

# NHWI News

NATIONAL HEALTH AND WELFARE INFORMATION NEWS • NUMBER 14 • DECEMBER 1998  
From the Australian Institute of Health and Welfare

## Rural health and breast cancer reports released

AIHW reports were in the news in the pre-Christmas period, with Ministerial launches of *Health in Rural and Remote Australia* (1 December 1998), and *Breast and Cervical Cancer Screening in Australia 1996-97* together with *Breast Cancer Survival in Australian Women 1982-1994* (3 December 1998).

The *Health in Rural and Remote Australia* report was jointly launched at Parliament House, Canberra, by the Minister for Health and Aged Care, Dr Michael Wooldridge, and the Minister for Transport and Regional Services (John Anderson).

In his address Dr Wooldridge spoke of the government's concerted effort and intent to 'end the decades of neglect that people in rural and remote parts of Australia have suffered'. He said the report provided critical evidence through 'hard baseline data that shows the state of health of Australians living right across Australia'. The Minister reaffirmed his commitment to primary preventive measures and a public health approach as bringing major benefits to people living in rural and remote areas.

Transport and Regional Development Minister John Anderson welcomed the report, saying that it was a valuable help to him as the government develops a 'more integrated and holistic approach to delivery of services in rural Australia'. He mentioned in particular his interest in improving the road vehicle accident situation in rural areas, citing that both women and men in rural areas

outside rural centres (but not remote areas) died in road vehicle accidents at more than double the rate of those living in capital cities.

AIHW Director Richard Madden pointed to the effect of Indigenous health figures on rural and remote health as a whole, highlighting some apparently confounding results.

'Australia's Indigenous peoples make up 2% of the whole population, ranging from 1% in the metropolitan zone and 3% in the rural zone to 21% in the remote zone.'

'From the data we have, the generally poorer health of the Indigenous population has a substantial effect on overall death rates and life expectancy figures in the remote zone.'



Top (left to right): Mr John Anderson, Minister for Transport and Regional Services, Mr Ian Titulaer, AIHW, Dr Kuldeep Bhatia, AIHW, Dr Michael Wooldridge, Minister for Health and Aged Care, Dr Kathleen Strong, AIHW, Dr Richard Madden, Director, AIHW and Mr Phil Trickett, AIHW at the launch of *Health in Rural and Remote Australia*.



Bottom left (left to right): AIHW Disease Registers Unit staff attending the launch of *Breast and Cervical Cancer Screening in Australia 1996-1997* and *Breast Cancer Survival in Australian Women 1982-1994*, Janet Markey, Dr Paul Jelfs, Norma Briscoe, Carolyn Dunn, Robert Van Der Hoek and Anne-Marie Waters.

'In the remote zone the Indigenous female death rate is twice as high as that for all Australian females yet the death rate for non-Indigenous females in that zone is almost 30% lower than that for all Australian females.

'Perhaps that's as good an indication as any that rural and remote area health is **not** a simple issue'.

The *Breast and Cervical Cancer Screening in Australia 1996-97* report and *Breast Cancer Survival in Australian Women 1982-1994* report were also launched at Parliament House, also by Dr Wooldridge.

The event included addresses by Dr Heather Mitchell from the National Cervical Screening Program, and Dr Anne Krickler from the National Health and Medical Research Council's National Breast Cancer Centre.

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## From the Director

As 1998 draws to a close, it is a good time to reflect on the year that has passed and the one ahead. The Institute can feel proud of its achievements in 1998, and I'd like to share some of our highlights.

We are all delighted that Professor Jan Reid was re-appointed Chair of the AIHW Board in August of this year. Jan has made a valuable contribution to the guidance of the Institute during her first term, and we look forward to her continued contribution.

The launch of our key publications is always a highlight for the Institute. In June of this year the Institute convened a conference to coincide with the Ministerial launch of *Australia's Health 1998*. The keynote speaker was Professor Robert Beaglehole, Assistant Dean (Public Health) of the Faculty of Medicine and Health Science at the University of Auckland. The conference was attended by 160 delegates from all over Australia.

The feedback from the delegates suggested this was indeed a successful event.

The Institute has kept up its excellent record of fulfilling its mission to:

'...inform community discussion and decision making through national leadership in the development and provision of authoritative and timely information and analysis on the health and welfare of Australians'.

