12 months	27,3%	17,5%	19,4%
	94,000-120,000	Count	154	705	859
		% within Income quintiles	17,9%	82,1%	100,0%
		% within Self reported good/bad health during last 12 months	19,8%	21,5%	21,2%
	120,000-170,000	Count	87	694	781
		% within Income quintiles	11,1%	88,9%	100,0%
		% within Self reported good/bad health during last 12 months	11,2%	21,2%	19,3%
	>170,000	Count	35	758	793
		% within Income quintiles	4,4%	95,6%	100,0%
		% within Self reported good/bad health during last 12 months	4,5%	23,1%	19,6%
Total		Count	779	3276	4055
		% within Income quintiles	19,2%	80,8%	100,0%
		% within Self reported good/bad health during last 12 months	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	306,128[a]	4	,000
Likelihood Ratio	329,605	4	,000
Linear-by-Linear Association	304,955	1	,000
N of Valid Cases	4055		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 150,04.

Appendix 3. Health Service Utilisation by Individuals in Good and Bad Health

Table A52. Number of visits – Total population

Statistics

		No. of GP visits	No. of specialist visits	No. of inpatient days during last 12 months	No. of dentist visits
N	Valid	5008	5021	5018	5026
	Missing	21	8	11	3
Mean		5,0723	2,5405	2,3892	1,1823
Std. Error of Mean		,1151	8,931E-02	,1626	3,757E-02
Std. Deviation		8,1469	6,3283	11,5215	2,6636
Percentiles	25	,0000	,0000	,0000	,0000
	75	8,0000	3,0000	,0000	1,0000

Table A53. Number of visits – Population in bad health

Statistics

		No. of GP visits	No. of specialist visits	No. of inpatient days during last 12 months	No. of dentist visits
N	Valid	927	931	932	936
	Missing	9	5	4	0
Mean		11,3323	5,3921	6,9914	,9658
Std. Error of Mean		,4384	,3499	,5095	8,434E-02
Std. Deviation		13,3478	10,6769	15,5543	2,5802
Percentiles	25	3,0000	1,0000	,0000	,0000
	75	12,0000	6,0000	9,0000	1,0000

Table A54. Number of visits – Population in good health

Statistics

		No. of GP visits	No. of specialist visits	No. of inpatient days during last 12 months	No. of dentist visits
N	Valid	4078	4088	4083	4087
	Missing	12	2	7	3
Mean		3,6442	1,8924	1,3253	1,2317
Std. Error of Mean		8,586E-02	7,163E-02	,1574	4,194E-02
Std. Deviation		5,4827	4,5797	10,0564	2,6809
Percentiles	25	,0000	,0000	,0000	,0000
	75	5,0000	2,0000	,0000	1,0000

Table A55. Contact with health services – Total population

Contact with GP in previous year

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	1435	28,5	28,7	28,7
	Yes	3572	71,0	71,3	100,0
	Total	5007	99,6	100,0	
Missing	System	22	,4		
Total		5029	100,0		

Contact with dentist in previous year

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	3116	62,0	62,0	62,0
	Yes	1911	38,0	38,0	100,0
	Total	5028	100,0	100,0	
Missing	System	1	,0		
Total		5029	100,0		

Contact with specialist in previous year

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	2242	44,6	44,6	44,6
	Yes	2780	55,3	55,4	100,0
	Total	5022	99,9	100,0	
Missing	System	7	,1		
Total		5029	100,0		

Table A55. Continued

Inpatient care in previous year

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	4241	84,3	84,5	84,5
	Yes	777	15,5	15,5	100,0
	Total	5018	99,8	100,0	
Missing	System	11	,2		
Total		5029	100,0		

Table A56. Contact with health services – Population in bad health status

Contact with GP in previous year

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	91	10,0	10,1	10,1
	Yes	811	88,9	89,9	100,0
	Total	902	98,9	100,0	
Missing	System	10	1,1		
Total		912	100,0		

Contact with dentist in previous year

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	655	71,8	71,8	71,8
	Yes	257	28,2	28,2	100,0
	Total	912	100,0	100,0	

Contact with specialist in previous year

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	230	25,2	25,3	25,3
	Yes	678	74,3	74,7	100,0
	Total	908	99,5	100,0	
Missing	System	5	,5		
Total		912	100,0		

Inpatient care in previous year

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	564	61,8	62,0	62,0
	Yes	345	37,8	38,0	100,0
	Total	908	99,6	100,0	
Missing	System	4	,4		
Total		912	100,0		

Table A57. Contact with health services – Population in good health status

Contact with GP in previous year

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	1344	32,7	32,8	32,8
	Yes	2758	67,0	67,2	100,0
	Total	4102	99,7	100,0	
Missing	System	12	,3		
Total		4114	100,0		

Contact with dentist in previous year

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	2460	59,8	59,8	59,8
	Yes	1652	40,2	40,2	100,0
	Total	4113	100,0	100,0	
Missing	System	1	,0		
Total		4114	100,0		

Contact with specialist in previous year

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	2010	48,9	48,9	48,9
	Yes	2102	51,1	51,1	100,0
	Total	4112	100,0	100,0	
Missing	System	2	,0		
Total		4114	100,0		

Inpatient care in previous year

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	3675	89,3	89,5	89,5
	Yes	432	10,5	10,5	100,0
	Total	4107	99,8	100,0	
Missing	System	7	,2		
Total		4114	100,0		

Table A58. Gender/GP/age group cross-tabulation

Gender * Contact with GP in previous year * Agegroup Crosstabulation

Agegroup				Contact with GP in previous year		Total
				No	Yes	
18-34	Gender	male	Count	343	456	799
			% within Gender	42,9%	57,1%	100,0%
			% within Contact with GP in previous year	57,5%	46,4%	50,6%
		female	Count	254	527	781
			% within Gender	32,5%	67,5%	100,0%
			% within Contact with GP in previous year	42,5%	53,6%	49,4%
	Total		Count	597	983	1580
			% within Gender	37,8%	62,2%	100,0%
			% within Contact with GP in previous year	100,0%	100,0%	100,0%
35-64	Gender	male	Count	400	796	1196
			% within Gender	33,4%	66,6%	100,0%
			% within Contact with GP in previous year	57,1%	44,5%	48,1%
		female	Count	300	992	1292
			% within Gender	23,2%	76,8%	100,0%
			% within Contact with GP in previous year	42,9%	55,5%	51,9%
	Total		Count	700	1788	2488
			% within Gender	28,1%	71,9%	100,0%
			% within Contact with GP in previous year	100,0%	100,0%	100,0%
65+	Gender	male	Count	58	293	351
			% within Gender	16,5%	83,5%	100,0%
			% within Contact with GP in previous year	42,0%	36,5%	37,3%
		female	Count	80	509	589
			% within Gender	13,6%	86,4%	100,0%
			% within Contact with GP in previous year	58,0%	63,5%	62,7%
	Total		Count	138	802	940
			% within Gender	14,7%	85,3%	100,0%
			% within Contact with GP in previous year	100,0%	100,0%	100,0%

