

National summary of the 2003 and 2004 jurisdictional reports against the Aboriginal and Torres Strait Islander health performance indicators

March 2006

Australian Institute of Health and Welfare
Canberra

AIHW cat. no. IHW 16

© Australian Institute of Health and Welfare 2006

This work is copyright. Apart from any use as permitted under the *Copyright Act 1968*, no part may be reproduced without prior written permission from the Australian Institute of Health and Welfare. Requests and enquiries concerning reproduction and rights should be directed to the Head, Business Promotion and Media, Australian Institute of Health and Welfare, GPO Box 570, Canberra ACT 2601.

A complete list of the Institute's publications is available from Business Promotion and Media, Australian Institute of Health and Welfare, GPO Box 570, Canberra ACT 2601, or via the Institute's web site (<http://www.aihw.gov.au>).

ISBN 1 74024 383 8

Suggested citation

Standing Committee on Aboriginal and Torres Strait Islander Health and Statistical Information Management Committee 2006. National summary of the 2003 and 2004 jurisdictional reports against the Aboriginal and Torres Strait Islander health performance indicators. AIHW cat. no. IHW 16. Canberra: Australian Institute of Health and Welfare.

Australian Institute of Health and Welfare

Board Chair

Hon. Peter Collins, AM, QC

Any enquiries about or comments on this publication should be directed to:

Dr Fadwa Al-Yaman

Aboriginal and Torres Strait Islander Health and Welfare Unit

Australian Institute of Health and Welfare

GPO Box 570

Canberra ACT 2601

Phone: (02) 6244 1146

E-mail: atsihwu@aihw.gov.au

Published by Australian Institute of Health and Welfare

Printed by Pirion Pty Ltd

Foreword

This report is the second report against the refined set of indicators endorsed by the Australian Health Ministers' Advisory Council (AHMAC) in 2000, and the fifth time that all jurisdictions have reported against a set of national performance indicators for Aboriginal and Torres Strait Islander health. AHMAC produces these reports in order to inform policy makers and senior government officials on aspects of, and trends in, Aboriginal and Torres Strait Islander health. The Australian Institute of Health and Welfare compiled this report for the Standing Committee on Aboriginal and Torres Strait Islander Health (SCATSIH) on behalf of AHMAC.

The report demonstrates the need for ongoing, significant and concerted action on factors that contribute to the general health and wellbeing of Aboriginal and Torres Strait Islander peoples. It also shows that, while data quality has improved, further work remains to be done in this area, especially in the jurisdictions where the quality of Indigenous identification is not adequate for statistical reporting.

AHMAC, through SCATSIH and the National Advisory Group on Aboriginal and Torres Strait Islander Health Information and Data, is actively supporting data development work to improve the quality of key health performance indicators. Work is also underway to improve the way we monitor health system performance for Aboriginal and Torres Strait Islander Australians. SCATSIH is advising AHMAC on the policy context and implications of this report.

I am pleased to present this report on behalf of SCATSIH, and would like to take this opportunity to commend the many people involved in preparing the information provided.

Robert Griew

Chair

Standing Committee on Aboriginal and Torres Strait Islander Health

December 2005

Acknowledgments

This report was prepared by a project team within the Australian Institute of Health and Welfare. The team comprised Fadwa Al-Yaman and Michelle Gourley. The team acknowledges that the successful completion of this report owes much to a number of committees, agencies and individuals.

Our thanks go to members of the following committees: the Standing Committee on Aboriginal and Torres Strait Islander Health, the National Advisory Group on Aboriginal and Torres Strait Islander Health Information and Data (NAGATSIHID) and the Statistical Information Management Committee (SIMC).

Specific thanks are also extended to the following people who coordinated data collection within their jurisdiction or agency on these National Performance Indicators: Anne Leverton, Carey Smith, Debra Reid, Kirrily Harrison and Jilska Payoe (Office of Aboriginal and Torres Strait Islander Health, Australian Government Department of Health and Ageing), Ray Mahoney (New South Wales Health Department), Mary Sullivan (Victorian Department of Human Services), Don Lewis and Melissa Browning (Queensland Health), Daniel McAullay (Western Australian Department of Health), Leanne Ennis (South Australian Department of Health), Carol Owen and Jeanette James (Tasmanian Department of Health and Human Services), Kate Turner (Australian Capital Territory Department of Health and Community Care), Richard Inglis and Fred Stacey (Northern Territory Health Services), Sean Tarrant and Vicki Bennett (Health Insurance Commission), Dan Black and Rita Scholl (Australian Bureau of Statistics), and Lawrence Doherty and Jenny Morison (Department of Education, Science and Training).