Recent publications include:

- *Breast and Cervical Cancer Screening in Australia 1996-97*
- *Breast Cancer Survival in Australian Women 1982-1994*
- *Nursing Labour Force 1995*
- *Health Expenditure Bulletin no. 14*
- *Health in Rural and Remote Australia*

The timeliness of reports and articles has greatly improved this year. *Australian Hospital Statistics* is a case in point. We explain in this edition of the newsletter how we intend to maintain that standard.

At the recent national conference of the Australian branch of the Data Management Association (DAMA International), the Institute, and the National Health Information Knowledgebase in particular, were awarded the Association's 1998 trophy recognising excellence in data management. Read more about the award on page 3.

There have been a number of exciting developments in the Housing area. These are covered more fully in the articles in this newsletter and well worth reading.

The Standing Committee of Community Service and Income Security Administrators (SCCSISA) endorsed the National Community Services Information Development Plan. This is a significant step as the Plan will be a framework to enable decisions to be made regarding national data collections in this field.

The Institute must now draw upon the year that's past to plan for the future. One of the first events for the new year will be developing a Corporate Plan for 1999-2002. The 1996-1999 Corporate Plan, endorsed by the AIHW Board in late 1996, has served the Institute well and the new Plan should guide the Institute into the next century.

The Institute is gearing up for the release of *Australia's Welfare 1999* later next year. Preparation is well underway, and at this stage the 1999 edition looks to be much improved on the already excellent effort.

So, I will take this opportunity to wish all *NHWI News* readers a safe and happy festive season and I look forward to your readership in 1999.

*Richard Madden, Director, AIHW*

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## NHWI News

*National Health and Welfare Information News* is the quarterly news publication of the Australian Institute of Health and Welfare. It is also published on the Institute's web site at <http://www.aihw.gov.au>

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Dr Wooldridge was pleased with the screening report's finding that participation in breast cancer screening is high in the target 50–69 years group at well over 50% in the recommended 24-month period.

The cervical screening participation figures were similarly high, with Dr Mitchell stating 'Today 8,000 women will have a Pap smear in Australia. I think that's a phenomenal number'.

The breast cancer survival report brought good news in that women diagnosed in the 1990s had better relative survival rates than women diagnosed in the 1980s. Survival rates were very good by international standards, being on a par with Scandinavian countries and better than most other European countries.

Dr Krickler congratulated the AIHW on its work on the Breast Cancer Survival report, and noted that the effects of screening programs, which were formally established in 1992, were just beginning to be seen in the survival data.

Dr Wooldridge ended his speech with high praise for the AIHW and its collaborators:

'And the second and final point is something that becomes very obvious to me as health minister. One of my friends is Jim Carlton, who was health minister for a period of time in 1982. Jim used to complain that it was very difficult to try and do anything as health minister because he didn't have any data. There were virtually no statistics, there were no base[s] on which you could make decisions. Well the AIHW has certainly changed all of that... the country is very lucky to have an organisation such as the Institute of Health and Welfare. It's very lucky to have Heather Mitchell and Anne Krickler. It's lucky to have those people that can certainly survive us in politics and put in the years and years of work that it takes to make a difference. We are making a difference. It is a wonderful success story.'



## NSW Healthy Ageing Framework 1998–2003

As a major contribution to the International Year of Older Persons (IYOP), the NSW Government launched the NSW Healthy Ageing Framework 1998–2003, and IYOP, on the United Nations International Day of Older Persons, 1 October 1998. The Framework is a significant policy initiative, developed jointly by the Ageing and Disability Department and NSW Health in consultation with 15 other government agencies and a range of peak consumer and industry organisations.

The primary goal of the Framework is 'a society where people of all ages are valued, independent, with a range of

productive occupations and interests, [one] which fully uses the skills, experience and wisdom that come with maturity'. The Framework has six key areas for action:

- improve attitudes to ageing and older people;
- increase older people's participation in community life;
- provide information about services and rights so that older people can make informed decisions;
- provide accessible and supportive neighbourhoods and communities which make it possible for older people to live as independently as possible;
- promote the independence, wellbeing and health of older people; and
- make the best use of resources.

