

NATIONAL POPULATION HEALTH SURVEY 2022

The National Population Health Survey (NPHS) is a cross-sectional population health survey series that monitors the health and risk factors as well as lifestyle practices of Singapore residents¹.



Prevalence of diabetes² and hyperlipidaemia² continued to decrease but hypertension² continued to increase



Prevalence of diabetes

2019 – 2020 **9.5%**

2021 – 2022 **8.5%**

2019 – 2020 **39.1%**

2021 – 2022 **31.9%**

Prevalence of hyperlipidaemia

2019 – 2020 **35.5%**

2021 – 2022 **37.0%**



2019 – 2020 **35.5%**

2021 – 2022 **37.0%**

Prevalence of obesity³ continued to increase



Prevalence of obesity

2019 – 2020 **10.5%**

2021 – 2022 **11.6%**

More Singapore residents participated in health screening and received pneumococcal vaccination



Chronic disease screening participation⁴ has moved upwards

in 2022 for diabetes and hyperlipidaemia but not for hypertension

Chronic disease screening participation among Singapore residents	2019	2021	2022
Diabetes	81.0%	76.6%	77.4%
Hyperlipidemia	77.9%	72.5%	75.0%
Hypertension	86.0%	82.4%	80.7%



Screening participation for breast⁵, cervical⁶ and colorectal⁷ cancers have increased

in 2022 after dropping during the COVID-19 period

Cancer screening participation among Singapore residents	2019	2021	2022
Breast	38.7%	31.1%	37.6%
Cervical	48.2%	41.0%	43.1%
Colorectal	42.0%	36.6%	38.1%



Pneumococcal vaccination⁸ uptake among Singapore residents has increased

Pneumococcal vaccination uptake among Singapore residents aged 65 to 74 years	2019	2021	2022
	10.3%	22.4%	26.5%

Prevalence of daily smoking has decreased, continuing the positive trend of declining smoking rates over the past decade



Prevalence of daily smoking

2019 **10.6%**

2021 **10.4%**

2022 **9.2%**

Percentage of Singapore residents engaging in sufficient total physical activity⁹ has decreased



Prevalence of sufficient total physical activity

2019 **84.6%**

2021 **76.0%**

2022 **74.9%**

Prevalence of poor mental health¹⁰ has increased but there is greater willingness to seek help for mental health issues



Prevalence of poor mental health

2020 **13.4%**

2022 **17.0%**

Proportion of Singapore residents willing to seek help when unable to cope with stress

Willingness to seek help from health professionals¹¹

2019 **47.8%**

2021 **58.3%**

2022 **56.6%**

Willingness to seek help from informal support networks¹¹

2019 **74.5%**

2021 **69.1%**

2022 **79.7%**

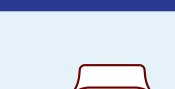
An increase in help seeking behaviour has been observed for Singapore residents who are unable to cope with stress

What can you do?



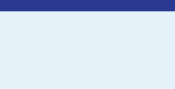
Eat Healthier

- Reduce intake of salt and sugar
- Eat healthy food in the right proportion:
 - ½ plate with fruits and vegetables
 - ¼ plate wholegrains
 - ¼ plate meat, bean-based foods and others



Be Active

- Engage in at least 150 to 300 minutes of moderate-intensity physical activity per week
- Include some strength, balance and flexibility exercises at least 2 times per week



Achieve better mental health and well-being

- Learn some relaxation techniques to cope with the stresses of everyday life
- If you or your loved ones feel overwhelmed, do seek professional help



Quit Smoking

- Quit smoking to protect your own health and the health of those around you
- Visit go.gov.sg/iqquit for resources and programmes to support you in quitting smoking



Screen Early

- Go for regular health screening to help detect health risks early
- Visit go.gov.sg/screenforlife-resources for list of recommended screenings

To learn more on tips, resources and programmes, visit HealthHub at www.healthhub.sg

Download the NPHS 2022 report for more detailed information about the survey at www.hpb.gov.sg/nphs



or scan the QR code for the NPHS report

1. Comparison of survey results between the pre-COVID (2019) and COVID-19 period (2020 to 2022) is presented to highlight changes in trend data possibly influenced by the COVID-19 pandemic. COVID-19 restrictions and reduced commuting from hybrid work arrangements might have contributed to the decrease in prevalence. Activity, chronic diseases and cancer screening participation (non-urgent services) have improved in 2022 compared to 2021 but remained lower than pre-COVID-19 screening levels.
2. Chronic disease refers to diabetes, hypertension or hyperlipidaemia. Chronic disease prevalence estimate is a composite indicator of (i) those who reported that they were diagnosed with the chronic disease by a doctor and on medication, (ii) those who reported that they were diagnosed with the chronic disease by a doctor and not on medication but were found to have chronic disease during health examination and (iii) those who had been newly diagnosed with the chronic disease during the health examination and did not self-report doctor-diagnosed chronic disease.
3. Obesity refers to a body mass index equal to or greater than 30 (kg/m²) (BMI ≥ 30 (kg/m²)).
4. Chronic diseases screening participation refers to the proportion of Singapore residents aged 40 to 74 years with no previous diagnosis of chronic diseases, who were screened within the recommended guidelines. The recommended screening guidelines are: once every 3 years for diabetes and hyperlipidaemia and once every 2 years for hypertension.
5. Breast cancer screening participation refers to the proportion of women aged 50 to 69 years who had gone for mammography in the past 2 years.
6. Cervical cancer screening participation refers to the proportion of women aged 25 to 29 years who had undergone a Pap test in the past 3 years and women aged 30 to 74 years who took a human papillomavirus (HPV) test in the past 5 years.
7. Colorectal cancer screening participation refers to the proportion of residents aged 50 to 74 years who had a Faecal Immunochemical Test (FIT) in the past 1 year or a colonoscopy in the past 10 years.
8. Pneumococcal vaccination refers to the proportion of Singapore residents aged 65 to 74 years who reported ever having received pneumococcal vaccination.
9. Sufficient total physical activity refers to engagement in ≥ 150 minutes of moderate-intensity or ≥ 75 minutes of vigorous-intensity physical activities or its equivalent per week.
10. Mental health is measured using a 12-item General Health Questionnaire (GHQ-12). Poor mental health refers to having a score of 3 or more.
11. Healthcare professionals refer to counsellors, doctors, psychologists or psychiatrists and informal support networks refer to friends, relatives, colleagues, religious leaders or teachers in school.