Contents

- Foreword..... iii**
- Acknowledgments..... iv**
- List of tables viii**
- List of figures xv**
- Executive summary xvi**
- Introduction..... 1**
 - Background..... 1
 - The conceptual framework..... 2
 - Quality and limitations of the indicators..... 2
 - Future reports..... 3
 - Structure of the report..... 3
- Government inputs 4**
 - Introduction..... 5
 - Indicator 1. Efforts to improve identification of Aboriginal and Torres Strait
Islander people in data collections 6
 - Indicator 2. Government expenditure on health services for Aboriginal and
Torres Strait Islander people 21
 - Indicator 4. Government expenditure on, and description of, selected health
promotion programs..... 29
- Determinants of health – social equity..... 46**
 - Introduction..... 47
 - Indicator 5. Life expectancy at birth..... 48
 - Indicator 6. Infant mortality rate 50
 - Indicator 7. Income poverty 52
 - Indicator 8. Completed secondary school education..... 54
 - Indicator 9. Employment status..... 56
 - Indicator 10. Housing with utilities..... 58
 - Indicator 11. People in prison custody 60
 - Indicator 12. The development of governance capacity in health 61
 - Indicator 13. Aboriginal and Torres Strait Islander representation on health/
hospital boards 68
 - Indicator 14. Reporting of complaints in hospitals 72

Determinants of health – access to services.....	77
Introduction.....	78
Indicator 15. Aboriginal and Torres Strait Islander community-controlled health services.....	79
Indicator 16. Distance to a primary health care centre	81
Indicator 17. Distance to a hospital	83
Indicator 18. Access to primary health care services – small homeland communities and outstations	84
Indicator 19. Management of key conditions.....	86
Indicator 20. Aboriginal and Torres Strait Islander people in the health workforce	98
Indicator 21. Higher education and training in key health professions.....	107
Indicator 22. Workforce availability in primary health care services.....	115
Indicator 23. Workforce availability in hospitals	118
Indicator 24. Cross-cultural training for hospital staff	120
Determinants of health – risk markers.....	124
Introduction.....	125
Indicator 25. Pap smear screening.....	126
Indicator 26. Childhood immunisation rates	130
Indicator 27. Coverage of adult pneumococcal vaccine	132
Indicator 28. Low-birthweight infants	133
Indicator 29. Smoking prevalence	135
Indicator 30. Alcohol consumption.....	139
Indicator 31. Overweight and obesity.....	143
Indicator 32. Child abuse and neglect.....	144
Indicator 35. Injuries presenting to hospital accident and emergency facilities	146
Outcomes for people.....	148
Introduction.....	150
Indicator 37. Notification rates for selected vaccine-preventable diseases.....	152
Indicator 38. Notification rates for meningococcal disease	154
Indicator 39. Notification rates for sexually transmissible diseases	156
Indicator 40. Ratios for all hospitalisations	159
Indicator 41. Hospitalisation ratios for circulatory diseases.....	162
Indicator 42. Hospitalisation ratios for injury and poisoning	169
Indicator 43. Hospitalisation ratios for respiratory diseases and lung cancer	180

Indicator 44. Hospitalisation ratios for diabetes.....	187
Indicator 45. Hospitalisation ratios for tympanoplasty associated with otitis media.....	194
Indicator 46. Hospitalisation ratios for mental health conditions.....	196
Indicator 47. Children’s hearing loss.....	203
Indicator 48. Stillbirths to Aboriginal and Torres Strait Islander mothers	206
Indicator 49. Early adult death.....	207
Indicator 50. Age- and sex-specific all-cause death rates and ratios	209
Indicator 51. Standardised mortality ratios for all causes.....	212
Indicator 52. Standardised mortality ratios for circulatory diseases	215
Indicator 53. Standardised mortality ratios for injury and poisoning.....	222
Indicator 54. Standardised mortality ratios for respiratory diseases and lung cancer ...	233
Indicator 55. Standardised mortality ratios for diabetes	240
Indicator 56. Standardised mortality ratios for cervical cancer.....	247
Appendix 1.....	249
Abbreviations.....	257
Symbols.....	259
References.....	260