*All NSW local libraries and their branches have been sent a copy of the Healthy Ageing Framework and multiple copies of the Framework brochure. Copies of the NSW Healthy Ageing Framework (and information about NSW services for older people) can be obtained through the Seniors Information Service, Ph. 131 244 (in NSW). For policy related enquiries on the Ageing Issues Directorate telephone (02) 9367 6962.*

## International recognition for the Knowledgebase

At the recent national conference of the Australian branch of the Data Management Association (DAMA International), the Institute, and the National Health Information Knowledgebase in particular, were awarded the Association's 1998 trophy recognising excellence in Data Management.

The award was presented by Clive Finkelstein, a member of the Technical Advisory Board of DAMA International. In presenting the award, Mr Finkelstein called the Knowledgebase a 'stunning and most remarkable achievement'.

In accepting the award on behalf of the Institute, Peter White, Head of the Institute's Information Management and Business Section, paid tribute to a number of contributors to the establishment of the Knowledgebase. These included:

- The National Health Information Management Group for their confidence in backing the development of what is now generally regarded as a world benchmark in data/metadata registries.
- The Data Management Unit of the AIHW, which was responsible for the logical and physical design of the Knowledgebase.
- The AIHW National Information Development Unit, particularly Joe Christensen and Laura Reece, who remain responsible for the quality, integrity, scope and integration of the metadata products and standards that constitute the Knowledgebase itself.
- AIHW staff in general, whose contribution to Australia's National Health and Community Services Information infrastructures has enabled, challenged, informed and sustained the whole effort.

The Knowledgebase has since received a range of other acknowledgements, some of which may present

opportunities for developmental investment. Specifically:

- The Institute and the National Health Information Knowledgebase are acknowledged in the recent US Presidential Advisory Commission report on *Consumer Protection and Quality in the Health Care Industry*. The full report is available on the Quality Commission's web site at <http://www.hcqualitycommission.gov/>.
- The Knowledgebase has been selected as the preferred model for corporate data registries by a coalition of US federal departments interested in improving the quality of metadata in the US and across the general area of health insurance in particular.
- Additionally, the US Health Care Financing Administration has independently adopted Australia's National Health Information Model (NHIM) as the base information model for their new Enterprise Information Architecture. HCFA have informally indicated a preparedness to sponsor the ongoing development of the Model at the Institute.
- The dominant standard for electronic interchange of clinical, financial and administrative information among health care oriented computer systems around the world is the American National Standards Institute-accredited HL7 messaging standard. At its most recent plenary meeting in the US, the Board of the HL7 consortium identified the AIHW NHIM as the preferred logical framework for further development of the HL7 standard. They described the NHIM as '...an excellent example of simple and effective modelling'.

Australian representatives at the meeting reported strong endorsements of the NHIM by HL7 USA, the US Department of Defence, the US Veterans Administration, and the Canadian Health System.

HL7 USA intends to make a formal approach to the NHIM owners (the AIHW) for permission to undertake a mapping and gap analysis of the HL7 v3 Reference Information Model. 'Substantial funds' have been made available for a team of Australian experts to undertake the review.

*For further information contact: Joe Christensen, AIHW  
Ph. (02) 6244 1148. E-mail: [joe.christensen@aihw.gov.au](mailto:joe.christensen@aihw.gov.au)*

## National Community Services Information Management Group (NCSIMG)

At its meeting in October 1998, the Standing Committee of Community Service and Income Security Administrators (SCCSISA) endorsed the National Community Services Information Development Plan, prepared by the NCSIMG in consultation with a wide range of government and non-government groups involved in provision of community services.

SCCSISA's endorsement of the Plan represents a significant step towards improving access by the community, service

providers, consumers of services and government to quality, compatible national community services data.

The consultative process was an important one for NCSIMG members. Thanks to support given by umbrella organisations such as the Australian Council of Social Service (ACOSS) and the Australian Local Government Association, the draft Plan was given very wide circulation, initiating contact beyond that conducted by NCSIMG members. Many organisations indicated interest in either commenting on, or finding out more about the Plan.

Future work of the NCSIMG will concentrate on implementing priority areas identified in the Plan and version 2 of the National Community Services Data Dictionary.

*For further information contact: Margaret Fisher, AIHW,  
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## National Health Information Management Group (NHIMG)

The National Health Information Management Group met on 4-5 November 1998. Some of the highlights of the meeting were:

### Extension of the National Health Information Agreement (NHIA) to include the Health Insurance Commission

The Health Insurance Commission (HIC) has an essential role in national health information development and provision. HIC membership of the NHIMG will provide a significant extension of the coverage of the NHIA. (The Australian Health Ministers' Advisory Council recently agreed to invite the HIC as an observer at its meetings.)

