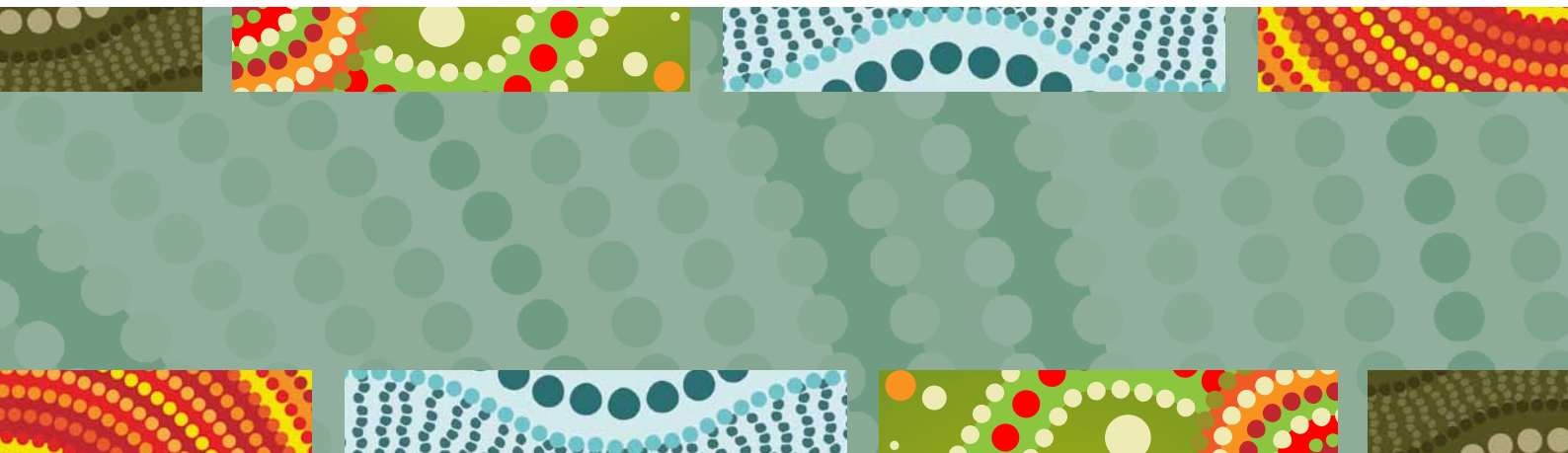




Australian Government

**Australian Institute of
Health and Welfare**

NAGATSIHID STRATEGIC PLAN



2010-2015

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Introduction

The National Advisory Group on Aboriginal and Torres Strait Islander Health Information and Data

The National Advisory Group on Aboriginal and Torres Strait Islander Health Information and Data (NAGATSIHID) was established, as a result of a decision by the Australian Health Ministers' Advisory Council (AHMAC) in October 2000, to improve reporting on the status of health of Indigenous Australians.

The NAGATSIHID was set up as the national body to create a partnership between the Commonwealth, jurisdictions and Aboriginal and Torres Strait Islander people to improve Indigenous information in national and jurisdictional data collections.

What makes NAGATSIHID different from other committees is:

- the level of representation from the governments (chaired by an AHMAC representative)
- it has a majority Aboriginal and Torres Strait Islander membership with representatives from a wide range of key stakeholders in Aboriginal and Torres Strait Islander health such as the Community Controlled sector, academia and the government sector
- it reports to AHMAC through NEHIPC but the chair of NAGATSIHID can bring issues directly to the attention of AHMAC
- it provides a unique example of an effective working partnership between government agencies, Aboriginal and Torres Strait Islander people and organisations to advance the development and use of data and information on the health of Indigenous Australians
- having a majority of Indigenous people on NAGATSIHID gives the agencies some confidence that the decisions by AHMAC (through NAGATSIHID) reflect the views of Indigenous people and their representative bodies, and
- it is recognised internationally and has been responsible for many of the significant changes in Aboriginal and Torres Strait Islander health statistics and data.



The role of NAGATSIHID

The main role of NAGATSIHID is to provide strategic advice to the National E-Health and Information Principal Committee (NEHIPC) and, through NEHIPC, to AHMAC on Indigenous health data issues.