List of tables

Table 2.1: Annual expenditure and expenditure per person by the Australian Government and state/territory governments, by source of funds and Indigenous status, Australia, 2001-02.....	23
Table 2.2: Estimated annual and per person state/territory expenditure on health services, by program, 2001-02	25
Table 4.1: Expenditure on health promotion programs targeting Aboriginal and Torres Strait Islander people, 2002-03 and 2003-04.....	30
Table 5.1: Experimental estimates of life expectancy at birth, by Indigenous status, sex and state and territory.....	49
Table 7.1: Proportion of households with household size-adjusted weekly incomes below the Australian 20th and 50th percentiles, by Indigenous status and state and territory, 2002	52
Table 8.1: Number and proportion of people aged 20-24 years who completed Year 12 or equivalent, by sex, Indigenous status and state and territory, 2002.....	54
Table 9.1: Labour force status of Indigenous and non-Indigenous persons aged 20-64 years, by state and territory, 2002.....	56
Table 10.1: Number and proportion of permanent dwellings in discrete Indigenous communities by whether connected to water and electricity supply and sewerage systems, by state and territory, 2001	58
Table 11.1: Rate of Indigenous imprisonment per 100,000, by state and territory, 30 June 2004.....	60
Table 15.1: Number of and expenditure on Aboriginal and Torres Strait Islander primary health care services, 2002-03 and 2003-04	80
Table 16.1: Discrete Indigenous communities by distance to nearest community health clinic, for selected states and territories, 2001	81
Table 17.1: Discrete Indigenous communities by distance to the nearest acute hospital, for selected states and territories, 2001	83
Table 18.1: Number and proportion of communities with less than 50 people and more than 50 km from a community health clinic, by access to selected health professionals, 2001	85
Table 20.1: Aboriginal and Torres Strait Islander employment in the health workforce, by state and territory, 2001	99
Table 20.2: Aboriginal and Torres Strait Islander employment in the health workforce, by state and territory, 2003-04	104
Table 21.1: Number of Aboriginal and Torres Strait Islander people qualifying or currently enrolled in vocational education, 2003	108
Table 21.2: Number of Aboriginal and Torres Strait Islander people qualifying or currently enrolled in higher education, 2003	109

Table 21.3: Number of Aboriginal and Torres Strait Islanders qualifying or currently in vocational education, by state and territory, 2003	110
Table 21.4: Number of Aboriginal and Torres Strait Islander people qualifying or currently in higher education, by state and territory, 2003.....	111
Table 22.1: Full-time equivalent positions employed by Australian Government-funded Aboriginal and Torres Strait Islander primary health care services, 30 June 2003.....	116
Table 23.1: Medical workforce numbers in acute care hospitals where more than 25% of separations are for Aboriginal and Torres Strait Islander people, selected states and territories, 2003-04	119
Table 26.1: The proportion of Indigenous children who were fully immunised at 1, 2 and 6 years of age, for selected states and territories, 30 June 2003 and 30 June 2004	130
Table 27.1: Vaccination coverage estimates for influenza and pneumococcal disease for Indigenous and non-Indigenous adults, 2001	132
Table 29.1: Smoking status of Indigenous adults aged 18 years and over, by age, sex and state and territory, 2002	136
Table 30.1: Indigenous persons aged 15 years and over: by whether consumed alcohol and drank at risky/high-risk levels, by age and sex, 2002	141
Table 31.1: Weight status: Indigenous adults aged 18 years and over based on body mass index, Australia, 2001	143
Table 32.1: Children in child protection substantiations: number and rates per 1,000 children, by Indigenous status, by state and territory, 2003-04	144
Table 35.1: Aboriginal and Torres Strait Islander presentations at hospital accident and emergency facilities, for selected states and territories, by cause of injury, 2002-03 and 2003-04	147
Table 37.1: Number and rate per 100,000 of notifications for pertussis among Indigenous Australians, by state and territory, 2003 and 2004.....	153
Table 38.1: Number and rate per 100,000 of notifications for meningococcal disease among Indigenous Australians, by state and territory, 2003 and 2004	154
Table 39.1: Number of sexually transmissible diseases among Aboriginal and Torres Strait Islander people aged 15-54 years, by sex, for selected states and territories, 2003 and 2004	157
Table 39.2: Rate per 100,000 of sexually transmissible diseases among Aboriginal and Torres Strait Islander people aged 15-54 years, by sex, for selected states and territories, 2003 and 2004	158
Table 40.1: Hospitalisations for persons aged 0-74 years, by Indigenous status and sex, by state and territory, 2002-03 to 2003-04.....	160
Table 40.2: Age-standardised hospitalisation rates and standardised hospital separation ratios for persons aged 0-74 years, by Indigenous status and sex, by state and territory, 2002-03 to 2003-04.....	161
Table 41.1: Hospitalisations for circulatory disease for persons aged 0-74 years, by Indigenous status and sex, by state and territory, 2002-03 to 2003-04.....	163