### Revised occupation definitions for Version 8 of NHDD

The NHIMG endorsed a proposed revision to the data element 'Occupation' for inclusion in Version 8 of the *National Health Data Dictionary* (NHDD) plus the deletion of the data element concept 'Occupation' from Version 8 of the NHDD. This will align the NHDD V8.0 with the second edition of the *ABS Australian Standard Classification of Occupations* (ASCO) published in 1997.

### National Codeset Project: Community-Based Health Services

The NHIMG accepted the final report on this project. Part of the future process will be to hold a multi-lateral workshop to further the recommendations of the project. A copy of the final report is available from Peter Williams, NSW Health, on (02) 9391 9110.

### Additions to the National Health Information Work Program

#### Australian Burden of Disease Study

AIHW and the Victorian Department of Health Services are undertaking burden of disease analyses for Australia



and Victoria respectively. This project will undertake to estimate the national burden of diseases and risk factors in 1996 and estimate the burden of disease in Victoria for 1996 and the projected burden to the year 2016.

**BEACH: A continuous national survey of general practice activity**

Acknowledging the need identified in the National Health Information Development Plan, the AIHW and the University of Sydney are collaborating to undertake a national, continuous survey of general practitioner activity entitled 'Bettering the Evaluation and Care of Health' (BEACH). The survey is being undertaken by the General Practice Statistics and Classification Unit, a new collaborating unit of the Institute, located within the Family Medicine Research Unit at the University of Sydney.

**National Health Priority Areas**

The AIHW has responsibility to monitor and report progress to Australian Health Ministers in the priority areas of cardiovascular health, cancer control, injury prevention and control, mental health and diabetes. Under the guidance of the National Health Priority Committee, the Institute and the Commonwealth Department of Health and Aged Care have produced three reports on the National Health Priority Areas. Three other reports on the priority areas are currently under development.

*For further information contact: Michele Flint, AIHW, Ph. (02) 6244 1123. E-mail: michele.flint@aihw.gov.au*

# PROJECT REPORTS

## Australian Hospital Statistics Advisory Committee

(or AHSAC—what's in a name?)

In June 1998 the National Health Information Management Group endorsed the establishment by the AIHW of the Australian Hospital Statistics Advisory Committee to help to ensure that the annual publication *Australian Hospital Statistics* meets the important needs of the major users of national hospital statistics.

As well as advising the Institute on the collection, analysis and dissemination of national hospital statistical information through *Australian Hospital Statistics*, the committee will also advise on data development work to be referred to the National Health Data Committee. Committee members represent a variety of organisations involved with hospital statistics, including State and Territory health authorities, the Commonwealth Department of Health and Aged Care, the Department of Veterans' Affairs, the Australian Bureau of Statistics, a number of other stakeholder organisations and two independent experts in the epidemiology and health economics areas.

The committee will meet twice yearly, with the first meeting of each year timed to enable a review of publication plans for *Australian Hospital Statistics*. The second meeting will review the publication following its release and will provide advance planning for the forthcoming publication.

The inaugural meeting of the committee was held at the Institute in September and provided a valuable forum for information exchange between members and the Institute, as well as resolving some crucial foundation issues on membership and the terms of reference for the committee. The agenda also covered issues currently being faced by the Institute including scope, timetable and data issues. There were also valuable discussions about future directions and developments that are likely to have an impact in the area of national hospital statistics, in particular, electronic dissemination and data development activities.

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## Developing housing assistance information infrastructure

Recent significant changes to the information requirements of stakeholders in the area of housing assistance have emphasised the need to develop housing assistance information infrastructure. During 1997-98, Housing Ministers and Housing Chief Executive Officers (CEOs) endorsed considerable expansion of performance reporting, within a tight time frame, of the current Commonwealth-State Housing Agreement (CSHA) to cover all six areas of assistance, shown below. The Ministers and CEOs also supported improved information for Indigenous housing assistance.

