



access

Issue 19 May 2005

METeOR: an inventive breakthrough @aihw

'Do you ever get information overload—that feeling that your head's going to burst because you just can't cope with everything that's coming into it every day?'

'When I went to the supermarket the other day to buy bread, I was confronted with rows upon rows of it—63 varieties to be precise. I know because I counted them!

'All with different labels, different ingredients, different shapes and different prices. I needed some help to sort them out.'

'Can I help you sir?'

'Err...I don't know.'

'What variety of bread do you prefer sir?'

'Err...I don't know!'

'And that was just the start. I couldn't even think about choosing the margarine. And then there was the debit card PIN to remember...'

James O'Loughlin, broadcaster and host of the New Inventors program on ABC TV was considering the sort of world that METeOR, the AIHW's new metadata online registry, could help, in a small but important way, to put into the kind of order that ordinary humans can cope with.

James was launching METeOR at the National Museum of Australia, assisted by the Chair of the AIHW Board, Peter Collins, the Director of the AIHW, Richard Madden, Head of the AIHW Business and Information Management Division, Anny Stuer, and Head of the AIHW Metadata Management Unit, David Braddock.

For readers not yet familiar with it, METeOR (METadata [electronic] Online Registry) combines an innovative metadata registry concept and state of the art technology to help ensure absolute consistency in health and welfare metadata (or 'data about data'). This will result in more comparable and accurate statistics.

Peter Collins opened proceedings at the launch by describing METeOR as 'an exciting and new concept that the Board has backed since day 1... It's been a \$1 million dollar investment for



Is it a bird? Is it a plane? No, it's METeOR! James O'Loughlin launching AIHW's Metadata Online Registry.

the Institute—small beer for some in the information development world, but big for us, and, we like to think, excellent value for money'.

Peter acknowledged the role played by METeOR's forerunner, 'The Knowledgebase'.

'The Knowledgebase gave us a foot in the door of the metadata world in 1997. And it was, at the time of its introduction, pretty much leading edge... But, in the years since then, things have changed.'

'With more and more statistics being made available by the AIHW, our data providers and partners, and others, there has been an increase in interest in data.

'As more information is collected, more data standards and metadata are needed to keep things in order, and manageable. In the last five years the number of metadata elements added to the Knowledgebase has risen eight-fold.'

When in 2003, the international standard, known as ISO/IEC 11179, was revised and re-issued the AIHW started planning for the total revamp of the Knowledgebase that has become METeOR. Peter thanked the many 'players' involved in the METeOR project, which was completed in a swift 15 months.

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It is my pleasure to welcome our long-term readers and especially our new subscribers to this very significant edition of *AIHW Access*.

The edition celebrates the launch of the much anticipated METeOR online metadata registry. Congratulations to all those involved, both staff of the Institute and our partners on the Steering Committee, for their hard work and commitment in releasing this world-class online metadata registry for health, community services and housing assistance. The Institute is proud to have developed this unique tool for managing data, which has already been commended by the National Research Priorities Standing Committee, headed by Australia's Chief Scientist, Dr Robin Batterham. You can read all about the exciting and successful METeOR launch in the lead article.

The *2004 National Drug Strategy Household Survey: First Results* report was launched on 7 April by the Minister for Health and Ageing, the Hon. Tony Abbott, MP. The survey is the largest and most comprehensive national survey of drug use and attitudes to drug use in Australia. For 2004 almost 30,000 people aged 12 years and over provided information on their drug use pattern, attitudes and behaviours. The triennial report compares this information with the results of surveys from previous years.

Another Institute publication, *A Picture of Australia's Children*, was launched by Senator Kay Patterson in Melbourne on 2 May (see picture below). This report provides comprehensive information on the current and long-term status of children's health, and on the risk and protective factors influencing their health and wellbeing.

A Memorandum of Understanding between the Institute and the Department of Family and Community Services has been developed and was signed in April 2005.

