Stress and wellbeing in Australia in 2012: A state-of-the-nation survey

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1 Summary of key findings

The key findings of the *Stress and Wellbeing Survey 2012* were largely consistent with those reported in the inaugural *Stress and Wellbeing Survey 2011* with a number of key differences and new insights.

Levels of stress and distress

- The stress levels of Australians in 2012 were comparable to those of 2011 and consistent with those reported in other Western countries such as the United Kingdom and the United States.
- Younger adults continued to report much higher levels of stress and distress and lower levels of wellbeing compared with older Australians.
- Australians reported significantly higher levels of distress this year compared with 2011, with 22% of Australians reporting moderate to severe levels of distress.
- Australians reported significantly lower levels of wellbeing this year compared with 2011.
- Students and unemployed Australians reported significantly lower levels of wellbeing and higher levels of stress and distress than most other Australians.

Experience of depression and anxiety symptoms

- One in ten Australians reported depression and anxiety symptoms in the severe to extremely severe range which is comparable to findings from 2011.
- Younger adults reported significantly higher levels of anxiety and depression symptoms compared with older Australians, with this finding similar to 2011.
- Unemployed Australians reported significantly higher levels of depression and anxiety symptoms than working or retired Australians.

Causes of stress

- Financial issues remain the leading cause of stress amongst Australians, with close to 50% of Australians identifying personal finances as a cause of stress.
- One in five Australians reported mental health issues as a source of stress.
- Younger adults (below 35 years of age) reported significantly more concern about mental health issues than other Australians.
- 40% of Australians reported that trying to maintain a healthy lifestyle was a source of stress.

Strategies for managing stress

- Watching TV or movies, spending time with friends or family, focusing on the positives, listening to music and reading were the most commonly used strategies for managing stress, which were mostly consistent with 2011 findings[1].
- A large number of Australians reported using psychological techniques to manage stress such as consciously avoiding people or situations that are stressful, adjusting expectations and focusing on the positives, with these strategies also being rated as quite effective in managing their stress.
- Almost half of Australians reported drinking to help manage stress, although the quantity of alcohol consumed was not reported.
- Almost one in five Australians reported smoking as a strategy to help manage stress.

[1] 'Focusing on the positives' was added as a source of stress for the 2012 iteration of the survey.

Impact of stress on physical and mental health

- One in five Australians reported that their current stress was having a strong to very strong impact on their physical health.
- Almost one in five Australians reported that their current stress was having a strong to very strong impact on their mental health.
- Australians who had recently gone through a family or relationship breakdown were significantly more likely than the rest of the sample of Australians to report that their stress levels had a strong impact on their physical and mental health.

Help-seeking behaviour for managing stress

- People were most likely to seek help to manage their stress from family (27%), friends (25%) and general practitioners (21%).
- 15% of Australians reported that they sought help to manage their stress from a psychologist or other mental health professional.

Level of stress at work

- Wellbeing at work was significantly lower this year compared with 2011 results, with concerns about becoming unemployed in the next 12 months and job stress being key components of this lower overall wellbeing at work.
- Having an employer who values an employee's work contribution and cares about workplace wellbeing was associated with higher levels of overall wellbeing and lower levels of stress, distress, anxiety and depression symptoms.

Carer stress and wellbeing

- Carers of ageing or chronically ill people reported significantly higher levels of stress and distress, and anxiety and depression symptoms than non-carers, with findings consistent with research from both Australia and overseas.
- Despite this impact on the mental health of carers, overall wellbeing scores were not significantly different to the rest of the Australian population.
- Carers who reported lower levels of support also showed significantly higher levels of distress and a trend towards higher levels of stress than carers who reported feeling adequately supported.

Chronic health conditions and stress

- Australians with at least one chronic health condition (such as diabetes or heart disease) reported significantly lower levels of wellbeing, significantly higher levels of stress and distress, and depression and anxiety symptoms than those Australians without a chronic health condition.

2 Introduction

While stress is a part of everyday life, research evidence indicates that excessive amounts of stress have been linked to impaired functioning across a range of areas including home, work life, relationships, and physical and psychological health. Periodic assessment of the stress and wellbeing levels within the Australian community provides important information to understand and enhance the psychological and physical health of the population.

As part of its commitment to promoting community mental health awareness and psychological wellbeing, in 2011 the Australian Psychological Society (APS) commissioned a 'state-of-the-nation' survey on a representative[2] sample of the adult population (18 years and over) to examine the levels of stress and wellbeing experienced by Australians. The survey explored levels of stress and distress, the key sources of stress, associations between stress, wellbeing and mental health, and strategies for managing stress. The APS planned to repeat this survey on an annual basis to provide insights into the nation's stress and wellbeing.

The inaugural *Stress and Wellbeing in Australia Survey 2011* found Australians experiencing levels of stress and distress comparable to other Western countries, with younger adults reporting the highest levels of stress. Finances, personal health, the health of others, and family issues were found to be causing the most stress. One year on from the initial findings, the APS presents the findings of the *Stress and Wellbeing in Australia Survey 2012*.

The *Stress and Wellbeing Survey 2012* aimed to repeat the questions from the inaugural survey to enable a year-by-year comparison, as well as to more closely examine sources of stress and strategies used to manage stress. In addition, the 2012 survey enabled a closer examination of the impact of stress on physical and mental health, and any differences in levels of stress across a number of demographic variables such as work status, marital status, level of education, level of income and cultural identity. The survey also particularly investigated the level of stress among two 'at-risk' groups: carers of an ageing or chronically ill person, and people with chronic health conditions (such as diabetes, heart disease etc).

[2] See page 7 under 'Survey participants' for more details on the methodology undertaken to obtain a representative sample of Australians.

3 Survey methodology

3.1 Survey participants

The Australian Psychological Society (APS) in conjunction with an online research company conducted the survey of a sample of Australians. The survey participants were comprised of approximately equal numbers of men and women and were representative of the Australian adult population (18 and above) for age, gender, geographical location and work status (matched on Australian Bureau of Statistics [ABS]) as shown in Tables 1-4[3].

A total of 1,552 people completed the online survey, which was conducted over a three week period from 3 August to 23 August 2012.

Table 1. Gender of survey participants and ABS data comparison

	Survey participants	ABS
Male	50.2%	49%
Female	49.8%	51%

Table 2. Location of survey participants and ABS data comparison

	Survey participants	ABS
VIC	24%	25%
NSW	28%	33%
QLD	22%	20%
SA	9%	8%
WA	10%	10%
TAS	3%	2%
ACT	2%	2%
NT	2%	1%

[3] Due to the survey only being available online, it is acknowledged that while participants were matched against APS statistics on relevant demographic variables, the sample is restricted to online data gathering processes only.

Table 3. Age range of survey participants and ABS data comparison

	Survey participants	ABS
18-25 yrs	10%	14%
26-35 yrs	18%	18%
36-45 yrs	18%	19%
46-55 yrs	20%	18%
56-65 yrs	15%	14%
66-75 yrs	13%	9%
76+ yrs	8%	8%

Table 4. Work status of survey participants and ABS data comparison

	Survey participants	ABS
Engaged in paid work of some kind	64%	65%

3.2 The survey

An online survey of 37 questions was developed which incorporated standardised measures of stress, wellbeing, anxiety and depression, as well as some additional questions.

Standardised measures

The stress and wellbeing levels of survey participants were assessed using the following validated and standardised measures which were used in the 2011 survey.

- The Warwick Edinburgh Mental Well-Being Score (WEMWBS) (Tennant, Hiller, Fishwick, Platt, Stephen, Weich, Parkison, Secker, & Stewart-Brown, 2007)
- The Perceived Stress Scale (PSS) (Cohen, Kamarck, & Mermelstein, 1983)
- The Kessler K10 Index (K-10) (Coombs, 2005)
- The *Anxiety* and *Depression* Indices of the Depression Anxiety and Stress Scale (DASS-21) (Lovibond & Lovibond, 1995)
- The *Workplace sub-scale* of the UK Well-being Measure (Huppert, Marks, Clark, Siegrist, Stutzer, Vittersø, & Wahrendorf, 2009)

Additional questions

A number of specific questions were included in the survey to examine the following issues.

- Relationship of experience of stress to demographic variables, including work status, level of education, level of income, marital status, country of origin, cultural identity, geographical location and living arrangements
- Major sources of stress
- Strategies used to manage stress
- Perceived impact of current stress on physical and mental health
- Help seeking behaviour to manage stress, e.g., seek help from a GP
- Workplace satisfaction
- Caregiver status and perceived adequacy of support
- Presence of one or more chronic health conditions

3.3 Data analysis

The data presented in this report has been selected on the basis of a preliminary analysis of noteworthy findings.

Demographic variables

Analyses were run for the total sample and across all key demographic variables with the exception of cultural identity[4]. No significant findings emerged for geographical location on any of the key variables of interest.

Preliminary analyses on several other demographic variables such as living arrangements and income levels, while producing significant results on a couple of the variables of interest could not be further analysed due to the small and unequal sample sizes.

Preliminary analyses for age, gender, work status and marital status were significant and sample sizes between groups were sufficient to permit reporting and inclusion in further data exploration.

Level of overall wellbeing

The level of overall wellbeing was derived by summing the scores of the 14 items of the WEMWBS. Item scores on the WEMWBS range from 1-5 with the total scale scores ranging from 14-70. Higher scores indicate greater wellbeing (Tennant, Hiller, Fishwick, et al., 2007)

Level of stress

The level of stress was derived by summing the scores of the 11 scale items of the PSS following reverse scoring of four positively stated items of the scale. Item scores on the PSS range from 0-4 with the total scale scores ranging from 0-44. Higher scores indicate higher levels of stress (Cohen, Kamarck, & Mermelstein, 1983).

Level of distress

The level of distress was derived by summing the scores of the 10 items of the K-10. Items scores on the K-10 range from 1-5 with the total scale scores ranging from 10-50. Scores range from 10-50 with higher scores indicating greater psychological distress. Scores of the K-10 were further categorised into *normal, moderate,* and *severe* levels of distress using the interpretation guidelines provided in the K10 manual to assess the impact on individuals' distress on functioning via categorisation (Coombs, 2005).

Level of depression and anxiety

The level of depression and anxiety symptoms were derived by summing the seven item scores for each of the depression and anxiety subscales of the DASS-21. Scale scores were than multiplied by two to obtain the final score. These scores were also classified into *normal, mild, moderate, severe* or *extremely severe* categories in accordance with the DASS-21 manual (Lovibond & Lovibond, 1995).

[4] Cultural identity requires additional individual coding which was beyond the scope of the preliminary analyses of the survey. This will be examined in subsequent analyses.

Comparisons between 2011 and 2012 data

To make comparisons between data gathered in 2012 and the 2011 survey data, one-sample t-test procedures were performed to determine whether the mean levels of variables of interest were significantly different at the 95% confidence interval.

Comparisons between groups

For comparisons between different groups (e.g., males/females, different age groups, carers and non-carers), a combination of parametric and non-parametric statistical techniques were applied. These included omnibus F-tests for one-way anovas for independent variables of interest—e.g., testing for effect of age on level of wellbeing, and Games-Howell multiple comparison tests to test for sub-group differences—e.g., work status, as this test does not assume equal variances. Analysing associations between nominal or categorical data involved Chi-square tests of independence--e.g., gender differences and strategies used to manage stress.

Prevalence percentage

Unless otherwise indicated, prevalence percentage includes those participants who rated source of stress as contributing to their overall stress in the past month 'sometimes', 'quite a bit', or 'a great deal'.

