National Healthcare Agreement: PB c—Better health: reduce the age-adjusted prevalence rate for Type 2 diabetes to 2000 levels (equivalent to a national prevalence rate (for 25 years and over) of 7.1 per cent) by 2023, 2017

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National Healthcare Agreement: PB c—Better health: reduce the age-adjusted prevalence rate for Type 2 diabetes to 2000 levels (equivalent to a national prevalence rate (for 25 years and over) of 7.1 per cent) by 2023, 2017

Identifying and definitional attributes

Metadata item type: Indicator Indicator type: Indicator

Short name: PB c-Reduce the age-adjusted prevalence rate for Type 2 diabetes to 2000 levels

(equivalent to a national prevalence rate (for 25 years and over) of 7.1 per cent) by

2023, 2017

METEOR identifier: 629972

Registration status: Health!, Superseded 30/01/2018

Description: Proportion of people with Type 2 diabetes.

Indicator set: National Healthcare Agreement (2017)

Health!, Superseded 30/01/2018

Outcome area: <u>Prevention</u>

Health!, Standard 07/07/2010

Collection and usage attributes

Computation description: Proxy measure:

The National Health Measures Survey component of the 2011–13 Australian Health Survey (cat. no. <u>4364.0.55.005</u>) included a fasting plasma glucose test.

A respondent to the survey is considered to have *known diabetes* if they had ever been told by a doctor or nurse that they have Type 2 diabetes and:

- They were taking diabetes medication (either insulin or tablets); or
- Their blood test result for fasting plasma glucose was greater than or equal to 7.0 mmol/L).

A respondent to the survey is considered to have *newly diagnosed diabetes* if they reported no prior diagnosis of diabetes, but had a fasting plasma glucose value greater than or equal to 7.0 mmol/L.

Excludes persons who did not fast for 8 hours or more prior to their blood test.

Excludes women with gestational diabetes.

Population is limited to persons aged 25 years and over.

Rates are directly age-standardised to the 2001 Australian population.

Analysis by remoteness and Socio-Economic Indexes for Areas (SEIFA) Index of Relative Socio-Economic Disadvantage (IRSD) is based on usual residence of person (subject to data availability).

Presented as a percentage.

95% confidence intervals and relative standard errors calculated for rates.

Note: The type of diabetes for newly diagnosed cases cannot be determined from a fasting plasma glucose test alone. However, it is assumed that the vast majority of newly diagnosed cases would be Type 2.

Computation: 100 x (numerator/denominator)

Numerator: Number of persons aged 25 years and over with *known diabetes* (Type 2) or *newly*

diagnosed diabetes as determined by a fasting plasma glucose test.

Numerator data elements:

- Data Element / Data Set-

Person with known diabetes (Type 2) or newly diagnosed diabetes as determined by a fasting plasma glucose test

Data Source

ABS Australian Health Survey (AHS), 2011–13 (2011–12 National Health Measures Survey component)

Guide for use

Data source type: Survey

Data Element / Data Set-

Person—age

Data Source

ABS Australian Health Survey (AHS), 2011–13 (2011–12 National Health Measures Survey component)

Guide for use

Data source type: Survey

Data Element / Data Set-

Person with known diabetes (Type 2) or newly diagnosed diabetes as determined by a fasting plasma glucose test

Data Source

ABS Australian Aboriginal and Torres Strait Islander Health Survey (AATSIHS), 2012–13 (National Aboriginal and Torres Strait Islander Health Measures Survey component)

Guide for use

Data source type: Survey

Data Element / Data Set-

Person—age

Data Source

ABS Australian Aboriginal and Torres Strait Islander Health Survey (AATSIHS), 2012–13 (National Aboriginal and Torres Strait Islander Health Measures Survey component)

Guide for use

Data source type: Survey

Denominator: Population aged 25 years and over.

Denominator data elements:

Data Element / Data Set-

Person-age

Data Source

ABS Australian Health Survey (AHS), 2011–13 (2011–12 National Health Measures Survey component)

Guide for use

Data source type: Survey

Data Element / Data Set

Person-age

Data Source

ABS Australian Aboriginal and Torres Strait Islander Health Survey (AATSIHS), 2012–13 (National Aboriginal and Torres Strait Islander Health Measures Survey component)

Guide for use

Data source type: Survey

Disaggregation:

State and territory, by:

- sex
- Indigenous status (non-Indigenous only).