Table 41.2: Age-standardised hospitalisation rates and standardised hospital separation ratios for circulatory disease for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04	164
Table 41.3: Hospitalisations for coronary heart disease for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04.....	165
Table 41.4: Age-standardised hospitalisation rates and standardised hospital separation ratios for coronary heart disease for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04.....	166
Table 41.5: Hospitalisations for rheumatic fever and heart disease for persons aged 0–74 years by Indigenous status and by sex, by state and territory, 2002–03 to 2003–04	167
Table 41.6: Age-standardised hospitalisation rates and standardised hospital separation ratios for rheumatic fever and heart disease for persons aged 0–74 years, by Indigenous status, sex and state and territory, 2002–03 to 2003–04.	168
Table 42.1: Hospitalisations for injury and poisoning for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04.....	170
Table 42.2: Age-standardised hospitalisation rates and standardised hospital separation ratios for injury and poisoning for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04	171
Table 42.3: Hospitalisations for transport accidents for persons aged 0–74 years by Indigenous status and sex, by state and territory, 2002–03 to 2003–04.....	172
Table 42.4: Age-standardised hospitalisation rates and standardised hospital separation ratios for transport accidents for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04	173
Table 42.5: Hospitalisations for other accidents for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 and 2003–04.....	174
Table 42.6: Age-standardised hospitalisation rates and standardised hospital separation ratios for other accidents for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04.....	175
Table 42.7: Hospitalisations for self-harm for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04	176
Table 42.8: Age-standardised hospitalisation rates and standardised hospital separation ratios for self-harm for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04.....	177
Table 42.9: Hospitalisations for assault for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04	178
Table 42.10: Age-standardised hospitalisation rates and standardised hospital separation ratios for assault for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04.....	179
Table 43.1: Hospitalisations for respiratory diseases for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04.....	181

Table 43.2: Age-standardised hospitalisation rates and standardised hospital separation ratios for respiratory diseases for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04	182
Table 43.3: Hospitalisations for a principal diagnosis of pneumonia for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04	183
Table 43.4: Age-standardised hospital separation rates and standardised hospital separation ratios for a principal diagnosis of pneumonia for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04.....	184
Table 43.5: Hospitalisations for lung cancer for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04.....	185
Table 43.6: Age-standardised hospital separation rates and standardised hospital separation ratios for lung cancer for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04.....	186
Table 44.1: Hospitalisations for diabetes as the principal diagnosis for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04.	188
Table 44.2: Age-standardised hospitalisation rates and standardised hospital separation ratios for diabetes as the principal diagnosis for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04.....	189
Table 44.3: Hospitalisations for diabetes as an associated diagnosis for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04	190
Table 44.4: Age-standardised hospitalisation rates and standardised hospital separation ratios for diabetes as an associated diagnosis for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04.....	191
Table 44.5: Hospitalisations for diabetes as a principal or an associated diagnosis for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 and 2003–04	192
Table 44.6: Age-standardised hospitalisation rates and standardised hospital separation ratios for diabetes as a principal or associated cause for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04	193
Table 45.1: Hospitalisations for tympanoplasty and otitis media ^(a) for children aged 0–14 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04	194
Table 45.2: Age-standardised hospitalisation rates and standardised hospital separation ratios for tympanoplasty and otitis media, for children aged 0–14 years, by Indigenous status and sex, by state and territory, 2002–03 and 2003–04.....	195
Table 46.1: Hospitalisations for depressive disorders for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 and 2003–04.....	197
Table 46.2: Age-standardised hospitalisation rates and standardised hospital separation ratios for depressive disorders for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04	198
Table 46.3: Hospitalisations for anxiety disorders for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04.....	199