4 2012 survey results

4.1 Levels of stress and distress

One year on – level of stress among Australians

One year on, the pattern of findings of the *Stress and Wellbeing Survey 2012* were largely consistent with those of the 2011 survey, and in turn the results were comparable to those reported internationally (Taulbut, Parkinson, Catto. & Gordon, 2009; Cohen & Janicki-deverts, (in press)).

Table 5 presents the mean scores for wellbeing, stress and distress for survey participants in 2012 and 2011.

- Overall perceived stress levels in 2012 were comparable to those reported in 2011 and levels were consistent with those reported in other Western countries such as the United Kingdom and the United States. Younger adults continued to report much higher levels of stress and distress and lower levels of wellbeing compared with other Australians.
- Older Australians continued to report significantly higher levels of wellbeing compared with other Australians.
- Women continued to report significantly higher stress levels than men.
- Those who had recently experienced a relationship or family breakdown reported significantly higher levels of stress and distress and lower levels of wellbeing than the general population.

There were some key differences between the survey results in 2012 and the previous year that are worthy of note.

- While the percentage of Australians experiencing stress was similar to 2011, Australians reported significantly higher levels of distress in 2012.
- 22% of Australians reporting moderate to severe levels of distress in 2012.
- Australians also reported significantly lower levels of wellbeing in the 2012 survey compared with those reported in 2011.

Table 5. Mean scores on measures of wellbeing, stress and distress for 2012 and 2011.

	2012	2011	Significance (2-tailed)
WEMWBS score	47.65	49.11	*p =.000**
PSS total score	15.51	15.53	*p =.915*
K-10 score	18.4	17.94	*p =.035**

Level of distress among various groups within the Australian population
Some distinct patterns emerged when the levels of distress were analysed against two particular demographic variables: employment status and marital status.

Employment status

- Students reported higher levels of stress and distress and lower levels of wellbeing than most other Australians, with the exception of those who were unemployed.
- Unemployed Australians reported significantly higher levels of stress and distress than most other employment categories with the exception of those studying full-time.
- Unemployed Australians reported significantly lower levels of wellbeing than the rest of the population with the exception of students.

Marital status

- Married Australians reported significantly higher levels of wellbeing and lower levels of stress and distress compared to those who have never been married.

4.2 Experience of depression and anxiety symptoms

One year on – depression and anxiety among Australians
Australians' levels of depression and anxiety symptoms in 2012 were comparable to those of the 2011 survey, as indicated by mean scores on the Depression Anxiety and Stress Scale (DASS) scores shown in Table 6.

- Approximately one in three Australians (34% in 2012 compared to 32% in 2011) reported experiencing depression symptoms, with just over one in ten Australians (11% in 2012 compared to 10% in 2011) reporting depression symptoms in the severe to extremely severe range.
- One in four Australians (24% in 2012 compared to 26% in 2011) reported experiencing anxiety symptoms with just over one in ten (11% in 2012 compared to 9% in 2011) reporting severe to extremely severe levels of anxiety.
- Measures of anxiety and depression decreased in a graded fashion with increasing age, with younger people scoring significantly higher on measures of anxiety and depression than the rest of the participants. These findings were consistent with those of the 2011 survey.
- Women reported significantly higher levels of anxiety than men, as they did in 2011.
- Australians with a recent family or relationship breakdown reported significantly higher levels of depression and anxiety symptoms than the rest of the population, as found in the 2011 survey.

Table 6. Mean scores on measures of depression and anxiety symptoms for 2012 and 2011.

	2012	2011	Significance (2-tailed)
DASS-21 Depression	7.98	7.69	*p =.238*
DASS-21 Anxiety	5.27	5.11	*p =.395*

Level of depression and anxiety among various groups within the Australian population

Some distinct patterns emerged when the levels of depression and anxiety symptoms were analysed against two particular demographic variables: employment status and marital status[5].

- Married and widowed Australians reported significantly lower levels of depression and anxiety symptoms than most other Australians, but particularly when compared with those who have never been married.
- Unemployed Australians reported significantly higher levels of depression and anxiety symptoms than working Australians (whether full- or part-time, or retired).

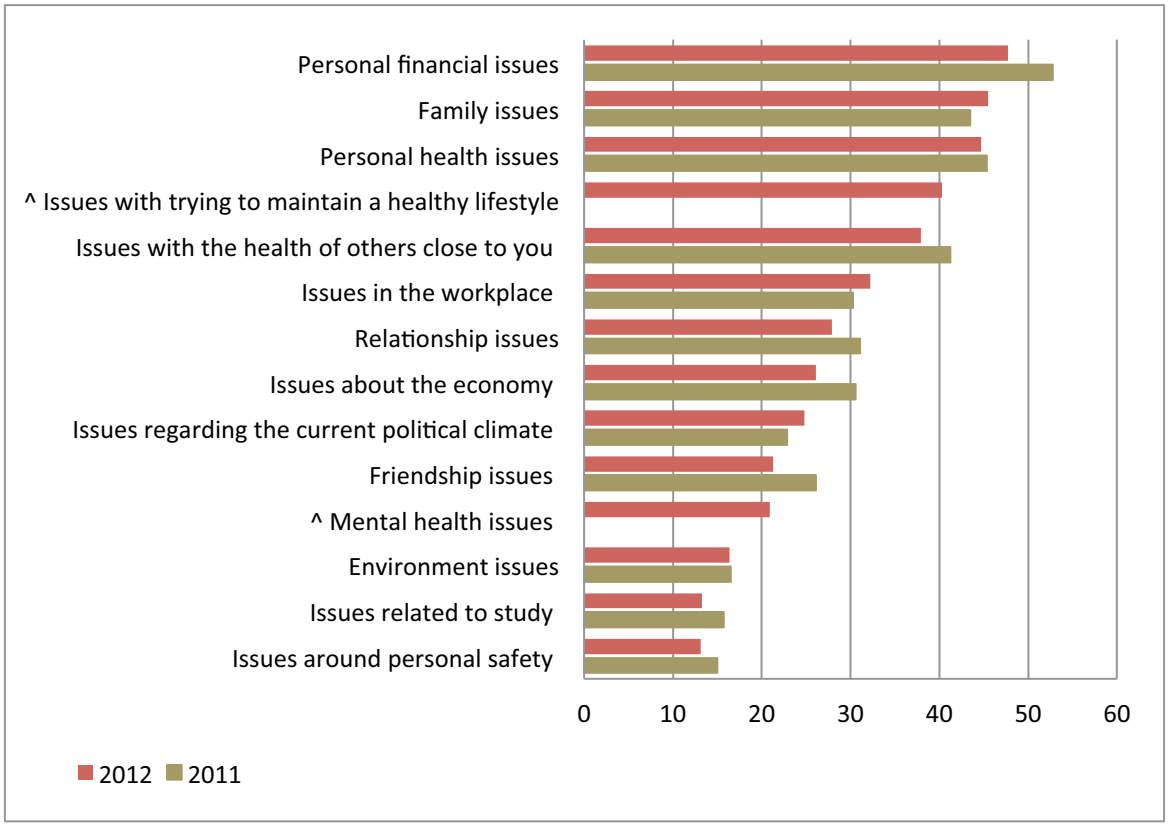
4.3 Causes of stress

One year on – causes of stress

Figure 1 presents the prevalence of various sources of stress among survey participants in 2012 and 2011. There was a very similar pattern between the two years.

- Financial issues remain the leading cause of stress amongst Australians, with close to 50% of Australians identifying personal financial issues as a cause of stress.
- Forty percent of Australians reported that trying to maintain a healthy lifestyle was a source of stress.
- Almost 20% of Australians reported mental health issues as a source of stress.

[5] While analyses of other demographic variables across levels of anxiety and depression symptoms did result in significant findings for some of these variables, small sample sizes in some of the sub-groups precluded inclusion in the report.



^ New items added to the 2012 survey

Figure 1. Prevalence (%) of sources of stress in 2012 compared with 2011

Causes of stress according to age group

Table 7 presents the prevalence of various sources of stress among survey participants according to age group, while Figure 2 depicts the difference between age groups on issues in the workplace, concerns with the current political climate and mental health issues as sources of stress.

- The prevalence of most causes of stress significantly decreased with increasing age, such as issues with finances, family issues, issues with trying to maintain a healthy lifestyle, relationship issues, friendship, concerns about mental health, and issues related to study.
- However, concerns about the current political climate increased as people got older, and concerns about the workplace tended to increase and peak for those aged between 36-55, before decreasing quite dramatically for those in the older age groups.
- Younger people (below 35 years of age) were significantly more concerned about friendships, relationship issues, the environment, personal safety and issues related to study. These findings reflected a similar pattern of findings to those of 2011.
- Younger adults (below 35 years of age) reported significantly more concern about mental health issues than other Australians.

Table 7. Prevalence (%) of sources of stress among different age groups

%	18-25	26-35	36-45	46-55	56-65	66-75	76+
* **Personal financial issues**	62	61	58	47	43	26	24
* **Family issues**	51	48	53	55	41	30	22
Personal health issues	45	47	40	42	50	45	46
* **Issues with trying to maintain a healthy lifestyle**	52	43	42	47	39	28	21
Issues with the health of others close to you	32	40	39	36	45	33	36
* **Issues in the workplace**	37	35	49	47	24	7	2
* **Relationship issues**	37	40	36	29	20	12	10
Issues about the economy	23	25	23	24	31	32	27
* **Issues regarding the current political climate**	22	19	19	22	26	36	41
* **Friendship issues**	42	30	27	21	12	8	8
* **Mental health issues**	37	30	25	18	14	11	7
* **Environment issues**	23	16	13	13	13	22	24
* **Issues related to study**	45	23	14	10	3	2	1
* **Issues around personal safety**	27	20	15	8	9	6	6

* Significant age differences (p<.05)