Table A58. Continued

Chi-Square Tests

Agegroup		Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
18-34	Pearson Chi-Square	18,193[b]	1	,000		
	Continuity Correction[a]	17,754	1	,000		
	Likelihood Ratio	18,245	1	,000		
	Fisher's Exact Test				,000	,000
	Linear-by-Linear Association	18,182	1	,000		
	N of Valid Cases	1580				
35-64	Pearson Chi-Square	32,115[c]	1	,000		
	Continuity Correction[a]	31,611	1	,000		
	Likelihood Ratio	32,158	1	,000		
	Fisher's Exact Test				,000	,000
	Linear-by-Linear Association	32,102	1	,000		
	N of Valid Cases	2488				
65+	Pearson Chi-Square	1,520[d]	1	,218		
	Continuity Correction[a]	1,294	1	,255		
	Likelihood Ratio	1,501	1	,221		
	Fisher's Exact Test				,217	,128
	Linear-by-Linear Association	1,518	1	,218		
	N of Valid Cases	940				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 295,10.

c. 0 cells (,0%) have expected count less than 5. The minimum expected count is 336,50.

d. 0 cells (,0%) have expected count less than 5. The minimum expected count is 51,53.

Risk Estimate

Agegroup		Value	95% Confidence Interval	
			Lower	Upper
18-34	Odds Ratio for Gender (male / female)	1,561	1,271	1,916
	For cohort Contact with GP in previous year = No	1,320	1,160	1,501
	For cohort Contact with GP in previous year = Yes	,846	,783	,914
	N of Valid Cases	1580		
35-64	Odds Ratio for Gender (male / female)	1,662	1,393	1,982
	For cohort Contact with GP in previous year = No	1,440	1,268	1,636
	For cohort Contact with GP in previous year = Yes	,867	,824	,911
	N of Valid Cases	2488		
65+	Odds Ratio for Gender (male / female)	1,259	,872	1,818
	For cohort Contact with GP in previous year = No	1,217	,891	1,661
	For cohort Contact with GP in previous year = Yes	,966	,913	1,022
	N of Valid Cases	940		

Table A59. Gender/specialist/age group cross-tabulation

Gender * Contact with specialist in previous year * Agegroup Crosstabulation

Agegroup				Contact with specialist in previous year: No	Contact with specialist in previous year: Yes	Total
18-34	Gender	male	Count	513	289	802
			% within Gender	64,0%	36,0%	100,0%
			% within Contact with specialist in previous year	68,1%	34,9%	50,7%
		female	Count	240	540	780
			% within Gender	30,8%	69,2%	100,0%
			% within Contact with specialist in previous year	31,9%	65,1%	49,3%
	Total		Count	753	829	1582
			% within Gender	47,6%	52,4%	100,0%
			% within Contact with specialist in previous year	100,0%	100,0%	100,0%
35-64	Gender	male	Count	649	550	1199
			% within Gender	54,1%	45,9%	100,0%
			% within Contact with specialist in previous year	60,8%	38,5%	48,0%
		female	Count	418	880	1298
			% within Gender	32,2%	67,8%	100,0%
			% within Contact with specialist in previous year	39,2%	61,5%	52,0%
	Total		Count	1067	1430	2497
			% within Gender	42,7%	57,3%	100,0%
			% within Contact with specialist in previous year	100,0%	100,0%	100,0%
65+	Gender	male	Count	172	181	353
			% within Gender	48,7%	51,3%	100,0%
			% within Contact with specialist in previous year	40,8%	34,7%	37,4%
		female	Count	250	340	590
			% within Gender	42,4%	57,6%	100,0%
			% within Contact with specialist in previous year	59,2%	65,3%	62,6%
	Total		Count	422	521	943
			% within Gender	44,8%	55,2%	100,0%
			% within Contact with specialist in previous year	100,0%	100,0%	100,0%

Table A59. Continued

Chi-Square Tests

Agegroup		Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
18-34	Pearson Chi-Square	174,700[b]	1	,000		
	Continuity Correction[a]	173,372	1	,000		
	Likelihood Ratio	178,163	1	,000		
	Fisher's Exact Test				,000	,000
	Linear-by-Linear Association	174,590	1	,000		
	N of Valid Cases	1582				
35-64	Pearson Chi-Square	122,431[c]	1	,000		
	Continuity Correction[a]	121,537	1	,000		
	Likelihood Ratio	123,327	1	,000		
	Fisher's Exact Test				,000	,000
	Linear-by-Linear Association	122,382	1	,000		
	N of Valid Cases	2497				
65+	Pearson Chi-Square	3,605[d]	1	,058		
	Continuity Correction[a]	3,352	1	,067		
	Likelihood Ratio	3,599	1	,058		
	Fisher's Exact Test				,059	,034
	Linear-by-Linear Association	3,601	1	,058		
	N of Valid Cases	943				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 371,26.

c. 0 cells (,0%) have expected count less than 5. The minimum expected count is 512,35.

d. 0 cells (,0%) have expected count less than 5. The minimum expected count is 157,97.