The six program areas of the Commonwealth-State Housing Agreement are:

Public Housing	Community Housing	Crisis Accommodation Program
Aboriginal Rental Housing Program	Private Rental Assistance	Home Purchase Assistance

Currently, housing assistance information has no national supporting infrastructure (such as the National Community Services Information Agreement) to manage data issues such as varying data quality, lack of standard data definitions and poor links between housing assistance information and health, community services and income support information.

To address these concerns the AIHW submitted a paper to the March 1998 meeting of Housing CEOs raising the need for management at the national level of the development of data standards and quality for housing assistance information. CEOs supported the proposal that the AIHW further enhance the management of national housing assistance information and requested it develop a proposal for the Institute's future role and report back to them after

consultation with stakeholders.

The AIHW is currently working on a long-term information infrastructure for the CSHA, and development of national Indigenous data management strategies. Both projects currently receive funding from the Commonwealth Department of Family and Community Services.

The types of issues that both these projects address and which are relevant to a broader Institute role in housing assistance information include:

- developing a national housing assistance data management strategy to cover the definition, collection, interpretation and dissemination of housing assistance data;
- facilitation of a data agreement between the Commonwealth, State and Territory government agencies responsible for housing assistance;
- defining a national data dictionary and minimum data set across housing assistance areas as an initial priority of a strategy;
- eliminating duplication of effort in data collection and reporting within program areas;
- improving the coordination and reducing overlap in data collection across program areas particularly in areas such as community housing and crisis accommodation;
- examination of the role of broad data collections such as the community housing mapping project and the frequency with which such data should be collected;
- improving links between housing assistance information and health, community services and income support information;
- catering for emerging requirements due to changes to housing assistance programs; and
- consideration of resourcing and timing issues.

Improved communication on information issues and support of national standards and quality across, as well as within, programs are major factors in developing a coherent picture of the system of housing assistance in Australia.

*For further information contact: David Wilson, Housing Assistance Unit, AIHW, Ph. (02) 6244 1202. E-mail: david.wilson@aihw.gov.au*

## National Community Housing Mapping Project

In April 1998 the National Community Housing Forum (NCHF) contracted the AIHW to undertake data collection and analysis for the NCHF Community Housing Mapping Project.

The Mapping Project will establish the scope and characteristics of community housing in Australia to provide a picture of the contribution that community-managed housing makes to the housing effort in Australia. Improved knowledge of the scope and characteristics of community housing is seen as important in:

- providing a sound basis for future community housing policy and development;
- improving understanding of the diversity of community housing and the current contributions of

community housing;

- helping to identify areas of need; and
- developing a stronger position to encourage private sector financing of community housing.

Currently there is no clear information available on the number of organisations managing community housing. The project aims to identify and 'map' by region all non-profit non-government managed rental housing in Australia, including housing financed outside the Commonwealth-State Housing Agreement (CSHA). While there are around 22,000 units of community housing administered by State housing administrations through the CSHA, this is only part of the picture. The collection of community housing data outside the CSHA provides a broader view, particularly of the links to aged care, disability services and other health-related services.

The data collection phase of the project will be completed in December 1998 and a final report will be prepared for release in early 1999. The project is funded by the Commonwealth Department of Family and Community Services.

*For further information contact: Tanya Wordsworth, Housing Assistance Unit, AIHW, Ph. (02) 6244 1119. E-mail: tanya.wordsworth@aihw.gov.au*

## Development of a National Minimum Data Set for Palliative Care

The Institute has been funded by the Commonwealth Department of Health and Aged Care to develop a National Minimum Data Set for Palliative Care. This data set is designed to support information requirements of the National Strategy for Palliative Care in Australia 1998-2003. The work program will include the development of national performance indicators for palliative care.

The first stage of this project has seen the endorsement of a patient-level data set that describes the recipients of specialised institutional palliative care services nationally (that is, those patients in public acute hospitals and stand-alone hospices). The data set will include demographic and diagnostic information on palliative care patients.

Future development of the project will include a feasibility study for the collection of similar patient-level data from community-based services in early 1999.

An establishment-level data set providing descriptive data on palliative care services is also planned.

The Institute will undertake broad consultation to establish the capacity of States and Territories to provide data annually. The work program is being developed under the auspices of the Palliative Care Intergovernmental Forum (comprised of representatives of all State and Territory health authorities) convened by the Commonwealth Department of Health and Aged Care. The work will be conducted in collaboration with Palliative Care Australia.