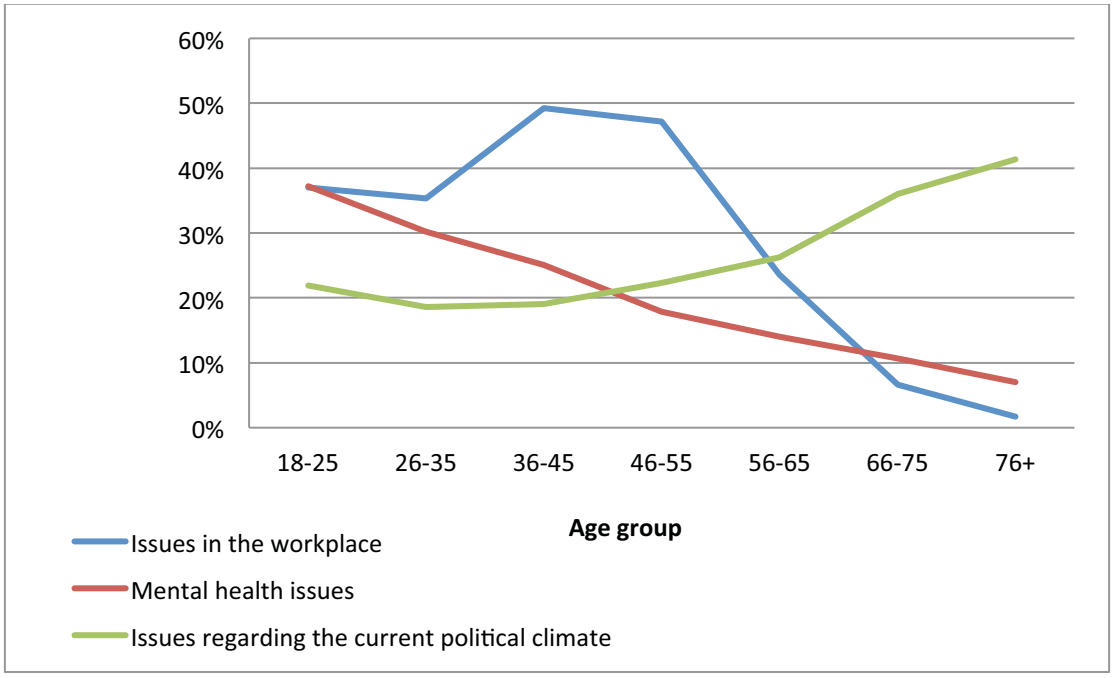
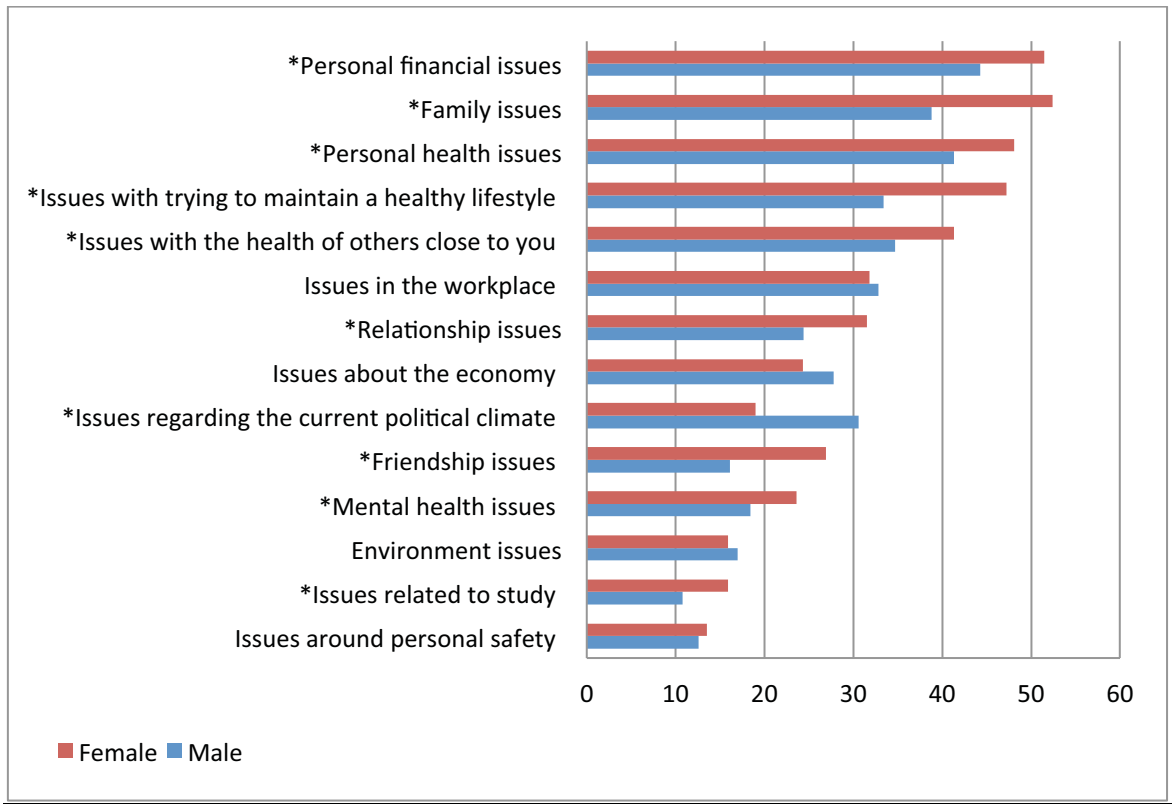


Figure 2. Prevalence (%) of issues in the workplace, concerns with the current political climate, and mental health issues as sources of stress among different age groups

Causes of stress according to gender

Figure 3 presents the prevalence of various sources of stress among survey participants according to gender. Separate analyses were undertaken to compare these results with those of the 2011 survey.

- Women were significantly more likely than men to be concerned about family (52% vs 39%), personal health (48% vs 41%) and issues with trying to maintain a healthy lifestyle (47% vs 33%).
- In contrast to 2011, women were significantly more likely to report issues related to study, relationships, and personal finances as sources of stress than men.
- Men were significantly more likely to be concerned with the current political climate than women.
- In contrast to 2011, men and women did not differ in their concern about the economy as a source of stress.



* Significant differences (p<.05)

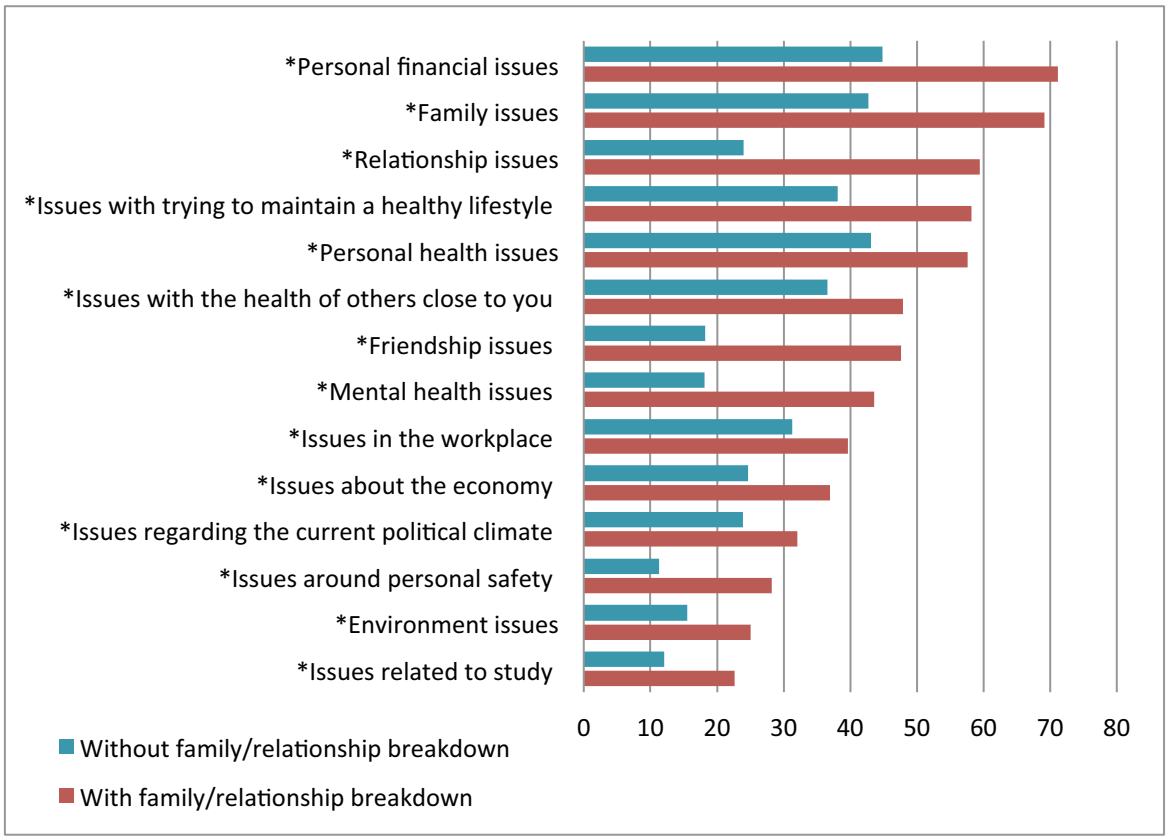
Figure 3. Prevalence (%) of sources of stress among males and females

Causes of stress according to experience of family/relationship breakdown

Figure 4 presents the prevalence of various sources of stress among survey participants who had recently experienced a family/relationship breakdown compared with those who had not.

- Australians who recently experienced family/relationship breakdown reported significantly greater concern about all sources of stress compared with those who had not experienced a family/relationship breakdown.

- This is in contrast to the findings in 2011, where only about half of the possible sources of stress were of greater concern to those experiencing a family/relationship breakdown.



* Significant differences (p<.05)

Figure 4. Prevalence of sources of stress among those with and without family/relationship breakdown

4.4 Strategies for managing stress

Strategies for managing stress in 2012 and their effectiveness

Survey participants reported engaging in a range of activities to manage their stress. The prevalence of use of various strategies is presented in Table 8, and differences between males and females in their use of various strategies to manage stress in Table 9. Table 10 compares different age groups' use of various strategies for managing stress and Figure 5 presents the effectiveness of the strategies used to manage stress.

- Watching TV or movies (85%), spending time with friends or family (82%), focusing on the positives (81%), listening to music (79%) and reading (77%) were the most commonly used strategies for managing stress.
- Women were significantly more likely than men to report spending time with friends (86% vs 79%), using social networking sites (51% vs 31%), watching television (89% vs 81%), shopping (64% vs 51%) and eating (76% vs 62%) to manage stress.
- A large number of Australians reported using psychological techniques involving mental activities to manage stress.
    - Four in five Australians (81%) reported focusing on the positive with reasonable frequency as a strategy to manage stress.
    - More than two-thirds (72%) of Australians reported using the psychological technique of adjusting expectations to manage stress.
    - Three in five Australians (63%) reported consciously avoiding people or situations that are stressful as a means of managing stress.
    - Of those Australians who reported using these psychological techniques, more than 60% of them reported the strategies as moderately to highly effective techniques for managing their stress.
- Age differences were found in choice of strategy to manage stress. Adjusting expectations, focusing on the positives, reading and engaging in a hobby were cited more frequently with increasing age.
- Watching television and movies, social networking, shopping, eating and consciously avoiding people or situations were cited more frequently, as ways of managing stress with decreasing age.