Risk Estimate

Agegroup		Value	95% Confidence Interval	
			Lower	Upper
18-34	Odds Ratio for Gender (male / female)	3,994	3,239	4,925
	For cohort Contact with specialist in previous year = No	2,079	1,849	2,338
	For cohort Contact with specialist in previous year = Yes	,521	,469	,577
	N of Valid Cases	1582		
35-64	Odds Ratio for Gender (male / female)	2,484	2,111	2,923
	For cohort Contact with specialist in previous year = No	1,681	1,529	1,848
	For cohort Contact with specialist in previous year = Yes	,677	,630	,727
	N of Valid Cases	2497		
65+	Odds Ratio for Gender (male / female)	1,292	,992	1,685
	For cohort Contact with specialist in previous year = No	1,150	,997	1,326
	For cohort Contact with specialist in previous year = Yes	,890	,787	1,006
	N of Valid Cases	943		

Table A60. Gender/inpatient/age group cross-tabulation

Gender * Inpatient care in previous year * Agegroup Crosstabulation

Agegroup				Inpatient care in previous year: No	Inpatient care in previous year: Yes	Total
18-34	Gender	male	Count	752	48	800
			% within Gender	94,0%	6,0%	100,0%
			% within Inpatient care in previous year	53,3%	28,4%	50,6%
		female	Count	660	121	781
			% within Gender	84,5%	15,5%	100,0%
			% within Inpatient care in previous year	46,7%	71,6%	49,4%
	Total		Count	1412	169	1581
			% within Gender	89,3%	10,7%	100,0%
			% within Inpatient care in previous year	100,0%	100,0%	100,0%
35-64	Gender	male	Count	1028	170	1198
			% within Gender	85,8%	14,2%	100,0%
			% within Inpatient care in previous year	48,6%	44,9%	48,0%
		female	Count	1089	209	1298
			% within Gender	83,9%	16,1%	100,0%
			% within Inpatient care in previous year	51,4%	55,1%	52,0%
	Total		Count	2117	379	2496
			% within Gender	84,8%	15,2%	100,0%
			% within Inpatient care in previous year	100,0%	100,0%	100,0%
65+	Gender	male	Count	273	78	351
			% within Gender	77,8%	22,2%	100,0%
			% within Inpatient care in previous year	38,3%	34,1%	37,3%
		female	Count	439	151	590
			% within Gender	74,4%	25,6%	100,0%
			% within Inpatient care in previous year	61,7%	65,9%	62,7%
	Total		Count	712	229	941
			% within Gender	75,7%	24,3%	100,0%
			% within Inpatient care in previous year	100,0%	100,0%	100,0%

Table A60. Continued

Chi-Square Tests

Agegroup		Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
18-34	Pearson Chi-Square	37,304[b]	1	,000		
	Continuity Correction[a]	36,316	1	,000		
	Likelihood Ratio	38,365	1	,000		
	Fisher's Exact Test				,000	,000
	Linear-by-Linear Association	37,280	1	,000		
	N of Valid Cases	1581				
35-64	Pearson Chi-Square	1,767[c]	1	,184		
	Continuity Correction[a]	1,622	1	,203		
	Likelihood Ratio	1,771	1	,183		
	Fisher's Exact Test				,199	,101
	Linear-by-Linear Association	1,767	1	,184		
	N of Valid Cases	2496				
65+	Pearson Chi-Square	1,358[d]	1	,244		
	Continuity Correction[a]	1,181	1	,277		
	Likelihood Ratio	1,370	1	,242		
	Fisher's Exact Test				,272	,138
	Linear-by-Linear Association	1,357	1	,244		
	N of Valid Cases	941				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 83,48.

c. 0 cells (,0%) have expected count less than 5. The minimum expected count is 181,91.

d. 0 cells (,0%) have expected count less than 5. The minimum expected count is 85,42.

Risk Estimate

Agegroup		Value	95% Confidence Interval	
			Lower	Upper
18-34	Odds Ratio for Gender (male / female)	2,872	2,023	4,077
	For cohort Inpatient care in previous year = No	1,112	1,074	1,152
	For cohort Inpatient care in previous year = Yes	,387	,281	,533
	N of Valid Cases	1581		
35-64	Odds Ratio for Gender (male / female)	1,161	,932	1,446
	For cohort Inpatient care in previous year = No	1,023	,989	1,057
	For cohort Inpatient care in previous year = Yes	,881	,731	1,062
	N of Valid Cases	2496		
65+	Odds Ratio for Gender (male / female)	1,204	,881	1,645
	For cohort Inpatient care in previous year = No	1,045	,971	1,125
	For cohort Inpatient care in previous year = Yes	,868	,684	1,103
	N of Valid Cases	941		

Table A61. Gender/dentist/age group cross-tabulation

Gender * Contact with dentist in previous year * Agegroup Crosstabulation

Agegroup				Contact with dentist in previous year		Total
				No	Yes	
18-34	Gender	male	Count	456	346	802
			% within Gender	56,9%	43,1%	100,0%
			% within Contact with dentist in previous year	59,1%	42,6%	50,6%
		female	Count	316	466	782
			% within Gender	40,4%	59,6%	100,0%
			% within Contact with dentist in previous year	40,9%	57,4%	49,4%
	Total		Count	772	812	1584
			% within Gender	48,7%	51,3%	100,0%
			% within Contact with dentist in previous year	100,0%	100,0%	100,0%
35-64	Gender	male	Count	816	383	1199
			% within Gender	68,1%	31,9%	100,0%
			% within Contact with dentist in previous year	51,7%	41,5%	48,0%
		female	Count	761	539	1300
			% within Gender	58,5%	41,5%	100,0%
			% within Contact with dentist in previous year	48,3%	58,5%	52,0%
	Total		Count	1577	922	2499
			% within Gender	63,1%	36,9%	100,0%
			% within Contact with dentist in previous year	100,0%	100,0%	100,0%
65+	Gender	male	Count	286	66	352
			% within Gender	81,3%	18,8%	100,0%
			% within Contact with dentist in previous year	37,3%	37,3%	37,3%
		female	Count	480	111	591
			% within Gender	81,2%	18,8%	100,0%
			% within Contact with dentist in previous year	62,7%	62,7%	62,7%
	Total		Count	766	177	943
			% within Gender	81,2%	18,8%	100,0%
			% within Contact with dentist in previous year	100,0%	100,0%	100,0%

Table A61. Continued

Chi-Square Tests

Agegroup		Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
18-34	Pearson Chi-Square	42,877[b]	1	,000		
	Continuity Correction[a]	42,221	1	,000		
	Likelihood Ratio	43,076	1	,000		
	Fisher's Exact Test				,000	,000
	Linear-by-Linear Association	42,850	1	,000		
	N of Valid Cases	1584				
35-64	Pearson Chi-Square	24,271[c]	1	,000		
	Continuity Correction[a]	23,864	1	,000		
	Likelihood Ratio	24,358	1	,000		
	Fisher's Exact Test				,000	,000
	Linear-by-Linear Association	24,261	1	,000		
	N of Valid Cases	2499				
65+	Pearson Chi-Square	,000[d]	1	,990		
	Continuity Correction[a]	,000	1	1,000		
	Likelihood Ratio	,000	1	,990		
	Fisher's Exact Test				1,000	,531
	Linear-by-Linear Association	,000	1	,990		
	N of Valid Cases	943				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 381,13.

c. 0 cells (,0%) have expected count less than 5. The minimum expected count is 442,37.

d. 0 cells (,0%) have expected count less than 5. The minimum expected count is 66,07.