*For further information contact: Clara Jellie, Health Services Unit, AIHW, Ph. (02) 6244 1180. E-mail: clara.jellie@aihw.gov.au*

## First international GP collaborating centre

In October 1998 the Family Medicine Research Unit (FMRU), Department of General Practice, University of Sydney was declared the first Collaborating Centre of the World Organisation of Family Doctors (WONCA). WONCA Executive made the announcement at the official launch of WONCA's latest international work, the *International Classification of Primary Care (Version 2)*. The FMRU is the first such Collaborating Centre in the world. The Unit includes the recently established AIHW Collaborating Unit, the General Practice Statistics and Classification Unit.

The fact that the first WONCA Collaborating Centre is in Australia reflects Australia's leading role in international standards development in health informatics through organisations such as the FMRU, the AIHW and Standards Australia.

Director of the Unit Dr Helena Britt said she was delighted with the announcement. 'We have been working in close cooperation with the WONCA International Classification Committee for many years. Our Unit will benefit from this more formal international relationship. Among many things it ensures that the collaborative BEACH program (ongoing national data collection from general practice), which uses WONCA classification tools, will retain international comparability.'

*For further information contact: Family Medicine Research Unit Acacia House, Westmead Hospital, NSW 2145, Ph. (02) 9845 8151, Fax: (02) 9845 8155. E-mail: helenab@genprac.wsahs.nsw.gov.au. Web page: <http://www.fmr.u.org.au>*

## Call for submissions—ICD-10-AM, first edition

The National Centre for Classification in Health (NCCH) is inviting public submissions for modifications to the International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification (ICD-10-AM), First Edition. ICD-10-AM is based on the World Health Organization statistical classification ICD-10. From 1 July 1999, ICD-10-AM will be the Australian standard for morbidity classification in acute health services and day facilities.

The NCCH is an Australian centre of expertise in classifications for morbidity, mortality and health interventions and is responsible for the maintenance of ICD-10-AM. It is the intention of the NCCH to update ICD-10-AM periodically from 1 July 2000.

Written submissions from interested members of the public and representatives of relevant agencies or organisations must be lodged between 1 February 1999 and 28 February 1999.

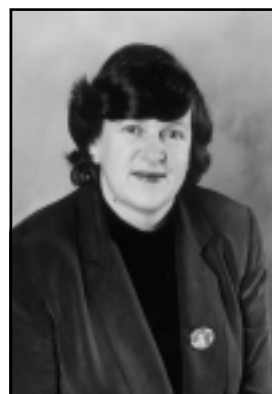
*Guidelines on the submission process can be obtained from Kerry Innes, Associate Director, NCCH (Sydney), University of Sydney, PO Box 170, Lidcombe NSW 2141, Ph. (02) 9351 9461, Fax: (02) 9351 9603, e-mail: [k.innes@cchs.usyd.edu.au](mailto:k.innes@cchs.usyd.edu.au) or from the NCCH homepage: <http://www.cchs.usyd.edu.au/NCCH/nccch.html>.*



## SPOTLIGHT ON Vivienne Milligan

Home is where the heart is for AIHW Board Member, Vivienne Milligan.

As Executive Director for Housing and Urban Development at the NSW Department of Urban Affairs and Planning, Vivienne recognises that 'home as the heart' is an important aspect of housing—and has also shaped her career.



'There are so many aspects to housing. There's the social imperative to ensure secure and appropriate housing for disadvantaged people. Then you have to consider housing as a physical asset—how we design, look after and manage it', Vivienne said.

'Not to mention the fact that buying a house is the most expensive thing most of us do, so you have to consider the financial issues as well. There's also the psychological aspect to housing; it's the core of everybody's life. We all need a roof over our heads, but our house as our home is also so important to our wellbeing, our psyche and to our life opportunities.

'It's for these kinds of reasons that when I am making a decision on a housing issue, I try to put myself in the other person's shoes and ask how I would feel about it if I was in that situation.'

It is Vivienne's passion for housing and the need for new challenges that has brought her to a crossroad in her career. She has now decided to combine her knowledge of housing in Australia with her statistical and research skills to study in the Netherlands.

'I'm going to take time out from work and do my PhD. I've been accepted to work on a pilot program at the University of Utrecht to do a comparative study of the Australian and Dutch housing systems', she said.