Table 8. Prevalence (%) of strategies used to manage stress

%	Never	Almost never	Sometimes	Fairly often	Very often
Do something active	12	18	36	20	14
Watch television or movies	6	9	36	34	15
Play video games	54	17	20	7	4
Visit social networking sites	45	15	23	12	6
Gamble	71	14	10	3	1
Listen to music	8	12	40	24	16
Read	10	13	33	27	17
Spend time with friends and/or family	7	10	41	29	12
Go shopping	19	23	39	14	5
Eat something	13	18	37	21	11
Smoke cigarettes	79	3	6	4	8
Drink alcohol	37	23	25	11	4
Sleep more	23	24	36	12	5
Take recreational drugs	89	4	4	1	1
Do something spiritual	60	12	13	8	7
Spend time doing a hobby	20	17	38	19	6
Doing something relaxing	36	25	29	7	3
Consciously avoid people and/or situations that are stressful	21	16	36	17	10
Focus on the positives	8	11	38	29	14
Adjust my expectations	13	15	48	18	6

Table 9. Gender differences in prevalence (%)of strategies used to manage stress

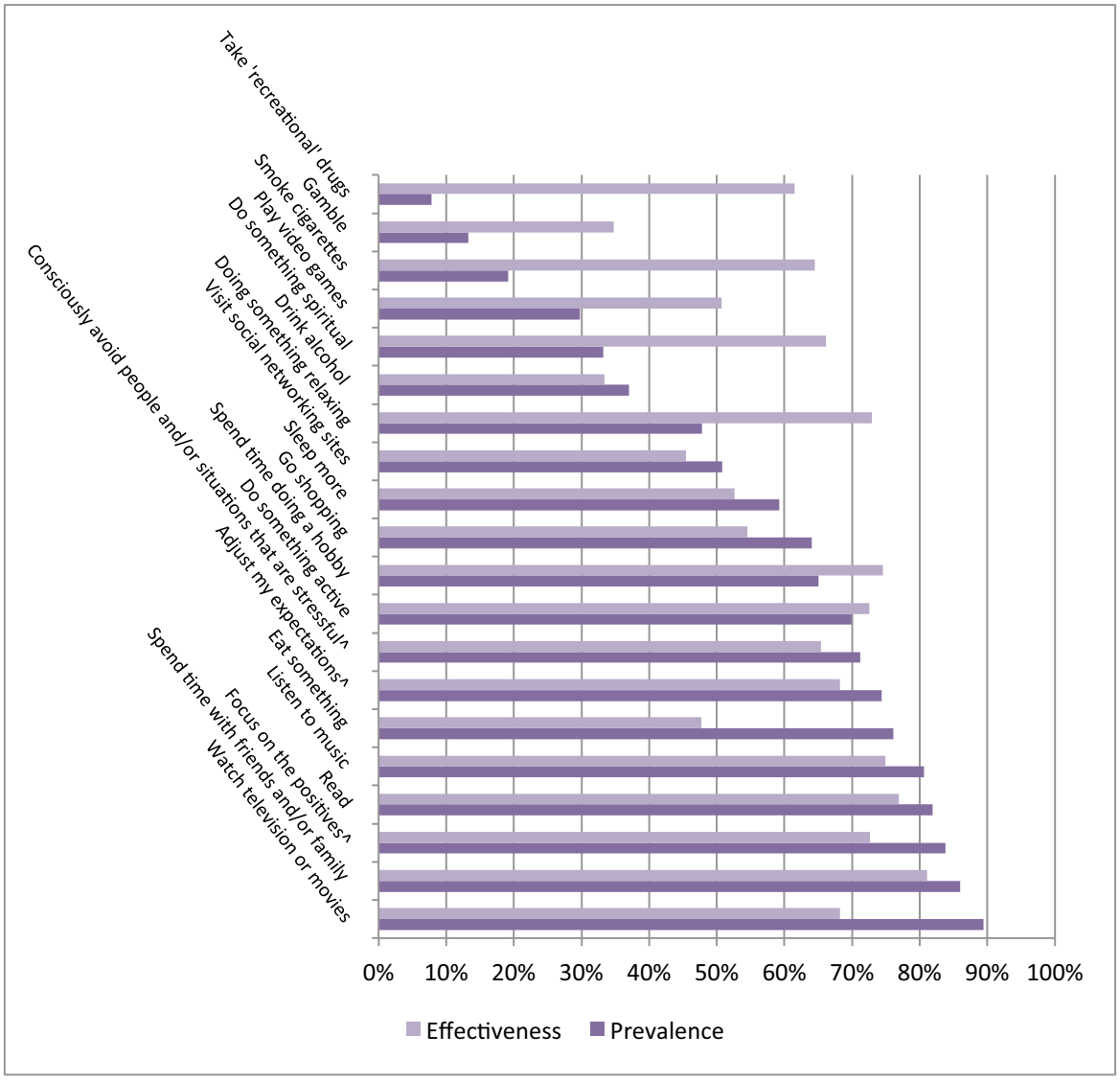
%	Male	Female
Do something active	69	70
*Watch television or movies	81	89
Play video games	31	30
*Visit social networking sites	31	51
Gamble	17	13
Listen to music	78	81
*Read	73	82
*Spend time with friends and/or family	79	86
*Go shopping	51	64
*Eat something	62	76
Smoke cigarettes	16	19
*Drink alcohol	43	37
*Sleep more	46	59
Take recreational drugs	6	8
*Do something spiritual	23	33
Spend time doing a hobby	61	65
*Doing something relaxing	31	48
*Consciously avoid people and/or situations that are stressful	55	71
*Focus on the positives	79	84
*Adjust my expectations	69	74

* Significant differences ($p<.05$)

Table 10. Age differences in prevalence(%) of strategies used to manage stress

%	Age (years)						
	18-25	26-35	36-45	46-55	56-65	66-75	76+
Do something active	69	67	68	72	73	70	64
*Watch television or movies	88	89	86	93	80	79	69
*Play video games	47	44	33	24	23	18	21
*Visit social networking sites	70	66	47	31	27	18	20
Gamble	16	20	18	13	12	18	15
Listen to music	86	82	80	78	80	79	70
*Read	71	72	76	76	82	90	77
Spend time with friends and/or family	80	86	81	79	83	87	78
*Go shopping	62	66	54	54	56	58	51
*Eat something	78	74	70	69	70	64	50
*Smoke cigarettes	24	25	21	21	11	10	3
Drink alcohol	37	35	43	45	42	38	40
*Sleep more	76	62	53	48	46	42	47
*Take recreational drugs	16	13	8	7	1	2	0
*Do something spiritual	31	35	23	23	25	34	31
*Spend time doing a hobby	58	63	56	63	65	73	66
*Doing something relaxing	46	53	44	38	31	29	26
*Consciously avoid people and/or situations that are stressful	71	69	70	68	63	44	41
*Focus on the positives	70	80	77	80	88	91	82
Adjust my expectations	63	72	70	71	76	75	73

* Significant differences between age groups (p<.05)



^ New items added to the 2012 survey

Figure 5. Effectiveness of strategies for managing stress and their prevalence (%)

4.5 Impact of stress on physical and mental health

The impact of stress

To understand more about how stress is impacting on the physical and mental health of Australians, the 2012 survey included two questions asking participants to rate the impact of their stress levels on both their physical and mental health.

Figures 6 and 7 present the perceived impact of stress on the physical and mental health of participants. Figures 8 and 9 present gender differences in perceived impact of stress on physical and mental health. Tables 11 and 12 present age differences in perceived impact of stress on physical and mental health.

- Seven in ten participants (70%) reported that current stress was having at least some impact on physical health, with almost one in five (18%) reporting that their current stress was having a strong to very strong impact on physical health.
- Three in five participants (60%) reported that current stress was having at least some impact on their mental health, with almost one in five (18%) reporting that current stress was having a strong to very strong impact on mental health.
- This relationship between stress and physical and mental health decreased as people got older.
- Males were less likely to report that stress impacted on their physical and mental health than females.
- Participants who have recently been through a family or relationship breakdown were significantly more likely to perceive their stress levels as having a strong impact on their mental and physical health than those who hadn't experienced such a breakdown.

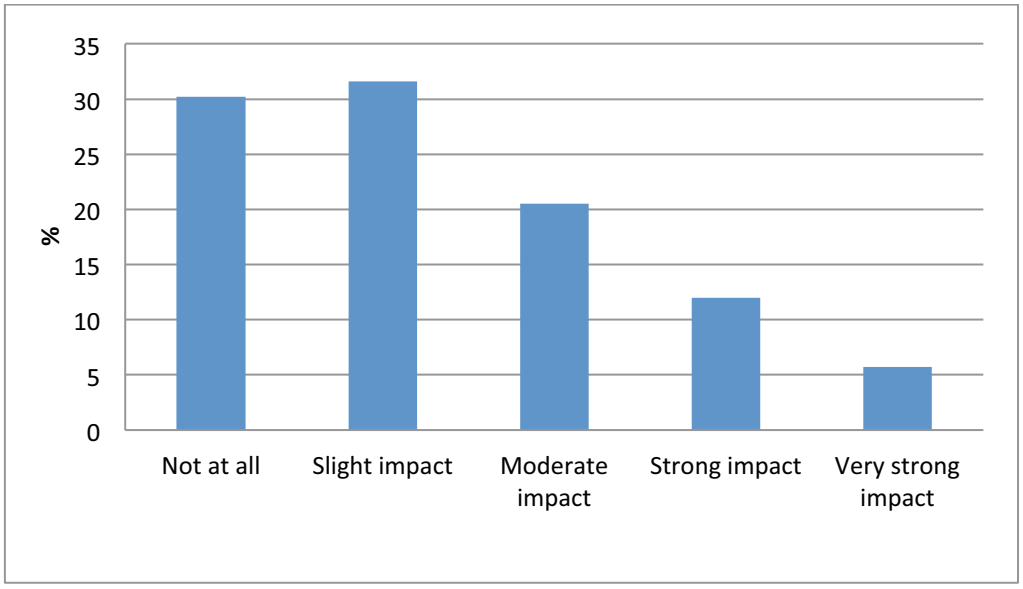


Figure 6. Perceived impact of stress (%) on physical health

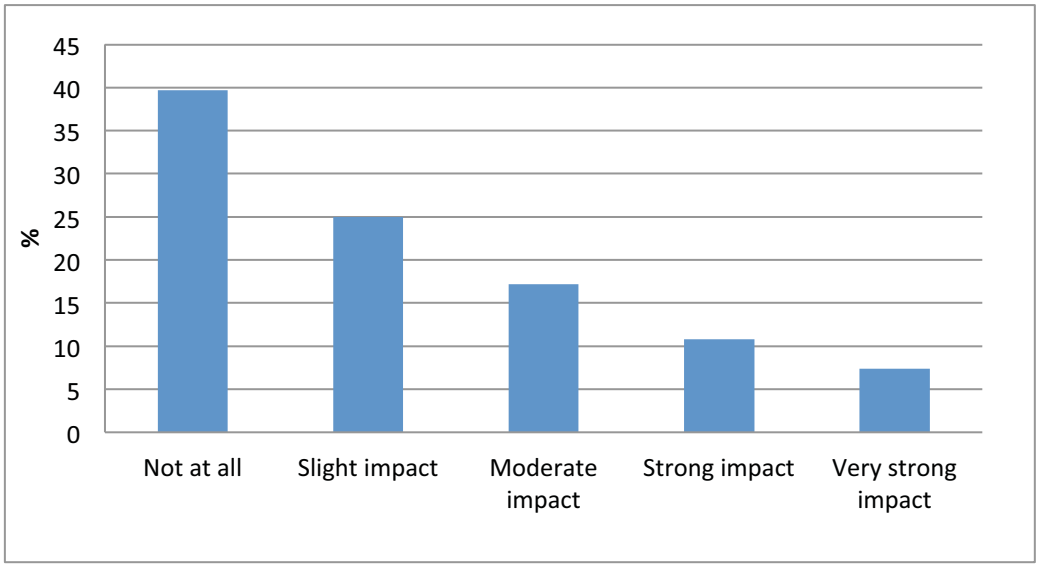
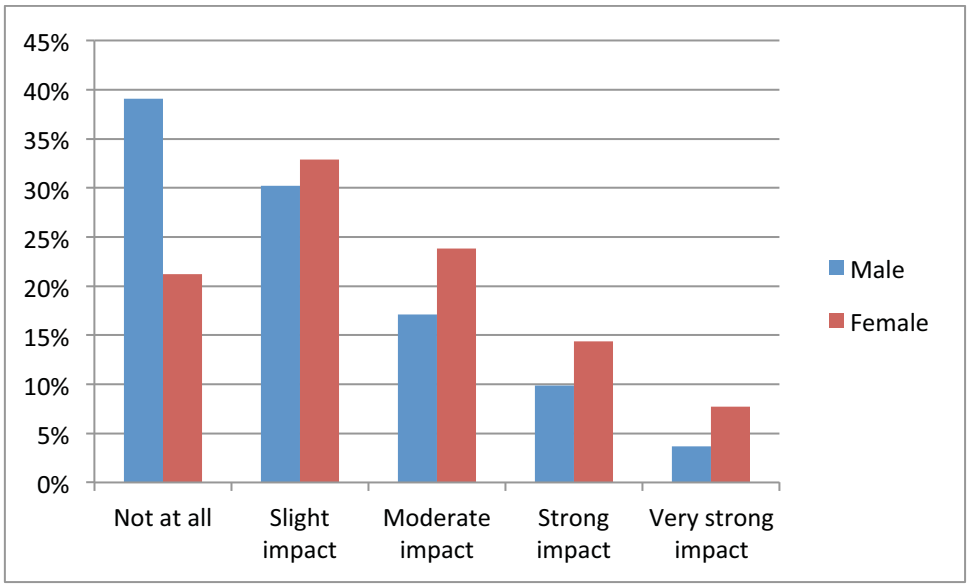
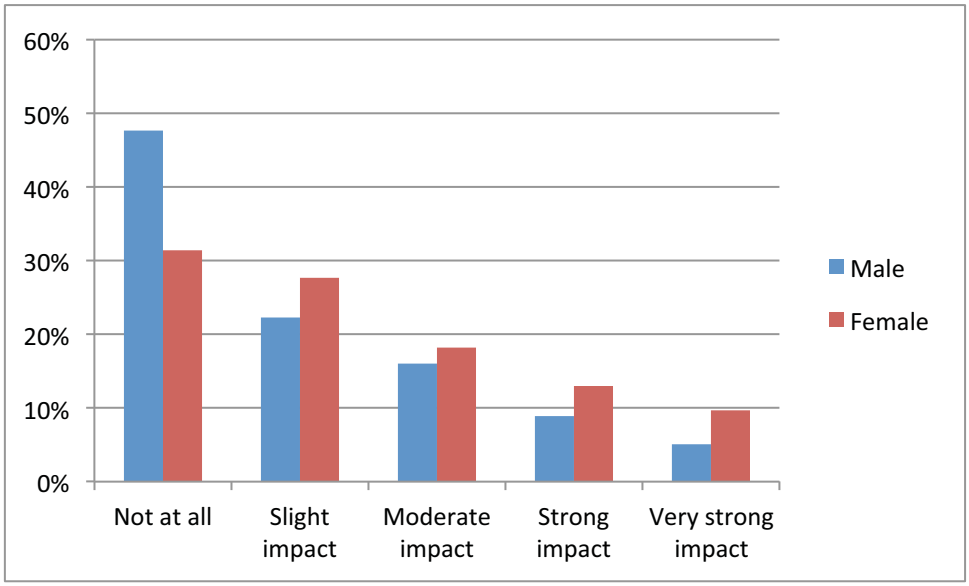


