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, 2021

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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, 2021

# 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, 2021

METEOR identifier: 725838

**Registration status:** <u>Health</u>, Standard 03/07/2020

**Description:** Proportion of people with Type 2 diabetes.

Indicator set: National Healthcare Agreement (2021)

Health, Standard 19/11/2020

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 (ABS 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 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 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**

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-

#### **Data Element**

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-

## **Data Element**

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

## Data Element

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 and over.

# Denominator data elements:

## Data Element / Data Set

**Data Element** 

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

**Data Element** 

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-sex, code N

## **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—Indigenous status, code N

## **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 2021 National Healthcare Agreement performance reporting: 2011–12 (total population, non-Indigenous: AHS); 2012–13 (Indigenous

only: AATSIHS).

NO NEW DATA FOR 2021 REPORTING.

The baseline measure of 7.1% is calculated from the <u>Australian Diabetes</u>, <u>Obesity and Lifestyle Study</u>conducted in 1999–2000. Note that this number was agestandardised 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 COAG Reform Council report are not comparable to the baseline measure of 7.1%.

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 Australian Bureau of Statistics

for providing data:

Benchmark:

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%) by 2023.

Refer National Healthcare Agreement 2012.

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

## Source and reference attributes

Reference documents: Australian Bureau of Statistics (ABS) 2013. Australian Health Survey: Biomedical

Results for Chronic Diseases, 2011–12, ABS cat. no. 4364.0.55.005. Canberra:

ABS. Viewed 11 May 2020,

https://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/

4364.0.55.005main+features12011-12

Baker Heart & Diabetes Institute n.d. About AusDiab. Melbourne: Baker Heart & Diabetes Institute. Viewed 11 May 2020, <a href="https://www.baker.edu.au/ausdiab/">https://www.baker.edu.au/ausdiab/</a>

Council of Australian Governments 2012. National Healthcare Agreement (effective

25 July 2012). Viewed 5 May 2020,

http://www.federalfinancialrelations.gov.au/content/npa/health/

archive/healthcare national-agreement.pdf

# 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, 2020

Health, Standard 13/03/2020

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, 2022

Health, Standard 24/09/2021

See also National Healthcare Agreement: PI 10—Prevalence of Type 2 diabetes, 2021

Health, Standard 03/07/2020

See also National Healthcare Agreement: PI 15-Effective management of diabetes, 2021

Health, Standard 03/07/2020