Risk Estimate

Agegroup		Value	95% Confidence Interval	
			Lower	Upper
18-34	Odds Ratio for Gender (male / female)	1,944	1,592	2,373
	For cohort Contact with dentist in previous year = No	1,407	1,268	1,562
	For cohort Contact with dentist in previous year = Yes	,724	,656	,799
	N of Valid Cases	1584		
35-64	Odds Ratio for Gender (male / female)	1,509	1,281	1,778
	For cohort Contact with dentist in previous year = No	1,163	1,095	1,234
	For cohort Contact with dentist in previous year = Yes	,770	,694	,856
	N of Valid Cases	2499		
65+	Odds Ratio for Gender (male / female)	1,002	,715	1,405
	For cohort Contact with dentist in previous year = No	1,000	,939	1,066
	For cohort Contact with dentist in previous year = Yes	,998	,759	1,314
	N of Valid Cases	943		

Table A62. Marital status/GP cross-tabulation

Marital status * Contact with GP in previous year Crosstabulation

			Contact with GP in previous year		
			No	Yes	Total
Marital status	single	Count	339	568	907
		% within Marital status	37,4%	62,6%	100,0%
		% within Contact with GP in previous year	23,6%	15,9%	18,1%
	married or living with partner	Count	879	2186	3065
		% within Marital status	28,7%	71,3%	100,0%
		% within Contact with GP in previous year	61,3%	61,2%	61,3%
	separated, divorced, or widowed	Count	216	815	1031
		% within Marital status	21,0%	79,0%	100,0%
		% within Contact with GP in previous year	15,1%	22,8%	20,6%
Total		Count	1434	3569	5003
		% within Marital status	28,7%	71,3%	100,0%
		% within Contact with GP in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	63,667[a]	2	,000
Likelihood Ratio	63,900	2	,000
Linear-by-Linear Association	63,519	1	,000
N of Valid Cases	5003		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 259,97.

Table A63. Marital status/specialist cross-tabulation

Marital status * Contact with specialist in previous year Crosstabulation

			Contact with specialist in previous year		
			No	Yes	Total
Marital status	single	Count	483	426	909
		% within Marital status	53,1%	46,9%	100,0%
		% within Contact with specialist in previous year	21,6%	15,3%	18,1%
	married or living with partner	Count	1339	1734	3073
		% within Marital status	43,6%	56,4%	100,0%
		% within Contact with specialist in previous year	59,8%	62,4%	61,3%
	separated, divorced, or widowed	Count	417	617	1034
		% within Marital status	40,3%	59,7%	100,0%
		% within Contact with specialist in previous year	18,6%	22,2%	20,6%
Total		Count	2239	2777	5016
		% within Marital status	44,6%	55,4%	100,0%
		% within Contact with specialist in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	35,739[a]	2	,000
Likelihood Ratio	35,605	2	,000
Linear-by-Linear Association	30,938	1	,000
N of Valid Cases	5016		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 405,75.

Table A64. Marital status/inpatient cross-tabulation

Marital status * Inpatient care in previous year Crosstabulation

			Inpatient care in previous year		
			No	Yes	Total
Marital status	single	Count	832	80	912
		% within Marital status	91,2%	8,8%	100,0%
		% within Inpatient care in previous year	19,6%	10,3%	18,2%
	married or living with partner	Count	2589	481	3070
		% within Marital status	84,3%	15,7%	100,0%
		% within Inpatient care in previous year	61,1%	61,8%	61,2%
	separated, divorced, or widowed	Count	816	217	1033
		% within Marital status	79,0%	21,0%	100,0%
		% within Inpatient care in previous year	19,3%	27,9%	20,6%
Total		Count	4237	778	5015
		% within Marital status	84,5%	15,5%	100,0%
		% within Inpatient care in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	55,463[a]	2	,000
Likelihood Ratio	58,419	2	,000
Linear-by-Linear Association	54,903	1	,000
N of Valid Cases	5015		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 141,48.

Table A65. Marital status/GP cross-tabulation

Marital status * Contact with dentist in previous year Crosstabulation

			Contact with dentist in previous year		
			No	Yes	Total
Marital status	single	Count	474	438	912
		% within Marital status	52,0%	48,0%	100,0%
		% within Contact with dentist in previous year	15,2%	22,9%	18,2%
	married or living with partner	Count	1905	1170	3075
		% within Marital status	62,0%	38,0%	100,0%
		% within Contact with dentist in previous year	61,2%	61,3%	61,2%
	separated, divorced, or widowed	Count	735	302	1037
		% within Marital status	70,9%	29,1%	100,0%
		% within Contact with dentist in previous year	23,6%	15,8%	20,6%
Total		Count	3114	1910	5024
		% within Marital status	62,0%	38,0%	100,0%
		% within Contact with dentist in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	73,592[a]	2	,000
Likelihood Ratio	73,909	2	,000
Linear-by-Linear Association	73,438	1	,000
N of Valid Cases	5024		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 346,72.

Table A66. Township size/GP cross-tabulation

Population categories * Contact with GP in previous year Crosstabulation

			Contact with GP in previous year		
			No	Yes	Total
Population categories	<1000	Count	105	272	377
		% within Population categories	27,9%	72,1%	100,0%
		% within Contact with GP in previous year	7,3%	7,6%	7,5%
	<3000	Count	244	582	826
		% within Population categories	29,5%	70,5%	100,0%
		% within Contact with GP in previous year	17,0%	16,3%	16,5%
	<5000	Count	115	269	384
		% within Population categories	29,9%	70,1%	100,0%
		% within Contact with GP in previous year	8,0%	7,5%	7,7%
	<10000	Count	142	307	449
		% within Population categories	31,6%	68,4%	100,0%
		% within Contact with GP in previous year	9,9%	8,6%	9,0%
	<50000	Count	330	808	1138
		% within Population categories	29,0%	71,0%	100,0%
		% within Contact with GP in previous year	23,0%	22,6%	22,7%
	50001-től	Count	499	1333	1832
		% within Population categories	27,2%	72,8%	100,0%
		% within Contact with GP in previous year	34,8%	37,3%	36,6%
Total		Count	1435	3571	5006
		% within Population categories	28,7%	71,3%	100,0%
		% within Contact with GP in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	4,551[a]	5	,473
Likelihood Ratio	4,529	5	,476
Linear-by-Linear Association	1,122	1	,290
N of Valid Cases	5006		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 108,07.