NAGATSIHID has specific responsibility to:

- provide strategic advice on improving the quality and availability of data and information on Aboriginal and Torres Strait Islander health and health service delivery
- formulate and implement national plans for improving information about Indigenous health
- advise the Australian Institute of Health and Welfare (AIHW) and Australian Bureau of Statistics (ABS) on information priorities and on statistical and other issues that arise in their programs of work on Indigenous health information
- advise other national committees on performance measures relating to Aboriginal and Torres Strait Islander health
- continue the implementation of the NAGATSIHID Strategic Plan. This includes monitoring and improving Indigenous identification in a range of data collections including Censuses, birth registration, death registration, hospital separations, cancer registers, community mental health services, alcohol and other drug treatment services and other data collections
- ensure a strategic, co-ordinated approach to the development of information on the health of Aboriginal and Torres Strait Islander people and ensure that approaches to the collection of that information are culturally respectful and maximise the benefit to Aboriginal and Torres Strait Islander people
- provide advice to the Australian Government Department of Health and Ageing (DoHA) on the Aboriginal and Torres Strait Islander Health Performance Framework (HPF), and
- sponsor priority projects.



Relationship to other committees and stakeholders

In addition to reporting to AHMAC (through NEHIPC), NAGATSIHID also provides advice to the National Health Information Standards and Statistics Committee (NHISSC), who are also a sub-committee reporting to AHMAC, through NEHIPC. One of the terms of reference for NHISSC is to:

‘monitor and seek opportunities to improve the identification of Indigenous status and Indigenous issues in national data collections and reporting and recognition of Indigenous health issues in the development of national data standards that underpin administrative reporting and research in the health sector, in collaboration with NAGATSIHID’.

A National Indigenous Reform Agreement Performance Information Management Group (NIRAPIMG) has been formed to oversee the COAG ‘Close the Data Gap’ strategy that focuses on addressing key Indigenous data quality issues. Strong links between NAGATSIHID and NIRAPIMG are important and are facilitated through joint membership.

NAGATSIHID consults with the National Aboriginal and Torres Strait Islander Health Officials Network (NATSIHON) and works in partnership with NATSIHON to align evidence and policy development for Aboriginal and Torres Strait Islander Health. NAGATSIHID also have links through joint membership with the National Indigenous Health Equality Council (NIHEC) and provide advice on policy issues and appropriate policy responses arising from Indigenous data publications.

Strong relationships with Aboriginal and Torres Strait Islander Australians and their representative bodies are also essential to NAGATSIHID.

Membership

A vital element of the NAGATSIHID’s operation is having a majority of Aboriginal and Torres Strait Islander members. These members bring different expertise from the spheres of research and teaching, service provision and policy. Aboriginal and Torres Strait Islander members are also called upon to represent NAGATSIHID on various project-specific steering groups and advisory committees. The Group is chaired by an AHMAC member while the Deputy Chair is an Indigenous member. For any decisions, an Indigenous quorum needs to be present at these meetings.



The Advisory Group's membership includes three Indigenous advisors on Aboriginal and Torres Strait Islander health and welfare, an epidemiologist with expertise in Indigenous health issues, as well as representatives of the National Aboriginal Community Controlled Health Organisation (NACCHO), the NATSIHON, the AIHW, the ABS, the DoHA, the Australian Government Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA), the Australian Institute of Aboriginal and Torres Strait Islander Studies (AIATSIS), the Torres Strait Regional Authority and the NHISSC.

A number of observers from the AIHW, ABS, OATSIH (DoHA), FaHCSIA, AIATSIS, Queensland Health and NACCHO are also in attendance at NAGATSIHID meetings to provide subject matter expertise.

About the new Strategic Plan

A plan that builds on the past, is forward looking and longer term

The vision for this plan is to integrate work previously done and currently underway, be forward looking over 20 years and achieve this vision with 5 year steps in implementation.

A plan that embraces the current complexities of the external environment

This plan has been developed in the context of its existing work and agenda, the current major health system reform and a new intergovernmental agreement being managed through the Council of Australian Governments (COAG):

- a. Australian governments have committed to closing the gap in Indigenous disadvantage. COAG has committed to 6 targets:
 - o to close the gap in life expectancy within a generation;
 - o to halve the gap in mortality rates for Indigenous children under five within a decade;
 - o to ensure all Indigenous four years olds in remote communities have access to early childhood education within five years;



- o to halve the gap in reading, writing and numeracy achievements for Indigenous children within a decade;
- o to halve the gap for Indigenous students in year 12 attainment or equivalent attainment rates by 2020; and
- o to halve the gap in employment outcomes between Indigenous and non-Indigenous Australians within a decade.
- b. COAG has committed to monitoring and accountability through national agreements and supporting national partnership agreements, many of which have an Indigenous split as well as a focus on all Australians.
- c. Consultations are underway on major health system reform drawing on the National Health and Hospital Reform Commission final report, the Primary Health Care Strategy and the National Preventative Health Strategy.