Table 46.4: Age-standardised hospitalisation rates and standardised hospital separation ratios for anxiety disorders for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04.	200
Table 46.5: Hospitalisations for substance use disorders for persons aged 0–74 years, by Indigenous status, sex and state and territory, 2002–03 to 2003–04.	201
Table 46.6: Age-standardised hospitalisation rates and standardised hospital separation ratios for substance use disorders for persons aged 0–74 years, by Indigenous status and sex, by state and territory, 2002–03 to 2003–04.	202
Table 49.1: Experimental estimates of the probability of a person aged 20 years dying before age 55 years, for the Indigenous and total Australian populations, by sex	207
Table 50.1: Number of deaths, by age and sex, for selected states and territories, 2001–03	210
Table 50.2: Age- and sex-specific death rates per 1,000 and rate ratios for all causes, for selected states and territories, 2001–03	211
Table 51.1: Number of deaths among those aged less than 75 years, by Indigenous status and sex, for selected states and territories, 2001–03	212
Table 51.2: Age-standardised mortality rates and standardised mortality ratios, by Indigenous status and sex, for selected states and territories, 2001–03	213
Table 52.1: Number of deaths from circulatory disease among those aged less than 75 years, by Indigenous status and sex, for selected states and territories, 2001–03	216
Table 52.2: Age-standardised mortality rates and standardised mortality ratios for death from circulatory diseases, by Indigenous status and sex, for selected states and territories, 2001–03	217
Table 52.3: Number of deaths from coronary heart disease ^(a) among those aged less than 75 years, by Indigenous status and sex, for selected states and territories, 2001–03	218
Table 52.4: Age-standardised mortality rates and standardised mortality ratios for death from coronary heart disease, by Indigenous status and sex, for selected states and territories, 2001–03	219
Table 52.5: Number of deaths from rheumatic heart disease among those aged less than 75 years, by Indigenous status, for selected states and territories, 2001–03	220
Table 52.6: Age-standardised mortality rates and standardised mortality ratios for death from rheumatic heart disease, by Indigenous status, and selected states and territories, 2001–03	220
Table 53.1: Number of deaths from injury and poisoning ^(a) among those aged less than 75 years, by Indigenous status and sex, for selected states and territories, 2001–03	223
Table 53.2: Age-standardised mortality rates and standardised mortality ratios for death from injury and poisoning, by Indigenous status and sex, for selected states and territories, 2001–03	224
Table 53.3: Number of deaths from transport accidents among those aged less than 75 years, by Indigenous status and sex, for selected states and territories, 2001–03	225
Table 53.4: Age-standardised mortality rates and standardised mortality ratios for death from transport accidents, by Indigenous status and sex, for selected states and territories, 2001–03	226

Table 53.5: Number of deaths from other accidents among those aged less than 75 years, by Indigenous status and sex, for selected states and territories, 2001–03	227
Table 53.6: Age-standardised mortality rates and standardised mortality ratios for death from other accidents, by Indigenous status and sex, for selected states and territories, 2001–03.....	228
Table 53.7: Number of deaths from self-harm among those aged less than 75 years, by Indigenous status and sex, for selected states and territories, 2001–03	229
Table 53.8: Age-standardised mortality rates and standardised mortality ratios for death from self-harm, by Indigenous status and sex, for selected states and territories, 2001–03	230
Table 53.9: Number of deaths from assault among those aged less than 75 years, by Indigenous status and sex, for selected states and territories, 2001–03	231
Table 53.10: Age-standardised mortality rates and standardised mortality ratios for death from assault, by Indigenous status and sex, for selected states and territories, 2001–03	232
Table 54.1: Number of deaths from respiratory disease among those aged less than 75 years, by Indigenous status and sex, for selected states and territories, 2001–03	234
Table 54.2: Age-standardised mortality rates and standardised mortality ratios for death from respiratory diseases, by Indigenous status and sex, for selected states and territories, 2001–03.....	235
Table 54.3: Number of deaths from pneumonia among those aged less than 75 years, by Indigenous status and sex, for selected states and territories, 2001–03	236
Table 54.4: Age-standardised mortality rates and standardised mortality ratios for death from pneumonia, by Indigenous status and sex, for selected states and territories, 2001–03	237
Table 54.5: Number of deaths from lung cancer among those aged less than 75 years, by Indigenous status and sex, for selected states and territories, 2001–03	238
Table 54.6: Age-standardised mortality rates and standardised mortality ratios for death from lung cancer, by Indigenous status and sex, for selected states and territories, 2001–03	239
Table 55.1: Number of deaths from diabetes as an underlying cause among those aged less than 75 years, by Indigenous status and sex, for selected states and territories, 2001–03	241
Table 55.2: Age-standardised mortality rates and standardised mortality ratios for death from diabetes ^(a) as an underlying cause, by Indigenous status and sex, for selected states and territories, 2001–03	242
Table 55.3: The number of deaths from diabetes as an associated cause for people aged less than 75 years, by Indigenous status and sex, for selected states and territories, 2001–03	243
Table 55.4: Age-standardised mortality rates and standardised mortality ratios for diabetes as an associated cause, by Indigenous status and sex, for selected states and territories, 2001–03.....	244