Figure 7. Perceived impact of stress (%) on mental health



Significant difference between male and female (p=.000)

Figure 8. Gender differences in perceived impact of stress (%) on physical health



Significant difference between male and female (p=.000)

Figure 9. Gender differences in perceived impact of stress (%) on mental health

Table 11. Age differences in perceived impact of stress (%) on physical health

	Age (years)						
%	**18-25**	**26-35**	**36-45**	**46-55**	**56-65**	**66-75**	**76+**
Not at all	20	20	22	23	35	51	58
Slight impact	34	33	31	32	35	26	29
Moderate impact	27	25	26	23	17	11	6
Strong impact	9	15	13	15	10	10	4
Very strong impact	10	6	7	7	3	3	3

Table 12. Age differences in perceived impact of stress (%) on mental health

	Age (years)						
%	**18-25**	**26-35**	**36-45**	**46-55**	**56-65**	**66-75**	**76+**
Not at all	20	29	25	34	52	64	73
Slight impact	27	24	29	27	25	19	21
Moderate impact	19	24	21	18	13	13	5
Strong impact	22	14	13	12	7	4	1
Very strong impact	12	9	11	10	3	2	1

4.6 Help seeking behaviour for managing stress

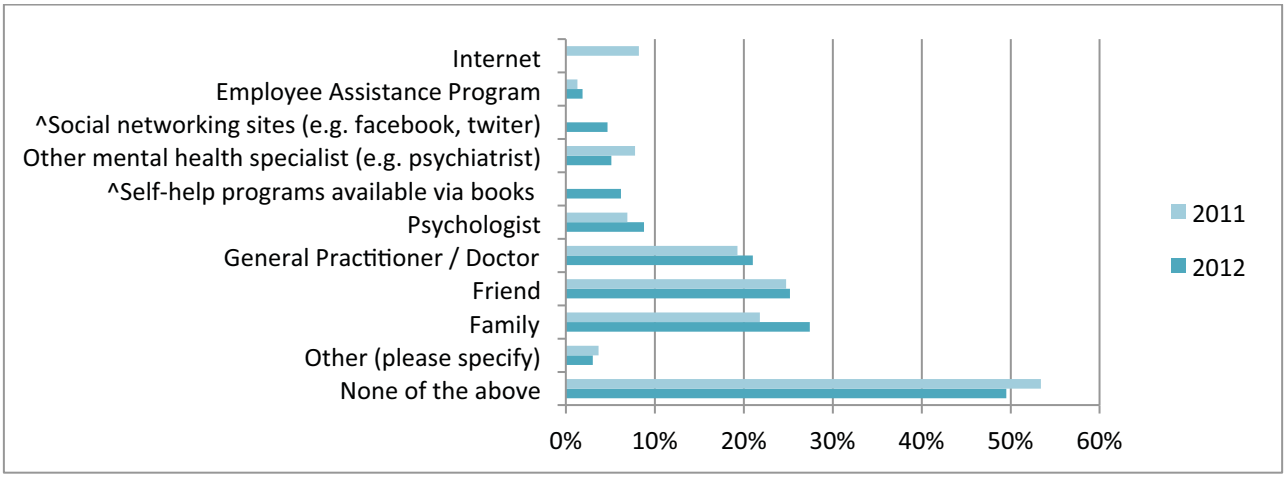
Help-seeking behaviour

The prevalence of various sources of help sought for managing stress are presented in Figure 10.

- Family, friends and general practitioners were the most likely sources for seeking help to manage stress.
- Similarly, seeing a psychologist or other mental health professional accounted for almost 15% of the sources for seeking help to manage stress. These findings were consistent with those of 2011.

Two new help-seeking options for managing stress were included in the 2012 survey: social networking sites (e.g. facebook, twitter), and self-help programs.

- Only 5% of Australians nominated social networking sites and only 6% nominated self-help programs as places where they had gone to seek help in the past 12 months[6].



^New items added to the 2012 survey

Figure 10. Prevalence (%) of sources of help sought in the past 12 months to help manage stress

4.7 Level of stress at work

Wellbeing at work

Survey participants who were employed were asked about the workplace as a source of stress and their wellbeing at work. Assessment of wellbeing at work included questions about job satisfaction, work-life balance, how interesting the job is, how stressful, appropriateness of salary, and likelihood of becoming unemployed in the next 12 months. Working participants also rated the extent to which their employer values their work contribution and cares about their wellbeing at work.

[6] However, social networking was reported as sometimes, fairly often to very often used as an activity to help manage stress by 41% of the Australians surveyed with almost half of these Australians rating it as an effective strategy (see Table 8).

Table 13 presents mean scores for the wellbeing at work subscale for 2012 and 2011.

- Almost one in three working Australians (32%) identified issues in the workplace as a source of stress.
- Issues in the workplace tended to increase with age from 18-25 through 36-45 where the levels peaked, with a small decline between this age group and those aged 46-55, followed by a steady decline for those 56 and older.
- Men and women did not significantly differ in how strongly they identified issues in the workplace as sources of stress, which is in contrast to findings of the 2011 survey where men were more likely to report workplace issues as a source of stress.
- Working Australians reported significantly lower overall wellbeing at work scores in 2012 compared with 2011.
- Compared with 2011, working Australians reported that they found their job significantly more stressful in 2012 and reported that it was significantly more likely that they would become unemployed in the next 12 months.
- Working Australians who reported that their employer valued their work contribution and cared about their wellbeing at work had significantly lower levels of stress and distress. These working Australians also had significantly lower levels of anxiety and depression symptoms and significantly higher levels of the overall wellbeing.

Table 13. Mean scores for workplace wellbeing in 2012 versus 2011

	2012 Mean	**2011 Mean**	**Significance (2-tailed)**
Overall workplace wellbeing	4.28	4.41	*p =.001**
Individual scale items			
Job Satisfaction (0-10)	6.60	6.65	*p =.056*
Work-life balance Satisfaction (0-10)	6.31	6.37	*p =.466*
Job Interesting (0-6)	4.11	4.02	*p =.058*
Job Stressful (0-6 inversed)	2.81	3.02	*p =.000**
Appropriateness of salary (1-5)	3.11	3.09	*p =.594*
Likelihood of unemployment (1-4 inversed)	2.72	3.24	*p =.000**

* Statistically significant

4.8 Carer stress and wellbeing

The burden on carers of ageing or chronically ill people is well documented and although this is a source of concern within some sections of the community, often these carers carry the burden silently and are not appropriately acknowledged. Research has shown that carers do better when they are adequately supported (Carers Australia, 2012)

Of the 1,552 Australians surveyed, 157 (10%) identified themselves as a carer of an ageing or chronically ill person. The gender age and marital status of these carers are presented in Tables 14-16.

The stress and mental health of carers' was compared with non-carers in terms of levels stress and distress, depression and anxiety symptoms, and overall wellbeing (Table 17), sources of stress (Figure 11), strategies used to manage stress, and impact on physical and mental health (Figures 12 & 13).

These carers were asked about their perceived level of support and this was analysed against their levels of wellbeing, stress and distress, and depression and anxiety symptoms.

- Of the 10% of Australians who identified themselves as a carer, there were slightly more female carers (58%) than males (42%).
- The highest proportion of carers were aged between 46 and 65 years.
- Over 60% of carers were married.

Stress, mental and physical health, and wellbeing

- Carers reported significantly higher levels of stress and distress than non-carers. This is in line with research findings from both Australian and overseas studies (Carers Australia, 2012).
- Carers were significantly more likely to report that their stress levels had a strong to very strong impact on their physical health and mental health compared with non-carers.
- Carers reported significantly higher levels of depression and anxiety symptoms than non-carer Australians.
- Despite this impact on the mental health of carers, overall wellbeing scores were not significantly different to the rest of the Australian population.
- In terms of sources of stress, carers were significantly more likely to report family issues, issues with trying to maintain a healthy lifestyle, issues with the health of others close, and environmental issues as sources of stress than the rest of the Australian population.
- Looking at strategies that carers were using to manage their stress, there were no significant differences between carers and the rest of the population.

Adequacy of support

- While carers overall did not differ in levels of wellbeing to that of other Australians, significant differences emerged in levels of wellbeing among carers depending on how well supported the carer was. Lower levels of wellbeing were associated with significantly lower levels of support.

- Carers with lower levels of perceived support also showed significantly higher levels of distress and a trend towards higher stress levels.
- While there was a trend towards higher levels of depression and anxiety symptoms for those carers reporting lower levels of support, these results were not significant.