Table A67. Township size/specialist cross-tabulation

Population categories * Contact with specialist in previous year Crosstabulation

			Contact with specialist in previous year		
			No	Yes	Total
Population categories	<1000	Count	192	187	379
		% within Population categories	50,7%	49,3%	100,0%
		% within Contact with specialist in previous year	8,6%	6,7%	7,5%
	<3000	Count	399	429	828
		% within Population categories	48,2%	51,8%	100,0%
		% within Contact with specialist in previous year	17,8%	15,4%	16,5%
	<5000	Count	192	193	385
		% within Population categories	49,9%	50,1%	100,0%
		% within Contact with specialist in previous year	8,6%	6,9%	7,7%
	<10000	Count	221	227	448
		% within Population categories	49,3%	50,7%	100,0%
		% within Contact with specialist in previous year	9,9%	8,2%	8,9%
	<50000	Count	503	638	1141
		% within Population categories	44,1%	55,9%	100,0%
		% within Contact with specialist in previous year	22,4%	23,0%	22,7%
	50001-től	Count	735	1105	1840
		% within Population categories	39,9%	60,1%	100,0%
		% within Contact with specialist in previous year	32,8%	39,8%	36,6%
Total		Count	2242	2779	5021
		% within Population categories	44,7%	55,3%	100,0%
		% within Contact with specialist in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	34,574[a]	5	,000
Likelihood Ratio	34,616	5	,000
Linear-by-Linear Association	28,639	1	,000
N of Valid Cases	5021		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 169,23.

Table A68. Township size/inpatient cross-tabulation

Population categories * Inpatient care in previous year Crosstabulation

			Inpatient care in previous year		
			No	Yes	Total
Population categories	<1000	Count	313	66	379
		% within Population categories	82,6%	17,4%	100,0%
		% within Inpatient care in previous year	7,4%	8,5%	7,6%
	<3000	Count	689	141	830
		% within Population categories	83,0%	17,0%	100,0%
		% within Inpatient care in previous year	16,2%	18,1%	16,5%
	<5000	Count	328	56	384
		% within Population categories	85,4%	14,6%	100,0%
		% within Inpatient care in previous year	7,7%	7,2%	7,7%
	<10000	Count	374	73	447
		% within Population categories	83,7%	16,3%	100,0%
		% within Inpatient care in previous year	8,8%	9,4%	8,9%
	<50000	Count	959	180	1139
		% within Population categories	84,2%	15,8%	100,0%
		% within Inpatient care in previous year	22,6%	23,2%	22,7%
	50001-től	Count	1578	261	1839
		% within Population categories	85,8%	14,2%	100,0%
		% within Inpatient care in previous year	37,2%	33,6%	36,6%
Total		Count	4241	777	5018
		% within Population categories	84,5%	15,5%	100,0%
		% within Inpatient care in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	5,429[a]	5	,366
Likelihood Ratio	5,414	5	,367
Linear-by-Linear Association	3,864	1	,049
N of Valid Cases	5018		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 58,69.

Table A69. Township size/dentist cross-tabulation

Population categories * Contact with dentist in previous year Crosstabulation

			Contact with dentist in previous year		
			No	Yes	Total
Population categories	<1000	Count	280	100	380
		% within Population categories	73,7%	26,3%	100,0%
		% within Contact with dentist in previous year	9,0%	5,2%	7,6%
	<3000	Count	536	295	831
		% within Population categories	64,5%	35,5%	100,0%
		% within Contact with dentist in previous year	17,2%	15,4%	16,5%
	<5000	Count	257	128	385
		% within Population categories	66,8%	33,2%	100,0%
		% within Contact with dentist in previous year	8,2%	6,7%	7,7%
	<10000	Count	288	161	449
		% within Population categories	64,1%	35,9%	100,0%
		% within Contact with dentist in previous year	9,2%	8,4%	8,9%
	<50000	Count	715	427	1142
		% within Population categories	62,6%	37,4%	100,0%
		% within Contact with dentist in previous year	22,9%	22,3%	22,7%
	50001-től	Count	1041	800	1841
		% within Population categories	56,5%	43,5%	100,0%
		% within Contact with dentist in previous year	33,4%	41,9%	36,6%
Total		Count	3117	1911	5028
		% within Population categories	62,0%	38,0%	100,0%
		% within Contact with dentist in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	52,217[a]	5	,000
Likelihood Ratio	53,126	5	,000
Linear-by-Linear Association	42,043	1	,000
N of Valid Cases	5028		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 144,43.

Table A70. Household size/GP cross-tabulation

No. of people in house hold (2 categories) * Contact with GP in previous year Crosstabulation

			Contact with GP in previous year		
			No	Yes	Total
No. of people in house hold (2 categories)	1-2	Count	455	1597	2052
		% within No. of people in house hold (2 categories)	22,2%	77,8%	100,0%
		% within Contact with GP in previous year	31,7%	44,7%	41,0%
	3+	Count	981	1975	2956
		% within No. of people in house hold (2 categories)	33,2%	66,8%	100,0%
		% within Contact with GP in previous year	68,3%	55,3%	59,0%
Total		Count	1436	3572	5008
		% within No. of people in house hold (2 categories)	28,7%	71,3%	100,0%
		% within Contact with GP in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	71,831[b]	1	,000		
Continuity Correction[a]	71,293	1	,000		
Likelihood Ratio	73,225	1	,000		
Fisher's Exact Test				,000	,000
Linear-by-Linear Association	71,817	1	,000		
N of Valid Cases	5008				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 588,39.

Table A71. Household size/specialist cross-tabulation

No. of people in house hold (2 categories) * Contact with specialist in previous year Crosstabulation

			Contact with specialist in previous year		
			No	Yes	Total
No. of people in house hold (2 categories)	1-2	Count	839	1217	2056
		% within No. of people in house hold (2 categories)	40,8%	59,2%	100,0%
		% within Contact with specialist in previous year	37,4%	43,8%	40,9%
	3+	Count	1403	1563	2966
		% within No. of people in house hold (2 categories)	47,3%	52,7%	100,0%
		% within Contact with specialist in previous year	62,6%	56,2%	59,1%
Total		Count	2242	2780	5022
		% within No. of people in house hold (2 categories)	44,6%	55,4%	100,0%
		% within Contact with specialist in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	20,730[b]	1	,000		
Continuity Correction[a]	20,468	1	,000		
Likelihood Ratio	20,782	1	,000		
Fisher's Exact Test				,000	,000
Linear-by-Linear Association	20,726	1	,000		
N of Valid Cases	5022				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 917,87.