'I think it's time to link the early part of my career, where I was an academic, with my more recent experiences, and in doing so document what I have learnt and hopefully put something valuable back into housing knowledge in Australia.'

Vivienne started to focus on housing during the first decade of her working life—as a geographer teaching statistics and research methods in a number of university contexts.

In 1982 Vivienne decided to put her ideas into practice and moved from academia to bureaucracy to develop an innovative community housing program in New South Wales.

Since then she has worked for the New South Wales, Queensland and Commonwealth Governments in a number of research, housing, policy, and planning positions, changing the shape of Australia's housing system.

In 1993 Vivienne was awarded the Public Service Medal in recognition of her achievements in developing new directions for Queensland's housing policy and services. 'The period in Queensland was one of the greatest challenges of my career and the medal was a recognition of the work that everyone involved in the program at the time contributed.

'Another high point would be the work I've done in New South Wales in the last five years. We've started to think much more broadly about our housing assistance system—the needs of our clients now and as they change over the life course, the business principles under which we operate, how we better manage our large housing asset base, and about the impact of programs like public housing.

'Having the opportunity to work with Aboriginal community leaders to establish a new model for delivering Aboriginal housing in New South Wales has also been a special privilege.'

And what's in store for Australia's housing system as it moves into the 21st century?

'Housing needs in the future will be very different to now. People will be more mobile, the patterns of work and income will be different, and there will be a greater diversity of need across people in different life stages', she said.

'Rental housing will become more important. Where the baby boomer generation were homeowners, the new generation will want more flexibility and will tend to use their incomes differently.'

'At the moment we have a relatively rigid system of housing provision and tenure which we'll have to adapt to meet these needs.'

Providing strategic direction in housing policy normally doesn't leave a lot of spare time, but when she isn't travelling Vivienne does like to cook—admittedly, using every possible ingredient!

'Both my parents were in the food industry. My father was a butcher, so I learned from a young age to know about and appreciate food. I also enjoy gardening and I'm a passive sport enthusiast. I watch all sports—cricket, tennis, motoring grands prix, golf and rugby union, to name a few.

'I love travelling too. New York is one of my favourites, and all of Europe is very exciting.

'Each trip I like to fill in another part of the map. Life's too short to go to the same places.'

### Where to get AIHW publications

All AIHW publications are available from AusInfo (formerly AGPS) shops in each capital city or from AusInfo mail order sales

Phone toll free 132 447



## PUBLICATIONS

- AIHW Annual Report 1997–1998 (AIHW cat. no. AUS 11)*
- AIHW Work Program 1998–1999 (AIHW cat. no. AUS 12)*
- Australia's Oral Health and Dental Services (DSRU) (AIHW cat. no. DEN 13)*
- Breast and Cervical Cancer Screening in Australia 1996–1997 (AIHW cat. no. CAN 3)*
- Breast Cancer Survival in Australian Women 1982–1994 (AIHW cat. no. CAN 4)*
- Developing Quality Measures for Home and Community Care (AIHW cat. no. AGE 8)*
- Disability Data Briefing No. 13*
- Health Expenditure Bulletin No. 14 (AIHW cat. no. HWE 10)*
- Health in Rural and Remote Australia (AIHW cat. no. PHE 6)*
- Health System Costs of Cancer in Australia 1993–94 (AIHW cat. no. HWE 8)*
- Hostels in Australia 1996–97: A Statistical Overview (AIHW cat. no. AGE 10)*
- Housing Assistance: Reports on Measurement and Data Issues*
- Juvenile Justice and Youth Welfare: A Scoping Study (AIHW cat. no. CWS 6)*
- Medical Care of Cardiovascular Disease in Australia (AIHW cat. no. CVD 4)*
- National Health Data Dictionary Version 7 (AIHW cat. no. HWI 15)*
- NIMS Data Briefing No. 12*
- NIMS Data Briefing No. 13*
- Nursing Homes in Australia 1996–97: A Statistical Overview (AIHW cat. no. AGE 9)*
- Nursing Labour Force 1995 (AIHW cat. no. HWL 8)*
- Surveillance of Cardiovascular Mortality in Australia 1985–1996 (AIHW cat. no. CVD 3)*
- Welfare Services Expenditure Bulletin No. 4 (AIHW cat. no. HWE 9)*

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