Table 14 . Gender of carers

Gender	%
Male	42.4
Female	57.6

Table 15. Age range of carers

Age	%
18-25	6.4
26-35	10.8
36-45	11.5
46-55	25.5
56-65	28.7
66-75	8.9
76+	8.3

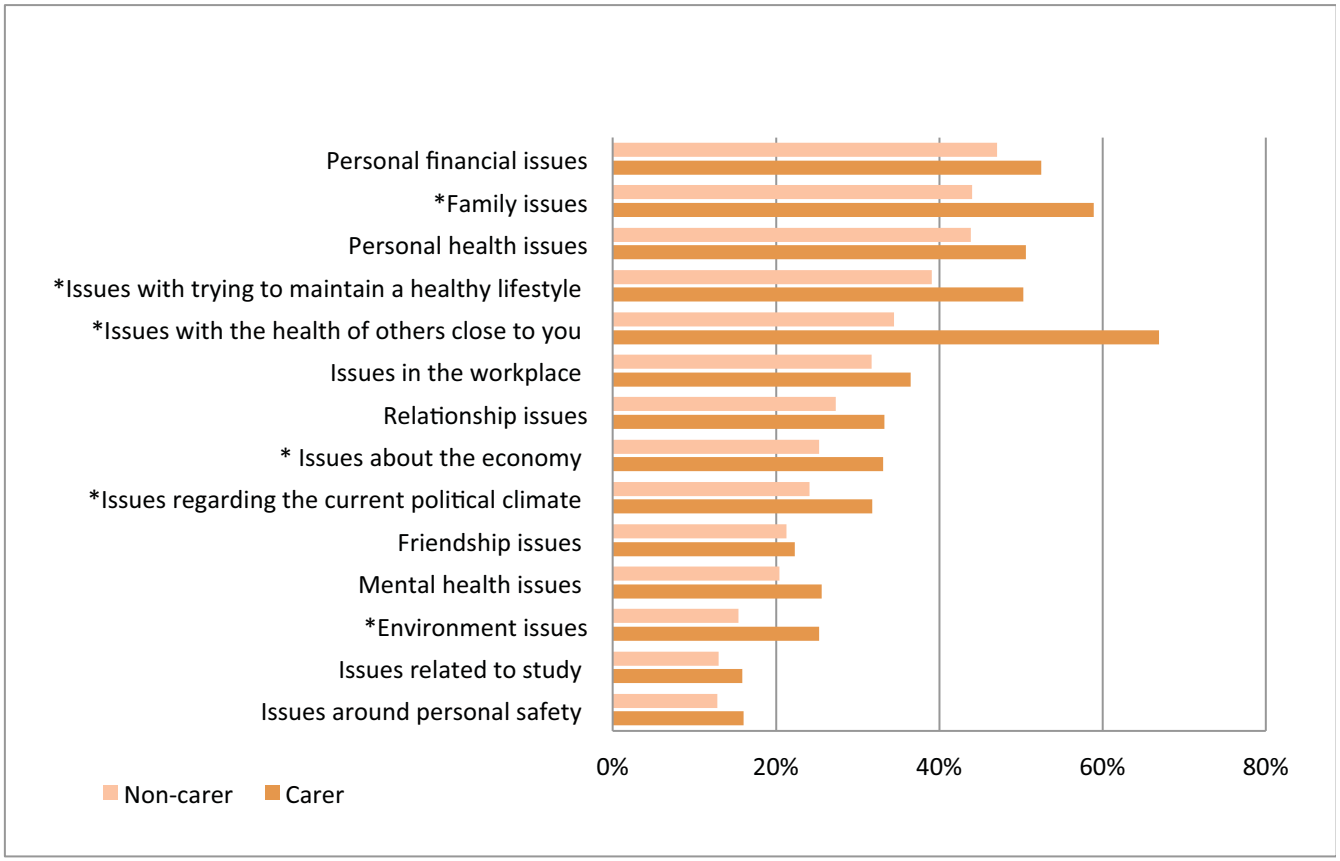
Table 16. Marital status of carers

Marital status	%
Never married	16.6
Widowed	2.5
Divorced	10.2
Separated but not divorced	2.5
Married	61.1
De facto	7

Table 17. Mean levels of wellbeing, stress, distress, depression and anxiety symptoms for carers vs non-carers

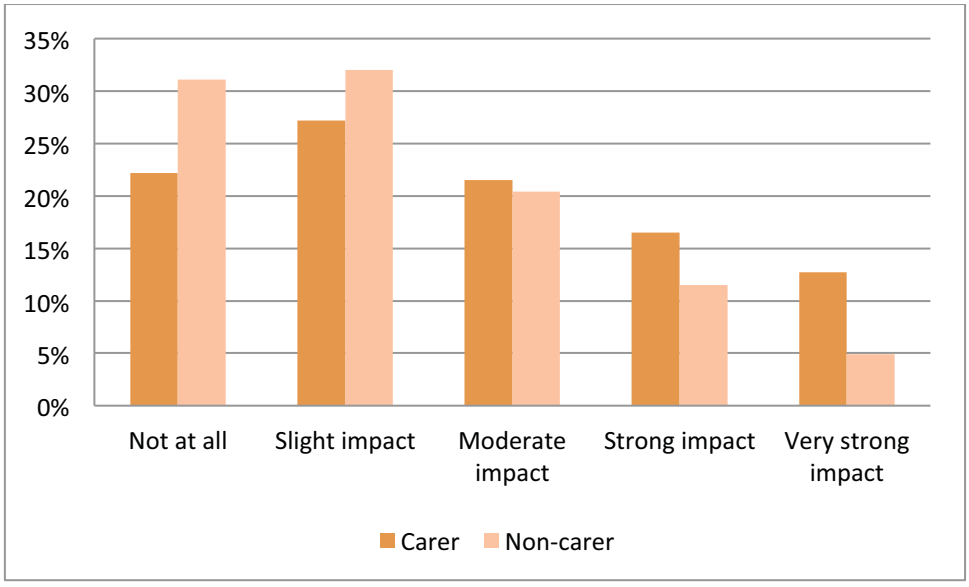
	Carers	Non-carers	Significance (2-tailed)
WEMWBS score	47.79	47.64	*p =.862*
PSS total score	16.68	15.37	*p =.037**
K-10 score	20.16	18.19	*p =.006**
DASS depression	9.56	7.78	*p =.027**
DASS anxiety	6.88	5.09	*p =.004**

* Statistically significant



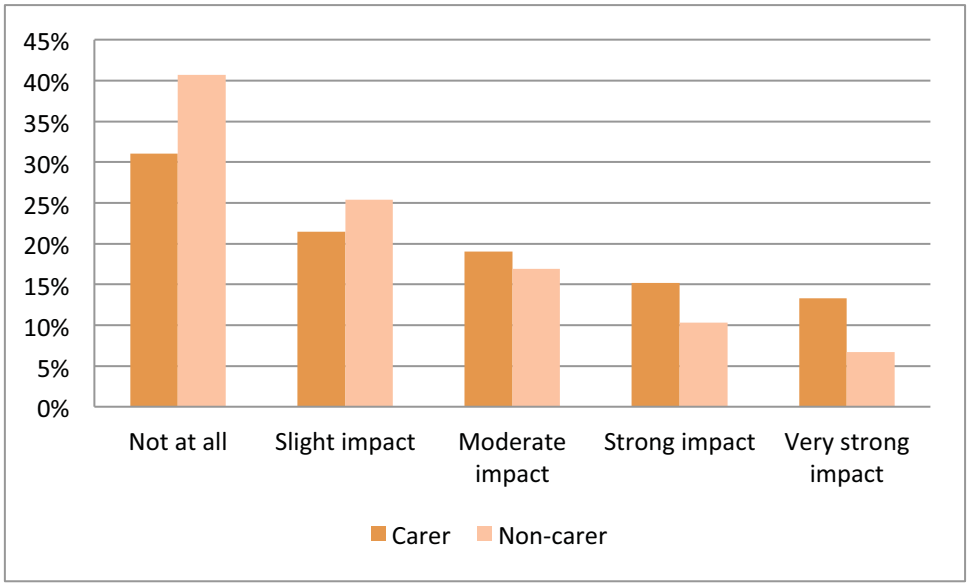
* Significant differences (p<.05)

Figure 11. Prevalence (%) of sources of stress for carers and non-carers



* Statistically significant (p=.000)

Figure 12. Prevalence (%) of perceived impact of stress on physical health for carers and non-carers



* Statistically significant p=.003

Figure 13. Prevalence (%) of perceived impact of stress on mental health for carers and non-carers

4.9 Chronic health conditions and stress

Chronic health conditions such as cardiovascular and diabetes and respiratory disease – many of which are associated with lifestyle-related behaviours – are estimated to be responsible for more than 80 per cent of the burden of disease and injury in Australia, and this is projected to dramatically increase into the future (Australian Government, 2010).

Of the 1,552 Australians surveyed for this report, 346 (22%) stated that they had at least one chronic physical health condition[7].

The gender, age and marital status of the chronic health condition group are presented in Tables 18-20. Figure 14 presents the prevalence of the number of chronic health conditions reported for the group while Figure 15 presents the prevalence (%) of the top five chronic health conditions for the group.

The stress and mental health of participants with chronic health conditions was compared with the rest of the participants on levels of overall wellbeing, stress and distress, and depression and anxiety symptoms and is presented in Table 21. The sources of stress (Figure 16) and the strategies used to manage stress (Table 22) were also assessed for this group. The extent to which stress levels were impacting on physical and mental health for the chronic health condition group were also analysed (Figures 17 and 18).

- Almost one quarter of Australians reported suffering from at least one chronic health condition. Many of this sample group reported suffering from more than one chronic condition.
- Of the 22% of Australians who identified themselves as having a chronic health condition, there were roughly equal numbers of males (52%) and females (48%) , the prevalence predictably increased with age, and almost half (49%) were married.
- Australians with at least one chronic health condition reported significantly lower levels of wellbeing, and significantly higher levels of stress and distress than those Australians with no chronic health condition.
- Australians with at least one chronic health condition reported significantly higher levels of depression and anxiety symptoms than those with no chronic health condition.
- This chronic health condition group were:
    - Significantly more likely to report personal health issues, political issues, environment issues, mental health issues, issues with trying to maintain a healthy lifestyle, and issues with the health of close ones as sources of stress than the rest of Australians surveyed.
    - Significantly less likely to report workplace issues as a major contributor to their overall levels of stress compared with the rest of the survey participants.

[7] 'Physical chronic health condition' is referred to hereafter as 'chronic health condition'. Those participants who indicated that they were suffering from one chronic health condition that was a mental health disorder—e.g., depression- were excluded from this set of analyses as the focus was specifically on physical chronic health conditions

- Significantly more likely to read and consciously avoid people and/or situations that are stressful to manage stress than other survey participants.
- Significantly less likely to manage stress by doing something active, smoking cigarettes, or doing something relaxing compared with the rest of the survey sample.
- Significantly more likely to report that their stress levels had a strong to very strong impact on their physical health and mental health compared with those without physical chronic conditions.