Table A72. Household size/inpatient cross-tabulation

No. of people in house hold (2 categories) * Inpatient care in previous year Crosstabulation

			Inpatient care in previous year		
			No	Yes	Total
No. of people in house hold (2 categories)	1-2	Count	1675	383	2058
		% within No. of people in house hold (2 categories)	81,4%	18,6%	100,0%
		% within Inpatient care in previous year	39,5%	49,3%	41,0%
	3+	Count	2566	394	2960
		% within No. of people in house hold (2 categories)	86,7%	13,3%	100,0%
		% within Inpatient care in previous year	60,5%	50,7%	59,0%
Total		Count	4241	777	5018
		% within No. of people in house hold (2 categories)	84,5%	15,5%	100,0%
		% within Inpatient care in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	26,052[b]	1	,000		
Continuity Correction[a]	25,649	1	,000		
Likelihood Ratio	25,728	1	,000		
Fisher's Exact Test				,000	,000
Linear-by-Linear Association	26,047	1	,000		
N of Valid Cases	5018				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 318,67.

Table A73. Household size/dentist cross-tabulation

of people in house hold (2 categories) * Contact with dentist in previous year Crosstabulati

			Contact with dentist in previous year		
			No	Yes	Total
No. of people in house hold (2 categories)	1-2	Count	1364	697	2061
		% within No. of people in house hold (2 categories)	66,2%	33,8%	100,0%
		% within Contact with dentist in previous year	43,8%	36,5%	41,0%
	3+	Count	1752	1214	2966
		% within No. of people in house hold (2 categories)	59,1%	40,9%	100,0%
		% within Contact with dentist in previous year	56,2%	63,5%	59,0%
Total		Count	3116	1911	5027
		% within No. of people in house hold (2 categories)	62,0%	38,0%	100,0%
		% within Contact with dentist in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	26,103[b]	1	,000		
Continuity Correction[a]	25,802	1	,000		
Likelihood Ratio	26,249	1	,000		
Fisher's Exact Test				,000	,000
Linear-by-Linear Association	26,097	1	,000		
N of Valid Cases	5027				

a. Computed only for a 2x2 table

b. 0 cells (,0%) have expected count less than 5. The minimum expected count is 783,48.

Table A74. Education/GP cross-tabulation

Education * Contact with GP in previous year Crosstabulation

			Contact with GP in previous year		
			No	Yes	Total
Education	primary school	Count	333	1148	1481
		% within Education	22,5%	77,5%	100,0%
		% within Contact with GP in previous year	23,3%	32,2%	29,6%
	secondary school w/out graduation test	Count	363	802	1165
		% within Education	31,2%	68,8%	100,0%
		% within Contact with GP in previous year	25,3%	22,5%	23,3%
	secondary school with graduation test	Count	513	1082	1595
		% within Education	32,2%	67,8%	100,0%
		% within Contact with GP in previous year	35,8%	30,4%	31,9%
	3-year university degree (BA, BSc)	Count	132	345	477
		% within Education	27,7%	72,3%	100,0%
		% within Contact with GP in previous year	9,2%	9,7%	9,5%
	5-year university degree (MA, MSc)	Count	91	187	278
		% within Education	32,7%	67,3%	100,0%
		% within Contact with GP in previous year	6,4%	5,2%	5,6%
Total		Count	1432	3564	4996
		% within Education	28,7%	71,3%	100,0%
		% within Contact with GP in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	43,233[a]	4	,000
Likelihood Ratio	44,276	4	,000
Linear-by-Linear Association	21,351	1	,000
N of Valid Cases	4996		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 79,68.

Table A75. Education/specialist cross-tabulation

Education * Contact with specialist in previous year Crosstabulation

			Contact with specialist in previous year		
			No	Yes	Total
Education	primary school	Count	699	790	1489
		% within Education	46,9%	53,1%	100,0%
		% within Contact with specialist in previous year	31,2%	28,5%	29,7%
	secondary school w/out graduation test	Count	567	602	1169
		% within Education	48,5%	51,5%	100,0%
		% within Contact with specialist in previous year	25,3%	21,7%	23,3%
	secondary school with graduation test	Count	696	899	1595
		% within Education	43,6%	56,4%	100,0%
		% within Contact with specialist in previous year	31,1%	32,4%	31,8%
	3-year university degree (BA, BSc)	Count	174	305	479
		% within Education	36,3%	63,7%	100,0%
		% within Contact with specialist in previous year	7,8%	11,0%	9,6%
	5-year university degree (MA, MSc)	Count	101	178	279
		% within Education	36,2%	63,8%	100,0%
		% within Contact with specialist in previous year	4,5%	6,4%	5,6%
Total		Count	2237	2774	5011
		% within Education	44,6%	55,4%	100,0%
		% within Contact with specialist in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	32,348[a]	4	,000
Likelihood Ratio	32,678	4	,000
Linear-by-Linear Association	23,987	1	,000
N of Valid Cases	5011		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 124,55.

Table A76. Education/inpatient cross-tabulation

Education * Inpatient care in previous year Crosstabulation

			Inpatient care in previous year		
			No	Yes	Total
Education	primary school	Count	1173	312	1485
		% within Education	79,0%	21,0%	100,0%
		% within Inpatient care in previous year	27,7%	40,2%	29,7%
	secondary school w/out graduation test	Count	984	184	1168
		% within Education	84,2%	15,8%	100,0%
		% within Inpatient care in previous year	23,3%	23,7%	23,3%
	secondary school with graduation test	Count	1406	192	1598
		% within Education	88,0%	12,0%	100,0%
		% within Inpatient care in previous year	33,2%	24,7%	31,9%
	3-year university degree (BA, BSc)	Count	412	66	478
		% within Education	86,2%	13,8%	100,0%
		% within Inpatient care in previous year	9,7%	8,5%	9,5%
	5-year university degree (MA, MSc)	Count	256	22	278
		% within Education	92,1%	7,9%	100,0%
		% within Inpatient care in previous year	6,1%	2,8%	5,6%
Total		Count	4231	776	5007
		% within Education	84,5%	15,5%	100,0%
		% within Inpatient care in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	62,566[a]	4	,000
Likelihood Ratio	63,027	4	,000
Linear-by-Linear Association	53,038	1	,000
N of Valid Cases	5007		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 43,09.

