

# **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, 2014**

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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, 2014

## Identifying and definitional attributes

<b>Metadata item type:</b>	Indicator
<b>Indicator type:</b>	Indicator
<b>Short name:</b>	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, 2014
<b>METEOR identifier:</b>	517699
<b>Registration status:</b>	<a href="#">Health</a> , Superseded 14/01/2015
<b>Description:</b>	Proportion of people with Type 2 diabetes.
<b>Indicator set:</b>	<a href="#">National Healthcare Agreement (2014)</a> <a href="#">Health</a> , Superseded 14/01/2015
<b>Outcome area:</b>	<a href="#">Prevention</a> <a href="#">Health</a> , Standard 07/07/2010

## Collection and usage attributes

<b>Population group age from:</b>	25 years
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**Computation description:** Proxy measure:

The National Health Measures Survey component of the 2011–13 Australian Health Survey (cat. no. [4364.0.55.005](#)) 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**

**Data Element**

Persons with *known diabetes* (Type 2) or *newly diagnosed diabetes*.

**Data Source**

[ABS Australian Health Survey \(AHS\), 2011-13](#)

**Guide for use**

ABS National Health Measures Survey - respondents voluntarily provided blood and urine samples, which were then analysed for specific chronic disease and nutrition biomarkers.

**Denominator:** Population aged 25 years and over.

**Denominator data elements:**

**Data Element / Data Set**

[Person—age, total years N\[NN\]](#)

**Data Source**

[ABS Australian Health Survey \(AHS\), 2011-13](#)

**Guide for use**

Data source type: Survey

**Data Element / Data Set**

[Person—age, total years N\[NN\]](#)

**Data Source**

[ABS Australian Aboriginal and Torres Strait Islander Health Survey \(AATSIHS\), 2012-13](#)

**Guide for use**

Data source type: Survey

**Disaggregation:**

2011–12—State and territory, by sex.

2011–12—Nationally, by:

- remoteness (Australian Statistical Geography Standard (ASGS) Remoteness Structure).
- 2011 Socio-Economic Indexes for Areas (SEIFA) Index of Relative Socio-economic Disadvantage (IRSD) quintiles.

**Disaggregation data elements:**

**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](#)

**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](#)

**Comments:** Most recent data available for 2014 Council of Australian Governments (COAG) Reform Council (CRC) report: 2011–12.

Results for the Aboriginal and Torres Strait Islander population will be available in 2014.

The baseline measure of 7.1 per cent is calculated from the [Australian Diabetes, Obesity and Lifestyle Study conducted in 1999–2000](#). 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:** Real

**Unit of measure:** Person

## Indicator conceptual framework

**Framework and dimensions:** [Health conditions](#)

## Data source attributes

**Data sources:**

### Data Source

[ABS Australian Health Survey \(AHS\), 2011-13](#)

#### Frequency

Every 3 years

#### Data custodian

Australian Bureau of Statistics

### Data Source

[ABS Australian Aboriginal and Torres Strait Islander Health Survey \(AATSIHS\), 2012-13](#)

#### Frequency

Every 6 years

#### Data custodian

Australian Bureau of Statistics

## Accountability attributes

**Reporting requirements:** National Healthcare Agreement

**Organisation responsible for providing data:** Australian Bureau of Statistics

**Benchmark:**

**Further data development / collection required:** Specification: Minor work required, the measure needs minor work to meet the intention of the indicator.

## Source and reference attributes

**Reference documents:** Dunstan et al. 2002, The Australian Diabetes, Obesity and Lifestyle Study (AusDiab) – methods and response rates, Diabetes Research and Clinical Practice 57:119–129.

## 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, 2013 Health](#), Superseded 30/04/2014

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, 2015 Health](#), Superseded 08/07/2016

See also [National Healthcare Agreement: PI 10-Prevalence of Type 2 diabetes, 2014 Health](#), Superseded 14/01/2015

See also [National Healthcare Agreement: PI 15-Effective management of diabetes, 2014 Health](#), Superseded 14/01/2015