Table 18. Gender statistics for the chronic health condition group

Gender	%
Male	52.2
Female	47.8

Table 19. Age range of the chronic health condition group

Age	%
18-25	4.6
26-35	9.9
36-45	12.8
46-55	18.8
56-65	22
66-75	19.7
76+	12.2

Table 20. Marital status of the chronic health condition group

Marital status	%
Never married	19.2
Widowed	6.4
Divorced	13.1
Separated but not divorced	3.8
Married	49.1
De facto	8.4

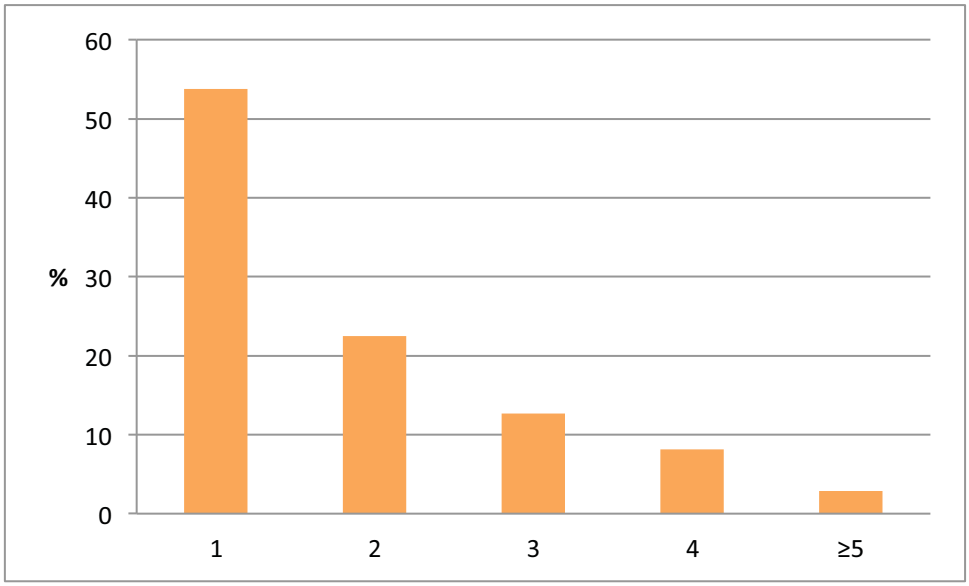


Figure 14. Prevalence (%) of number of chronic physical health conditions reported

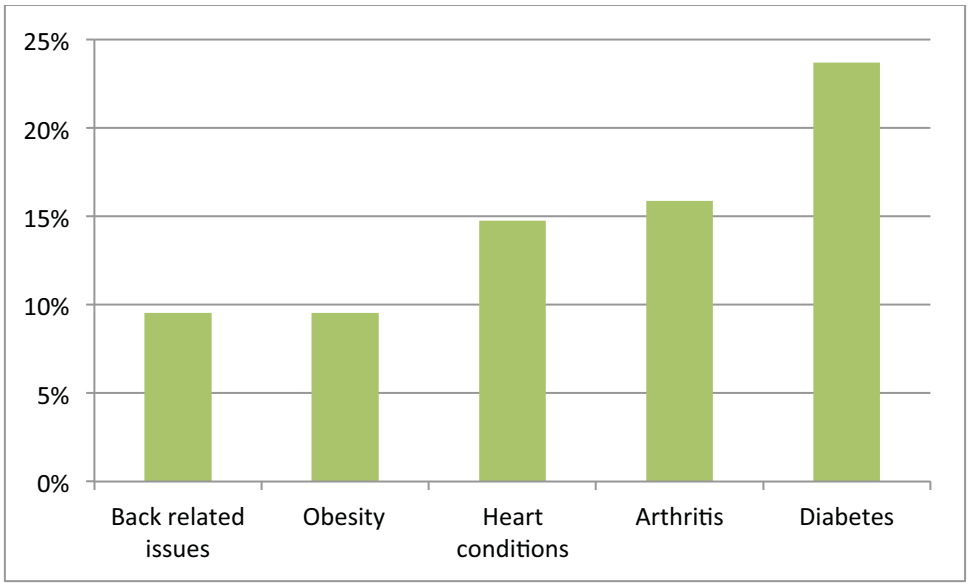
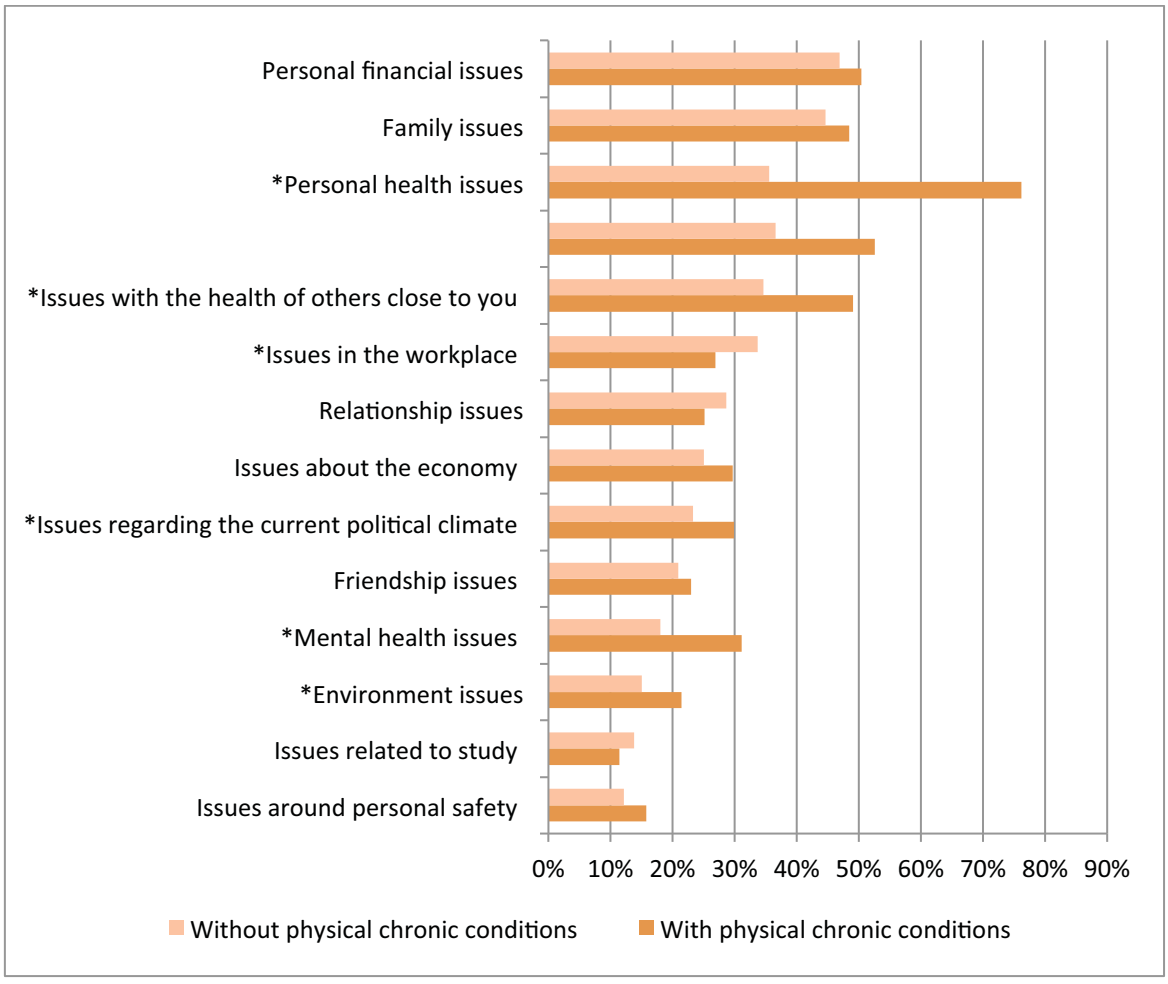


Figure 15. Prevalence (%) of the top five chronic physical health conditions among survey participants.

Table 21. Mean levels of wellbeing, stress and distress, depression and anxiety symptoms for those with versus without chronic physical conditions

	With chronic health condition	Without chronic health condition	Significance (2-tailed)
WEMWBS score	46.11	48.09	*p =.001**
PSS total score	16.53	15.21	*p =.004**
K-10 score	19.99	17.94	*p =.000**
DASS depression	10.26	7.33	*p =.000**
DASS anxiety	6.88	4.81	*p =.000**



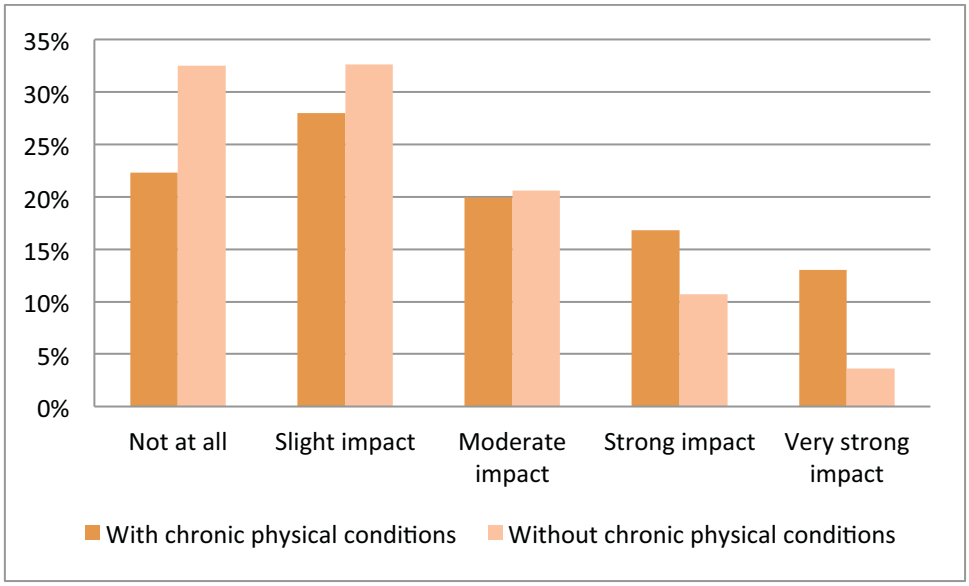
*Significant differences (p<.05)

Figure 16. Prevalence (%) of sources of stress among those with and without chronic physical conditions

Table 22. Prevalence (%) of strategies used to manage stress for those with and without a chronic physical health condition

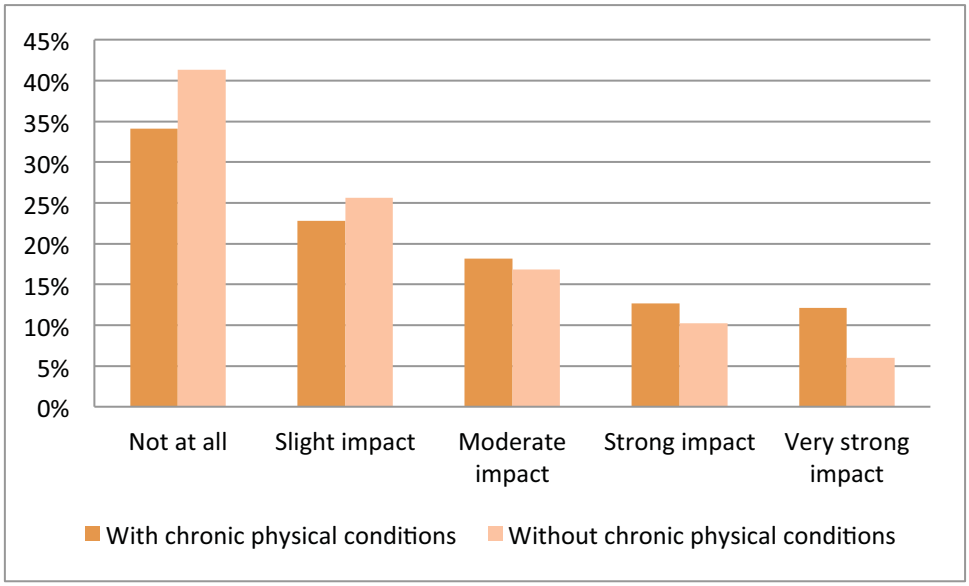
%	With chronic health condition	Without chronic health condition
* Do something active	61	72
Watch television or movies	84	85
Play video games	29	30
Visit social networking sites	36	42
Gamble	12	16
Listen to music	82	79
* Read	83	76
Spend time with friends and/or family	82	82
Go shopping	58	57
Eat something	72	68
* Smoke cigarettes	12	19
Drink alcohol	38	41
Sleep more	51	53
Take recreational drugs	6	7
Do something spiritual	31	27
Spend time doing a hobby	64	63
* Doing something relaxing	32	41
* Consciously avoid people and/or situations that are stressful	68	62
Focus on the positives	80	82
Adjust my expectations	74	71