Table A77. Education/dentist cross-tabulation

Education * Contact with dentist in previous year Crosstabulation

			Contact with dentist in previous year		
			No	Yes	Total
Education	primary school	Count	1142	349	1491
		% within Education	76,6%	23,4%	100,0%
		% within Contact with dentist in previous year	36,7%	18,3%	29,7%
	secondary school w/out graduation test	Count	750	419	1169
		% within Education	64,2%	35,8%	100,0%
		% within Contact with dentist in previous year	24,1%	22,0%	23,3%
	secondary school with graduation test	Count	887	713	1600
		% within Education	55,4%	44,6%	100,0%
		% within Contact with dentist in previous year	28,5%	37,4%	31,9%
	3-year university degree (BA, BSc)	Count	220	258	478
		% within Education	46,0%	54,0%	100,0%
		% within Contact with dentist in previous year	7,1%	13,5%	9,5%
	5-year university degree (MA, MSc)	Count	110	168	278
		% within Education	39,6%	60,4%	100,0%
		% within Contact with dentist in previous year	3,5%	8,8%	5,5%
Total		Count	3109	1907	5016
		% within Education	62,0%	38,0%	100,0%
		% within Contact with dentist in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	277,421[a]	4	,000
Likelihood Ratio	282,642	4	,000
Linear-by-Linear Association	274,029	1	,000
N of Valid Cases	5016		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 105,69.

Table A78. Occupation/GP cross-tabulation

Occupation * Contact with GP in previous year Crosstabulation

			Contact with GP in previous year		
			No	Yes	Total
Occupation	Executive status	Count	125	187	312
		% within Occupation	40,1%	59,9%	100,0%
		% within Contact with GP in previous year	8,9%	5,3%	6,4%
	Non-executive intellectual	Count	205	449	654
		% within Occupation	31,3%	68,7%	100,0%
		% within Contact with GP in previous year	14,7%	12,8%	13,4%
	Independent tradesman, service provider, intellectual	Count	145	232	377
		% within Occupation	38,5%	61,5%	100,0%
		% within Contact with GP in previous year	10,4%	6,6%	7,7%
	Skilled worker	Count	257	388	645
		% within Occupation	39,8%	60,2%	100,0%
		% within Contact with GP in previous year	18,4%	11,1%	13,2%
	Non-skilled or agricultural worker	Count	179	351	530
		% within Occupation	33,8%	66,2%	100,0%
		% within Contact with GP in previous year	12,8%	10,0%	10,8%
	Not working	Count	486	1892	2378
		% within Occupation	20,4%	79,6%	100,0%
		% within Contact with GP in previous year	34,8%	54,1%	48,6%
Total		Count	1397	3499	4896
		% within Occupation	28,5%	71,5%	100,0%
		% within Contact with GP in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	165,147[a]	5	,000
Likelihood Ratio	165,263	5	,000
Linear-by-Linear Association	99,122	1	,000
N of Valid Cases	4896		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 89,02.

Table A79. Occupation/specialist cross-tabulation

Occupation * Contact with specialist in previous year Crosstabulation

			Contact with specialist in previous year		
			No	Yes	Total
Occupation	Executive status	Count	160	154	314
		% within Occupation	51,0%	49,0%	100,0%
		% within Contact with specialist in previous yea	7,3%	5,7%	6,4%
	Non-executive intellectua	Count	229	427	656
		% within Occupation	34,9%	65,1%	100,0%
		% within Contact with specialist in previous yea	10,4%	15,7%	13,4%
	Independent tradesman, service provider, intellectual	Count	196	182	378
		% within Occupation	51,9%	48,1%	100,0%
		% within Contact with specialist in previous yea	8,9%	6,7%	7,7%
	Skilled worker	Count	354	292	646
		% within Occupation	54,8%	45,2%	100,0%
		% within Contact with specialist in previous yea	16,1%	10,8%	13,2%
	Non-skilled or agricultural worker	Count	282	250	532
		% within Occupation	53,0%	47,0%	100,0%
		% within Contact with specialist in previous yea	12,8%	9,2%	10,8%
	Not working	Count	975	1411	2386
		% within Occupation	40,9%	59,1%	100,0%
		% within Contact with specialist in previous yea	44,4%	52,0%	48,6%
Total		Count	2196	2716	4912
		% within Occupation	44,7%	55,3%	100,0%
		% within Contact with specialist in previous yea	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	93,946[a]	5	,000
Likelihood Ratio	94,192	5	,000
Linear-by-Linear Association	2,610	1	,106
N of Valid Cases	4912		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 140,38.

Table A80. Occupation/inpatient cross-tabulation

Occupation * Inpatient care in previous year Crosstabulation

			Inpatient care in previous year		
			No	Yes	Total
Occupation	Executive status	Count	293	21	314
		% within Occupation	93,3%	6,7%	100,0%
		% within Inpatient care in previous year	7,1%	2,8%	6,4%
	Non-executive intellectual	Count	596	61	657
		% within Occupation	90,7%	9,3%	100,0%
		% within Inpatient care in previous year	14,4%	8,0%	13,4%
	Independent tradesman, service provider, intellectual	Count	350	26	376
		% within Occupation	93,1%	6,9%	100,0%
		% within Inpatient care in previous year	8,4%	3,4%	7,7%
	Skilled worker	Count	588	59	647
		% within Occupation	90,9%	9,1%	100,0%
		% within Inpatient care in previous year	14,2%	7,7%	13,2%
	Non-skilled or agricultural worker	Count	481	51	532
		% within Occupation	90,4%	9,6%	100,0%
		% within Inpatient care in previous year	11,6%	6,7%	10,8%
	Not working	Count	1838	545	2383
		% within Occupation	77,1%	22,9%	100,0%
		% within Inpatient care in previous year	44,3%	71,4%	48,5%
Total		Count	4146	763	4909
		% within Occupation	84,5%	15,5%	100,0%
		% within Inpatient care in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	191,866[a]	5	,000
Likelihood Ratio	198,266	5	,000
Linear-by-Linear Association	140,173	1	,000
N of Valid Cases	4909		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 48,80.