Nationally, by:

- remoteness (Australian Statistical Geography Standard (ASGS) Remoteness Structure)
- 2011 SEIFA IRSD quintiles.

State and territory by Indigenous status (Indigenous only).

Some disaggregations may result in numbers too small for publication.

Disaggregation data elements:

Data Element / Data Set-

Person—Indigenous status

Data Source

ABS Australian Health Survey (AHS), 2011–13 (2011–12 National Health Measures Survey component)

Guide for use

Data source type: Survey

Data Element / Data Set

Person—area of usual residence, statistical area level 2 (SA2) code (ASGS 2011) N(9)

Data Source

ABS Australian Health Survey (AHS), 2011–13 (2011–12 National Health Measures Survey component)

Guide for use

Data source type: Survey

Used for disaggregation by state/territory, remoteness and SEIFA

Data Element / Data Set-

Person—area of usual residence, statistical area level 2 (SA2) code (ASGS 2011) N(9)

Data Source

ABS Australian Aboriginal and Torres Strait Islander Health Survey (AATSIHS), 2012–13 (National Aboriginal and Torres Strait Islander Health Measures Survey component)

Guide for use

Data source type: Survey

Used for disaggregation by state/territory

Comments:

Most recent data available for 2017 National Healthcare Agreement performance reporting: 2011–12 (total population, non-Indigenous: AHS); 2012–13 (Indigenous

only: AATSIHS).

NO NEW DATA FOR 2017 REPORTING.

The baseline measure of 7.1 per cent is calculated from the <u>Australian Diabetes</u>, <u>Obesity and Lifestyle Study conducted in 1999–2000</u>. Note that this number was age-standardised to the average of the 1999 and 2000 Australian populations, and was based on data from both oral glucose tolerance tests (OGTTs) and fasting plasma glucose tests. As an OGTT was not conducted as part of the National Health Measures Survey, the data supplied for the 2014 CRC report are not comparable to the baseline measure of 7.1 per cent.

Fasting plasma glucose test data will be supplied as a proxy from the AHS for this benchmark, age-standardised to the 2001 Australian population. The equivalent baseline measure from the Australian Diabetes, Obesity and Lifestyle Study, age-standardised to the 2001 Australian population and using fasting plasma glucose test data, has been calculated to be a rate of 5.0%.

Representational attributes

Representation class: Percentage

Data type:RealUnit of measure:PersonFormat:N[NN].N

Indicator conceptual framework

Framework and dimensions:

Health conditions

Data source attributes

Data sources:

-Data Source

ABS Australian Health Survey (AHS), 2011–13 (2011–12 National Health Measures Survey component)

Data custodian

Australian Bureau of Statistics

Data Source

ABS Australian Aboriginal and Torres Strait Islander Health Survey (AATSIHS), 2012–13 (National Aboriginal and Torres Strait Islander Health Measures Survey component)

Data custodian

Australian Bureau of Statistics

Accountability attributes

Reporting requirements: National Healthcare Agreement

Organisation responsible for providing data:

Australian Bureau of Statistics

Benchmark: Natio

National Healthcare Agreement Performance Benchmark

Reduce the age-adjusted prevalence rate for Type 2 diabetes to 2000 levels (equivalent to a national prevalence rate (for 25 years and over) of 7.1 per cent) by 2023.

Refer: http://www.federalfinancialrelations.gov.au/content/npa/healthcare/national-agreement.pdf

Further data development / collection required:

Further data development / Specification: Final, the measure meets the intention of the indicator.

Relational attributes

Related metadata references:

Supersedes National Healthcare Agreement: PB c—Better health: reduce the age-adjusted prevalence rate for Type 2 diabetes to 2000 levels (equivalent to a national prevalence rate (for 25 years and over) of 7.1 per cent) by 2023, 2016

Health!, Superseded 31/01/2017

Has been superseded by National Healthcare Agreement: PB c–Better health: reduce the age-adjusted prevalence rate for Type 2 diabetes to 2000 levels (equivalent to a national prevalence rate (for 25 years and over) of 7.1 per cent) by 2023, 2018

Health!, Superseded 19/06/2019

See also National Healthcare Agreement: PI 10—Prevalence of Type 2 diabetes, 2017

Health!, Superseded 30/01/2018

See also National Healthcare Agreement: PI 15-Effective management of diabetes, 2017

Health!, Superseded 30/01/2018