* Significant differences (p<.05)



*Significant difference (p=.000)

Figure 17. Perceived impact of stress on physical health for those with versus without chronic health condition



* Significant difference (p=.001)

Figure 18. Perceived impact of stress on mental health for those with versus without chronic physical health conditions

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Appendix 1. Summary statistics for specific groups for 2012

Summary statistics for women

Summary statistics for young adults

Summary statistics for the unemployed

Summary statistics for those who recently experienced family/relationship breakdown

Summary statistics for women

Demographic descriptive statistics for women **(n=765)**

Table 1. Age range of the women subgroup

Age	N	%
18-25	115	15.1
26-35	191	25.0
36-45	124	16.3
46-55	141	18.5
56-65	85	11.1
66-75	74	9.7
76+	33	4.3
Total	763	100.0

Table 2. Prevalence (%) of different living arrangements for women

Living arrangements	N	%
Live alone	134	17.6
Live with partner	444	58.3
Sole parent	38	5.0
Live with parents	69	9.1
Live with other adults	50	6.6
Other - please specify:	26	3.4
Total	761	100.0

Table 3. Marital status of the women subgroup

Marital status	N	%
Never married	172	22.7
Widowed	42	5.5
Divorced	73	9.6
Separated but not divorced	24	3.2
Married	337	44.4
De facto	111	14.6
Total	759	100.0

Table 4. Prevalence (%) of different employment status for women

Primary employment situation	N	%
Employed Full-time (>30hrs)	244	31.9
Employed Part-time/Casual	188	24.6
Homemaker	104	13.6
Full-time student	36	4.7
Part-time student	9	1.2
Retired	112	14.7
Unemployed	37	4.8
Other - please specify:	34	4.5
Total	764	100.0

Key findings for women include:

- Consistent with the findings of the 2011 survey, women continued to report significantly higher levels of stress (PSS[1] mean score: 16.68 vs. 14.39) and distress (K-10[2] mean score: 19.49 vs. 17.41) than men.
- In 2012, women reported significantly higher levels of anxiety than men (DASS 21 – Anxiety Index mean score: 5.85 vs. 4.72).
- Women were significantly more likely than men to be concerned about family (52% vs. 39%), personal health (48% vs. 41%) and issues with trying to maintain a healthy lifestyle (47% vs. 33%).
- In contrast to 2011, women were significantly more likely to report issues related to study, relationships, and personal finances as sources of stress than men (refer to Figure 3. in the main report for statistics).
- Women were significantly more likely than men to report spending time with friends (86% vs. 79%), using social networking sites (51% vs. 31%), watching television (89% vs. 81%), shopping (64% vs. 51%) and eating (76% vs. 62%) to manage stress.
- Women were more likely than men to report that stress impacted on their physical health (8% vs. 4% rated very strong impact) and mental health (10% vs. 5% rated very strong impact).

[1] Perceived Stress Scale
[2] Kessler K10 Index

Summary statistics for young adults (age 18 -35)

Demographic descriptive statistics for young adults

Sample: n=419 with 35.1% age 18-25; 64.9% age 26-35

Table 5. Gender spread of the young adults' subgroup

Gender	N	%
Male	112	26.8
Female	306	73.2
Total	418	100

Table 6. Marital status for young adults' subgroup

Marital status	N	%
Never married	179	42.8
Widowed	2	0.5
Divorced	6	1.4
Separated but not divorced	6	1.4
Married	148	35.4
De facto	77	18.4
Total	418	100

Table 7. Prevalence of different employment status for young adults

Primary employment situation	N	%
Employed Full-time (>30hrs)	150	35.8
Employed Part-time/Casual	85	20.3
Homemaker	75	17.9
Full-time student	49	11.7
Part-time student	9	2.1
Retired	39	9.3
Unemployed	12	2.9
Other - please specify:	419	100
Total	150	35.8

Table 8. Prevalence (%) of different living arrangements for young adults

Living arrangements	N	%
Live alone	43	10.3
Live with partner	224	53.7
Sole parent	9	2.2
Live with parents	86	20.6
Live with other adults	48	11.5
Other - please specify:	7	1.7
Total	417	100

Key findings for young adults include:

- Younger adults (age 18-35) continued to report higher levels of stress and distress compared to older Australians.
- Younger adults (age 18-35) continued to report lower levels of wellbeing compared to older Australians.
- Younger adults (age 18-35) reported significantly higher levels of anxiety and depression symptoms compared to older Australians with this finding similar to those of last year.
- Younger people (age 18-35) were more concerned about friendships, relationship issues, the environment, personal safety and issues related to study (refer to Table 7. for details). These findings reflected a similar pattern of findings to those of 2011.
- Younger adults (age 18-35) also reported more concern about mental health issues than other Australians.
- Age differences were found in choice of strategy to manage stress. Adjusting expectations, focusing on the positives, reading and engaging in a hobby were cited more frequently with increasing age.
- Watching television and movies, social networking, shopping, eating and consciously avoiding people or situations were cited more frequently with decreasing age.
- *Watch television or movies (89%)*, *spend time with friends and/or family (83.9%)*, *listen to music (83.5%)* and *focus on the positives (76.4%)* were the top four strategies nominated by the young adults (age 18-35) to help manage stress.
- Around 80% of young adults (age 18-35) reported that current stress was having at least some impact on physical health with over one in five (20.5%) reporting that their current stress was having a strong to very strong impact on physical health.
- Almost three in four (74.3%) young adults (age 18-35) reported that that current stress was having at least some impact on mental health with over 26% reporting that their current stress was having a strong to very strong impact on mental health.

Summary statistics for the unemployed

Demographic descriptive statistics for the unemployed (n = 81[3])

Table 9. Gender distribution of the unemployed subgroup

Gender	N	%
Male	44	54.3
Female	37	45.7
Total	81	100

Table 10. Age range of the unemployed subgroup

Age	N	%
18-25	11	13.6
26-35	28	34.6
36-45	13	16
46-55	17	21
56-65	11	13.6
66-75	1	1.2
76+	0	0
Total	81	100

Table 11. Marital status of the unemployed subgroup

Marital status	N	%
Never married	36	45
Widowed	1	1.3
Divorced	6	7.5
Separated but not divorced	5	6.3
Married	21	26.3
De facto	11	13.8
Total	80	100

Table 12. Prevalence of different living arrangements for unemployed

Living arrangements	N	%
Live alone	16	19.8
Live with partner	34	42
Sole parent	2	2.5
Live with parents	17	21
Live with other adults	10	12.3
Other - please specify:	2	2.5
Total	81	100

[3] Caution should be used when interpreting these results due to relatively small sample size for the unemployed subgroup.

Key findings for the unemployed include:

- Unemployed Australians reported significantly higher levels of stress (PSS[4] mean score = 20.30) and distress (K-10[5] mean score= 24.62) than those who were employed (both full-timers and part-timers) or retired (all *p=.000*).
- Unemployed Australians reported significantly lower levels of wellbeing (WEBWBS[6] mean score = 41.83) than the rest of the population (all *p<.01*) with the exception of students.
- Unemployed Australians reported significantly higher levels of depression and anxiety symptoms than working or retired Australians (DASS 21 – Depression Index mean score=15.23; DASS 21 – Anxiety Index mean score=8.81; all *p<.01*).
- Issues around *personal finances*, *personal health* and *trying to maintain a healthy lifestyle* were rated by the unemployed as the top three contributors to overall stress in the past month.
- *Watch television or movies (91.3%)*, *listen to music (81.3%)*, *eat something (78.8%)* and *consciously avoid people and/or stressful situations that are stressful (75.3%)* were the top four strategies nominated by the unemployed to help manage stress.
- Over 80% of unemployed Australians reported that current stress was having at least some impact on physical health with more than one third (35.5%) reporting that their current stress was having a strong to very strong impact on physical health.
- Almost three in four (74.7%) unemployed Australians reported that that current stress was having at least some impact on mental health with 38% reporting that their current stress was having a strong to very strong impact on mental health.

[4] Perceived Stress Scale
[5] Kessler K10 Index
[6] Warwick Edinburg Mental Well-Being Score

Summary Statistics for those who recently experienced family/relationship breakdown

Demographic descriptive statistics for Australians who recently experienced family/relationship breakdown (n = 166)

Table 13 Gender

Gender	N	%
Male	66	40
Female	99	60
Total	165	100

Table 14. Age range

Age	N	%
18-25	31	18.7
26-35	34	20.5
36-45	39	23.5
46-55	32	19.3
56-65	14	8.4
66-75	10	6
76+	6	3.6
Total	166	100

Table 15. Marital status

Marital status	N	%
Never married	52	31.5
Widowed	4	2.4
Divorced	25	15.2
Separated but not divorced	28	17
Married	37	22.4
De facto	19	11.5
Total	165	100

Table 16. Prevalence of different living arrangements

Living arrangements	N	%
Live alone	47	28.7
Live with partner	55	33.5
Sole parent	19	11.6
Live with parents	24	14.6
Live with other adults	14	8.5
Other - please specify:	5	3
Total	164	100

Key findings for Australians who recently experienced family/relationship breakdown:

- Those who had recently experienced a relationship or family breakdown reported significantly higher levels of stress (PSS[7] mean score: 20.14 vs. 14.95) and distress (K-10[8] mean score: 23.53 vs. 17.78) than the general population (all p = .000).
- Those who had recently experienced a relationship or family breakdown also reported significantly lower levels of wellbeing (WEBWBS[9] mean score = 44.12 vs. 48.06, *p=.000*) than the rest of the general population.
- Australians with a recent family or relationship breakdown reported significantly higher levels of depression (DASS 21 – Depression Index mean score=13.80 vs 7.27) and anxiety symptoms (DASS 21 – Anxiety Index mean score=9.64 vs 4.74) than the rest of the general population (all p = .000).
- Australians who recently experienced family/relationship breakdown reported significantly greater concern about all sources of stress compared with those who had not experienced a family/relationship breakdown (refer to Figure 4. for statistics). This is in contrast to the findings in 2011, where only about half of the possible sources of stress were of greater concern to those experiencing a family/relationship breakdown.
- *Listen to music (88.6%)* and *watch television or movies (87.3%)*, *spend time with friends and/or family (83.1%)* and *read (80.1%)* were the top four strategies nominated by those who recently experienced family/relationship breakdown to help manage stress.
- Australians who have recently been through a family or relationship breakdown were more likely to perceive their stress levels as having a strong impact on their physical health than those who hadn't experienced such a breakdown (13.9% vs. 4.7% rated very strong impact).
- Australians who have recently been through a family or relationship breakdown were more likely to perceive their stress levels as having a strong impact on their physical health than those who hadn't experienced such a breakdown (22.4% vs. 5.5% rated very strong impact).

[7] Perceived Stress Scale
[8] Kessler K10 Index
[9] Warwick Edinburg Mental Well-Being Score