Table A81. Occupation/dentist cross-tabulation

Occupation * Contact with dentist in previous year Crosstabulation

			Contact with dentist in previous year		
			No	Yes	Total
Occupation	Executive status	Count	161	153	314
		% within Occupation	51,3%	48,7%	100,0%
		% within Contact with dentist in previous year	5,3%	8,2%	6,4%
	Non-executive intellectua	Count	306	351	657
		% within Occupation	46,6%	53,4%	100,0%
		% within Contact with dentist in previous year	10,0%	18,9%	13,4%
	Independent tradesman, service provider, intellectual	Count	199	178	377
		% within Occupation	52,8%	47,2%	100,0%
		% within Contact with dentist in previous year	6,5%	9,6%	7,7%
	Skilled worker	Count	397	250	647
		% within Occupation	61,4%	38,6%	100,0%
		% within Contact with dentist in previous year	13,0%	13,4%	13,2%
	Non-skilled or agricultural worker	Count	346	187	533
		% within Occupation	64,9%	35,1%	100,0%
		% within Contact with dentist in previous year	11,3%	10,1%	10,8%
	Not working	Count	1649	741	2390
		% within Occupation	69,0%	31,0%	100,0%
		% within Contact with dentist in previous year	53,9%	39,8%	48,6%
Total		Count	3058	1860	4918
		% within Occupation	62,2%	37,8%	100,0%
		% within Contact with dentist in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	147,155[a]	5	,000
Likelihood Ratio	145,311	5	,000
Linear-by-Linear Association	137,355	1	,000
N of Valid Cases	4918		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 118,76.

Table A82. Income/GP cross-tabulation

Income quintiles * Contact with GP in previous year Crosstabulation

			Contact with GP in previous year		
			No	Yes	Total
Income quintiles	<=65,000	Count	170	665	835
		% within Income quintiles	20,4%	79,6%	100,0%
		% within Contact with GP in previous year	15,2%	22,8%	20,7%
	65,000-94,000	Count	182	599	781
		% within Income quintiles	23,3%	76,7%	100,0%
		% within Contact with GP in previous year	16,2%	20,5%	19,3%
	94,000-120,000	Count	232	621	853
		% within Income quintiles	27,2%	72,8%	100,0%
		% within Contact with GP in previous year	20,7%	21,3%	21,1%
	120,000-170,000	Count	249	528	777
		% within Income quintiles	32,0%	68,0%	100,0%
		% within Contact with GP in previous year	22,2%	18,1%	19,2%
	>170,000	Count	288	506	794
		% within Income quintiles	36,3%	63,7%	100,0%
		% within Contact with GP in previous year	25,7%	17,3%	19,7%
Total		Count	1121	2919	4040
		% within Income quintiles	27,7%	72,3%	100,0%
		% within Contact with GP in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	66,499[a]	4	,000
Likelihood Ratio	66,539	4	,000
Linear-by-Linear Association	66,002	1	,000
N of Valid Cases	4040		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 215,60.

Table A83. Income/specialist cross-tabulation

Income quintiles * Contact with specialist in previous year Crosstabulation

			Contact with specialist in previous year		
			No	Yes	Total
Income quintiles	<=65,000	Count	365	469	834
		% within Income quintiles	43,8%	56,2%	100,0%
		% within Contact with specialist in previous year	20,2%	20,9%	20,6%
	65,000-94,000	Count	349	437	786
		% within Income quintiles	44,4%	55,6%	100,0%
		% within Contact with specialist in previous year	19,3%	19,5%	19,4%
	94,000-120,000	Count	388	470	858
		% within Income quintiles	45,2%	54,8%	100,0%
		% within Contact with specialist in previous year	21,4%	21,0%	21,2%
	120,000-170,000	Count	336	445	781
		% within Income quintiles	43,0%	57,0%	100,0%
		% within Contact with specialist in previous year	18,6%	19,9%	19,3%
	>170,000	Count	373	419	792
		% within Income quintiles	47,1%	52,9%	100,0%
		% within Contact with specialist in previous year	20,6%	18,7%	19,6%
Total		Count	1811	2240	4051
		% within Income quintiles	44,7%	55,3%	100,0%
		% within Contact with specialist in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	3,147[a]	4	,534
Likelihood Ratio	3,144	4	,534
Linear-by-Linear Association	,918	1	,338
N of Valid Cases	4051		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 349,15.

Table A84. Income/inpatient cross-tabulation

Income quintiles * Inpatient care in previous year Crosstabulation

			Inpatient care in previous year		
			No	Yes	Total
Income quintiles	<=65,000	Count	655	180	835
		% within Income quintiles	78,4%	21,6%	100,0%
		% within Inpatient care in previous year	19,2%	28,3%	20,6%
	65,000-94,000	Count	628	155	783
		% within Income quintiles	80,2%	19,8%	100,0%
		% within Inpatient care in previous year	18,4%	24,4%	19,3%
	94,000-120,000	Count	728	129	857
		% within Income quintiles	84,9%	15,1%	100,0%
		% within Inpatient care in previous year	21,3%	20,3%	21,2%
	120,000-170,000	Count	685	96	781
		% within Income quintiles	87,7%	12,3%	100,0%
		% within Inpatient care in previous year	20,1%	15,1%	19,3%
	>170,000	Count	715	76	791
		% within Income quintiles	90,4%	9,6%	100,0%
		% within Inpatient care in previous year	21,0%	11,9%	19,5%
Total		Count	3411	636	4047
		% within Income quintiles	84,3%	15,7%	100,0%
		% within Inpatient care in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	60,822[a]	4	,000
Likelihood Ratio	61,825	4	,000
Linear-by-Linear Association	59,829	1	,000
N of Valid Cases	4047		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 122,74.

Table A85. Income/dentist cross-tabulation

Income quintiles * Contact with dentist in previous year Crosstabulation

			Contact with dentist in previous year		
			No	Yes	Total
Income quintiles	<=65,000	Count	613	225	838
		% within Income quintiles	73,2%	26,8%	100,0%
		% within Contact with dentist in previous year	23,7%	15,2%	20,7%
	65,000-94,000	Count	527	260	787
		% within Income quintiles	67,0%	33,0%	100,0%
		% within Contact with dentist in previous year	20,4%	17,6%	19,4%
	94,000-120,000	Count	561	298	859
		% within Income quintiles	65,3%	34,7%	100,0%
		% within Contact with dentist in previous year	21,7%	20,2%	21,2%
	120,000-170,000	Count	478	304	782
		% within Income quintiles	61,1%	38,9%	100,0%
		% within Contact with dentist in previous year	18,5%	20,6%	19,3%
	>170,000	Count	403	389	792
		% within Income quintiles	50,9%	49,1%	100,0%
		% within Contact with dentist in previous year	15,6%	26,4%	19,5%
Total		Count	2582	1476	4058
		% within Income quintiles	63,6%	36,4%	100,0%
		% within Contact with dentist in previous year	100,0%	100,0%	100,0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	95,362[a]	4	,000
Likelihood Ratio	94,930	4	,000
Linear-by-Linear Association	88,612	1	,000
N of Valid Cases	4058		

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 284,43.

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