The following data development priorities have been identified for COAG reporting:

- Improving the quality of population estimates and projections for Indigenous Australians through improvements to Census enumeration and reducing Census undercount.
- Improve life expectancy estimates including trends in life expectancy estimates through linkage and other work.
- Improve Indigenous identification in key data sets and assessing the level of under identification.
- Work on data linkage to help assess the level of under identification and to measure key outcomes for Indigenous Australians.
- Improving the perinatal data collection through including the Indigenous status of the baby, antenatal care and risk factors during pregnancy.
- Enhancing current datasets; e.g. ensuring that the National Aboriginal and Torres Strait Islander Health Survey covers priority data requirements for Government—including COAG reporting—and Indigenous communities and organisations.
- Implement best practice guidelines by providing ongoing support from the AIHW's National Indigenous Data Improvement Support Centre (NIDISC) to work with states and territories on a problem solving model, rather than blame model, which may include a help line and other resources.



- Providing periodic advice as requested on the National Key Performance Indicators for Indigenous-specific primary health care services.

As part of the new arrangements, COAG have committed \$46.4 million over four years to a range of activities to improve the quality of Indigenous data. These include strategies to assess and improve the identification of Indigenous Australians in births and deaths data, along with activities to improve the quality of Indigenous population estimates.

The NAGATSIHID is expected to provide its expert advice on all COAG funded data development including but not limited to those projects listed above. Most of these projects are a continuation of the work initiated by the NAGATSIHID and therefore the Advisory Group is in a better position to understand the complexities involved.

A plan that builds on existing strengths

NAGATSIHID made considerable progress against the 2006–2008 Strategic Plan and will continue to build on that strength to provide high level advice on data development priorities for Aboriginal and Torres Strait Islander Health.

Under the previous Strategic Plan, NAGATSIHID:

- provided advice on a range of matters related to the development of information on the health of Indigenous Australians
- brought relevant information reports to the attention of key stakeholders and AHMAC by circulating key messages from recent publications
- commented on and provided advice on all NAGATSIHID sponsored projects such as geographic analyses of health status and assessing under-identification in hospital data, as well as non-NAGATSIHID sponsored projects such as the 2008 Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples report and Indigenous Mothers and Babies
- provided advice to ABS on a number of ABS surveys and reports such as the 2006 Census of Population and Housing, population estimates and projections, and the 2008 National Aboriginal and Torres Strait Islander Social Survey



- provided advice on the Overcoming Indigenous Disadvantage 2007 report, and COAG Indigenous Generational Reform
- responded to queries that required input as required
- developed a set of principles around the return of data to communities and will develop a case study from the Social and Emotional Wellbeing (SEWB) report to pilot test a format for the return of data and key messages to communities
- provided strategic advice on improving the quality and availability of data and information on Aboriginal and Torres Strait Islander health and health service delivery
- formulated and implemented national plans for improving information about Indigenous health
- advised the AIHW and ABS on information priorities and on statistical and other issues that arise in their programs of work on Indigenous health information
- advised other national committees on performance measures relating to Aboriginal and Torres Strait Islander health
- provided advice on the work undertaken to assess the accuracy of Indigenous identification in public hospitals data in each of the states and territories and provided feedback on the estimates
- advised on the development of 'Best practice guidelines' to collect Indigenous status information in health data sets
- sponsored work on Indigenous life expectancy in the Northern Territory

Under the new Strategic Plan, NAGATSIHID is expected to play a major role in the governments' effort to close the gap between the Indigenous and non-Indigenous disadvantage by:

- providing strategic and technical advice on the 'Close the Data Gaps' work to improve Indigenous identification in key administrative health datasets



- supporting regular independent audits of Indigenous identification for key data collections, in particular hospitals data
- facilitating regular data quality workshops
- providing advice on the enhancements to health datasets
- continuing support for improving capacity for better identification in administrative and other collections
- facilitating a shared understanding of issues and practices that can align Indigenous identification across collections, and across jurisdictions within collections, and
- establishing mechanisms for tracking progress on improvements in identification in each data set (annual reporting of progress).

Major achievements of NAGATSIHID

NAGATSIHID with its strong representation of Aboriginal and Torres Strait Islander people and other experts in health research, teaching, policy and services, as well as representatives from the key national agencies responsible for Aboriginal and Torres Strait Islander policy and health statistics, is well placed to ensure that information issues important to Indigenous people are identified and debated.

Over the past five years under the previous strategic plan, the Advisory Group has achieved significant progress in developing quality statistical information and evidence on the health status and experience of Aboriginal and Torres Strait Islander people.

NAGATSIHID secured funding for a number of key projects relevant to the way Indigenous health information is collected, stored and disseminated. A review of the National Aboriginal and Torres Strait Islander Health Data Principles in each jurisdiction was initiated to identify the extent and nature of any problems in the collection, storage and use of Aboriginal and Torres Strait Islander health data.