Table 55.5: The number of deaths from diabetes as an underlying or an associated cause for people aged less than 75 years, by Indigenous status and sex, for selected states and territories, 2001–03	245
Table 55.6: Age-standardised mortality rates and standardised mortality ratios for diabetes as an underlying or an associated cause, by Indigenous status and sex, for selected states and territories, 2001–03	246
Table 56.1: Number of deaths from cervical cancer among females aged less than 75 years, by Indigenous status, for selected states and territories, 2001–03	247
Table 56.2: Age-standardised mortality rates and rate ratios for death from cervical cancer, by Indigenous status, for selected states and territories, 2001–03	248
Table A.1: Summary of quantitative indicators	250

List of figures

Figure 6.1: Infant mortality rates, by Indigenous status of the mother, selected states and territories, 2001–03 50

Figure 6.2: Infant mortality rates in Australia, New Zealand, Canada and the United States, by Indigenous status, selected years 51

Figure 28.1: Proportion of low-birthweight babies, by mother’s Indigenous status and state and territory, 2000–02 134

Figure 29.1: Current and ex-smokers, by state and territory, Indigenous Australians aged 18 years and over, 2002 137

Figure 29.2: Current smokers, by age and sex, Indigenous Australians aged 18 years and over, 2002 138

Figure 30.1: Proportion of drinkers who consumed alcohol at risky/high-risk levels in the 2 weeks prior to survey, by sex and age, Indigenous Australians, 2002 140

Figure 30.2: Proportion who consumed alcohol in last 12 months, by state and territory, Indigenous Australians aged 15 years and over, 2002 142

Figure 48.1: Rates of stillbirths, by mother’s Indigenous status, by state and territory, 2000–02 206

Figure 51.1: Age standardised mortality rates of people in Australia, New Zealand, the United States and Canada, by Indigenous status..... 214

Executive summary

This is the second national summary report on the refined set of 56 health performance indicators for Aboriginal and Torres Strait Islander peoples. The indicators are designed to provide an assessment of whether the health of Indigenous people is improving and to highlight problem areas that Australia's health system should address as high priorities.

This report, like many previous reports, draws attention to the relatively poor quality of the data on the health of Aboriginal and Torres Strait Islander peoples. This means that comprehensive comparisons between states and territories are not yet possible. This executive summary is intended to highlight particular areas that warrant further attention.

General health

Life expectancy at birth is significantly lower for Aboriginal and Torres Strait Islander people than for all Australians (Indicator 5). Also, the probability of a 20-year-old person dying before his or her 55th birthday is 2 to 6 times higher for Indigenous Australians than for all Australians (Indicator 49). The proportion of births to Indigenous mothers that are low birthweight is twice the rate observed in non-Indigenous mothers (Indicator 28). The infant mortality rate in selected jurisdictions, despite showing declines over the last 10 years, continues to be 3 times that of the non-Indigenous population (Indicator 6).

Diseases and conditions

The major causes of early adult deaths in the Aboriginal and Torres Strait Islander population are chronic diseases such as diabetes, circulatory diseases (including rheumatic heart disease), cancer and respiratory system diseases. Death rates from diabetes are between 7 and 20 times as high as the rates in the non-Indigenous population (Indicator 55). Death rates from circulatory system diseases in the Indigenous population are 4 to 5 times the rate in the non-Indigenous population (Indicator 52). Death rates from respiratory diseases are between 5 and 6 times as high, and death rates from lung cancer are between 2 and 3 times as high (Indicator 54).

