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

Exported from METEOR (AIHW's Metadata Online Registry)

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

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, 2022
METEOR identifier:	740904
Registration status:	Health, Standard 24/09/2021
Description:	Proportion of people with Type 2 diabetes.
Indicator set:	National Healthcare Agreement (2022) Health, Standard 24/09/2021
Outcome area:	Prevention Health, Standard 07/07/2010

Collection and usage attributes

Population group age from:	25 years

Computation description: Proxy measure:

The [National Health Measures Survey (NHMS) component of the 2011–13 Australian Health Survey](#) included a fasting plasma glucose test. Participation in the NHMS component was voluntary.

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.

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 are 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: Crude rate: 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 2011) 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 2022 National Healthcare Agreement performance reporting: 2011–12 (total population, non-Indigenous: AHS); 2012–13 (Indigenous only: AATSIHS). |

NO NEW DATA FOR 2022 REPORTING.

The baseline measure of 7.1% 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 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%.

Further details on the prevalence of Type 2 diabetes among Indigenous Australians are available from the Aboriginal and Torres Strait Islander Health Performance Framework (measure 1.09: Diabetes and measure 3.05: Chronic disease management).

Representational attributes

Representation class:	Percentage
Data type:	Real
Unit of measure:	Person
Format:	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:	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 / collection required:	Specification: Final, the measure meets the intention of the indicator.

Source and reference attributes

Reference documents: Australian Bureau of Statistics (ABS) (Reference period: 2011–12). *Australian Health Survey: Biomedical Results for Chronic Diseases.* ABS Website. Viewed 19 February 2021, https://www.abs.gov.au/statistics/health/health-conditions-and-risks/australian-health-survey-biomedical-results-chronic-diseases/latest-release

Australian Institute of Health and Welfare (AIHW) 2020. *Aboriginal and Torres Strait Islander Health Performance Framework*. Canberra: AIHW. Viewed 19 February 2021, https://indigenoushpf.gov.au/

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

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, 2021
Health, Standard 03/07/2020

See also National Healthcare Agreement: PI 10–Prevalence of Type 2 diabetes, 2022
Health, Standard 24/09/2021

See also National Healthcare Agreement: PI 15–Effective management of diabetes, 2022
Health, Standard 24/09/2021