A set of principles for returning information to Indigenous communities is being developed by NAGATSIHID to ensure that the return of data and key messages from surveys and reports to Aboriginal and Torres Strait Islander



communities occurs in a meaningful way so that the information can be used to improve outcomes for Indigenous communities and to inform the broader work being undertaken.

NAGATSIHID developed a statement on the types of work on alternative measures of health that would be most valuable to undertake and identified highest priority strands of work in this field, i.e. developing culturally appropriate measures of health, in high priority areas of community functioning and social and emotional wellbeing.

NAGATSIHID advised on a number of priority areas for information development (enumeration of Indigenous population and projections, surveys; assessing and improving quality of Indigenous information in administrative datasets; developing data and measures in the areas of mental health, prisoner health, violence, primary health care, other health services, and workforce).

A range of analytical projects and statistical reports were also supported including health trends, avoidable morbidity and mortality, health expenditure, burden of disease, and health status and health service delivery.

NAGATSIHID supported work on international comparisons of Indigenous health disparities and health trends and supported meetings of the four-country Indigenous Health Measurement Group in Vancouver in October 2005, in the United States of America in March 2009 and May 2010 involving Australia, New Zealand, Canada and the United States of America. NAGATSIHID funded a number of Indigenous advisors to travel to these international meetings.

Priorities for information and data

Health information development, collection and use

NAGATSIHID ensures that there is a strategic and coordinated approach to the development of information on the health of Aboriginal and Torres Strait Islander people and that approaches to the collection and use of that information continue to be important for policy development and monitoring progress against COAG targets. As such NAGATSIHID works closely with NATSIHON to ensure the development of evidence-based policy to support COAG Closing the Gap for Aboriginal and Torres Strait Islander Health.



NAGATSIHID Strategic objectives and associated activities are listed below:

1. Provide leadership in developing and strengthening the evidence-base through:

- accurately enumerating the Aboriginal and Torres Strait Islander population
- advocating and developing a comprehensive national survey program
- improving Indigenous identification in key administrative data collections, and
- the development of data and information required to support COAG objectives in health and related areas (see strategic objective 3 below).

Expected outcome

Better population and administrative data sets and more comprehensive health surveys that will enable accurate assessment of health outcomes of, and service use by, Aboriginal and Torres Strait Islander people. This will assist in monitoring of closing the gap in Indigenous disadvantage.

2. Build and maintain internal and international collaborations

Expected outcome

NAGATSIHID will be able to influence change for the benefit of Indigenous Australians by building and strengthening its relationship with internal and international key stakeholders.

3. Influence change through consideration of joint work to:

- Primary Health Care Core indicator development including steps to support sharing of available de-identified primary health care data across jurisdictions
- development of the Health Performance Framework tool to inform policy setting in an evidence-based context.

Expected outcome

NAGATSIHID and NATSIHON will work in partnership to focus their respective activities to ensure data and policy



development supports the achievement of the COAG 'Close the Gap' targets for Aboriginal and Torres Strait Islander health.

4. Promote health through new data collections or enhancing existing collections in the following areas:

- primary health care and other services data collections
- perinatal data collection
- pathology data
- community and family functioning
- social and emotional wellbeing
- substance misuse
- prisoners' health
- homelessness
- access to services compared to need
- health literacy
- cultural competency
- partnerships.

Expected outcome

Gaps in Indigenous health and health service delivery are continually being identified and addressed so that a comprehensive information base is available to inform policy, planning and service delivery.



5. Monitor and report key findings of:

- existing key national statistical reports
- community reporting
- other analytical work around key issues such as life expectancy and child mortality, data linkage, health trends and social determinants.

Expected outcome

Key messages and outcomes of these specific reports and ongoing national and regional reports can lead to better informed policy makers and communities on issues that can make a difference to closing the gap in Indigenous disadvantage. This will facilitate better decision making in relation to planning of programs and service delivery at the local and national levels and should lead to improved outcomes for Indigenous Australians.

6. Assist in finding out “what works”**Expected outcome**

Improved evaluation and economic analyses type work can lead to better and more informed decision making about programs and services delivered to Indigenous Australians.

7. Strengthen the Indigenous health information workforce**Expected outcome**

Creating more opportunities for workforce development of Aboriginal people and for Aboriginal health services through recruitment and career development will provide benefits to improving health outcomes for Indigenous people.

8. Review own performance**Expected outcome**

An accountable and informed NAGATSIHID that follows best practice to assist in monitoring how effective it has been in achieving its strategic objectives.