Rates of infection with chlamydia, gonococcus and syphilis are also high (Indicator 39). Sexually transmitted diseases are avoidable, and untreated sexually transmitted diseases can lead to serious complications and the continued spread of the diseases.

Social and emotional wellbeing is an important area for Aboriginal and Torres Strait Islander peoples. Mortality from self-harm is 2 to 4 times the rate in the non-Indigenous population, and morbidity is 2 to 3 times as high (Indicators 53 and 42). Hospitalisation rates for depressive and anxiety disorders are between 1 and 3 times the rates in the non-Indigenous population (Indicator 46).

Across the states and territories with the more complete coverage of hospitalisations and deaths data, Indigenous people are hospitalised for injury at between 3 and 4 times the rates of non-Indigenous people, and die from injury at between 2 and 4 times the rates of non-Indigenous people (Indicators 42 and 53). Prominent among injuries leading to hospitalisation or death is assault – hospitalisations for Indigenous people are between 12 and 27 times the rate for non-Indigenous people, while death rates for Indigenous people are

between 5 and 12 times the rate for non-Indigenous people (Indicators 42 and 53). For injury resulting from assault, just over half of Indigenous hospitalisations are female, compared with less than one-quarter of non-Indigenous hospitalisations.

Health risk factors

A large proportion of Indigenous people are exposed to behaviours that place their health at risk in the short and long term. Approximately 48% of Indigenous adults are overweight or obese (Indicator 31), 53% are current smokers (Indicator 29), and 69% consume alcohol. Of those who consume alcohol, 50% consume it at risky or high-risk levels in the last 12 months (Indicator 30). The rate of hospitalisation for substance use disorders is 5 to 8 times higher in the Indigenous population (Indicator 46).

Education, employment and the health workforce

Indigenous Australians are much less likely to complete secondary school education (Indicator 8) than non-Indigenous Australians and are 3 times as likely to be unemployed (Indicator 9). Aboriginal and Torres Strait Islander people are underrepresented in the Australian professional health workforce, representing 1.3% of the health workforce (Indicator 20). Aboriginal and Torres Strait Islander people who are training or have qualified in key health professions are also underrepresented (Indicator 21).

Health system capacity

A number of the indicators provide measures of the current capacity of the Australian health system to provide health promotion and primary health care for Indigenous Australians (Indicators 2, 4 and 20).

Just over \$1,788 million was estimated to have been spent on Indigenous health in 2001–02, an increase of \$432 million from 1998–99. This was 2.8% of total national health expenditure in 2001–02. Average expenditure was \$3,901 per Indigenous person compared to \$3,308 per person spent on all other Australians – a ratio of \$1.18 for every \$1 spent on other Australians. While the per person spending on health services for Indigenous people is slightly higher than for other Australians, any analysis of per person spending on health services for Indigenous people should take into account the comparatively poor health of Indigenous people (Indicator 2).

In relation to expenditure on health promotion programs for Aboriginal and Torres Strait Islander people, there is considerable variation across states and territories. Expenditure in 2003–04 ranged from nil in Tasmania to \$6 million in Victoria (Indicator 4). In relation to overall expenditure on health care, the ratios of expenditure on Indigenous to non-Indigenous Australians under the Medicare Benefits Schedule and the Pharmaceutical Benefits Scheme were just 0.40 and 0.32 respectively (Indicator 2). These programs are a principal route for the delivery of primary health care to both Indigenous and non-Indigenous Australians. The ratio of Indigenous to non-Indigenous expenditure for all programs funded and administered by the Australian Government was 0.86.

In 2001, only 0.3% of doctors and 0.5% of nurses were Indigenous (Indicator 20), although the numbers are increasing. Another way to improve access to services is to reduce the cultural barriers that confront Indigenous people seeking treatment in mainstream health services. A considerable amount of variation exists between states and territories in the cultural awareness training that is provided to professional staff (Indicator 24).

Data limitations

A common problem highlighted in the report is the poor quality of information, especially in the identification of Indigenous people, with Indigenous status being not recorded or wrongly recorded in some datasets. The identification of Indigenous people in birth and death registrations, primary health care service records and hospital records remains a significant data quality problem (Indicator 1). While progress is being made, continued effort is needed in states and territories to improve and maintain Indigenous identification in the different data collections.