Earlier last month I delivered a presentation, along with Dennis Trewin, on Indigenous health at the '2005 Economic and Social Outlook Conference—Sustaining Prosperity' at the University of Melbourne, Institute of Applied Economic and Social Research. This joint presentation was a powerful expression of the priority both agencies place on Indigenous health information. The presentation outlined the major differences in health outcomes for Indigenous and non-Indigenous people. In particular, the impact of early death on Indigenous communities was highlighted as a tragic loss of leadership capacity.

The 2005 edition of the joint AIHW–ABS publication, 'The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples', will be launched on Friday 26 August at the Tandanya National Aboriginal Cultural Institute in Adelaide.

This issue of *Access* also focuses on the improved AIHW website. Don't take my word on the improved usability and flexibility. Visit the site yourself. Special thanks to the web team for their efforts.

Richard Madden, Director, AIHW.

Senator Kay Patterson, Minister for Family and Community Services, at the launch of *A Picture of Australia's Children*.



The National Minimum Data Set for Children's Services: the story so far

Project 1

During recent years, the Australian Government, state and territory governments and the community at large have shown increasing interest in the development, health and wellbeing of young children. The National Agenda for Early Childhood (NAEC) formalises some of these concerns. One of the key action areas identified is early learning and care. This places children's services in the spotlight, with the development of a national collection of data on children's services seen as one practical step forward for the advancement of the NAEC.

The Australian Government and state and territory governments play differing roles in supporting children's services. But all levels of government rely on accurate and timely data in order to fulfil these roles, and to ensure that quality child care and preschool services are available and accessible.

In order to fulfil the growing demand for nationally consistent and comparable data, and to overcome the shortcomings of existing sources, a National Minimum Data Set (NMDS) on children's services is being developed under the auspices of the Children's Services Data Working Group (CSDWG) a sub-committee of the National Community Services Information Management Group. The aim of the NMDS is to collect data on three aspects of children's services—the children using the services, the service providers, and the children's services workforce. Since its inception in 1998, the CSDWG has worked towards its goals of creating national data definitions and standards, and improving cooperation between the stakeholders in order to smooth the way for the development and implementation of the NMDS. The Institute has taken on the job of developing and pilot testing the data dictionary for the NMDS.

In 2002, the AIHW conducted the Phase 1 pilot test, involving a subset of the planned data items on the service—characteristics of children at the service, and qualifications of service workers. In 2004, the Phase 2 pilot test was conducted. This included all data items planned for the implementation of the NMDS. The final report of the development phase and the data dictionary will be published in mid-2005.

Over the course of the development and testing process, it has become clear just how big a task the CSDWG is facing. The NMDS is designed to cover all child care and preschool services

that are licensed or funded by the government. This is well over 10,000 services, over 80,000 workers and more than one million children. Creating definitions for data items as well as the means for collecting information on these data items provide many challenges, such as reconciling different definitions used by jurisdictions for a 'preschool'; developing a measure for an average fee; and deciding how best to identify children with a need for assistance. There is also the issue of how to minimise the burden placed on services that will record information, especially large services where there may be more than 1,000 children as well as many staff.

According to the Richard Mathews, the chair of the CSDWG, the NMDS has great potential to improve information about trends in the use of children's services. One of the simplest, but most effective, items to be included in the NMDS is a non-identifying Statistical Linkage Key (SLK). This will allow emerging issues such as use of multiple services and changing patterns of use of particular services to be investigated. Another benefit of the NMDS is that it should reduce the duplication and inconsistencies that currently exist in data collections, resulting in greater efficiency. Ultimately, the implementation of the NMDS will inform future policy development and planning in the area of children's services, both nationally and within jurisdictions.

The Working Group anticipates that implementation will take place over several years, and it is currently discussing strategies to bring this about and to involve all the key players. Phase 1 and Phase 2 were undertaken under the aegis of the Community Services Minister's Advisory Council (CSMAC). The Working Group has also requested NCSIMG to seek input from CSMAC on the next steps. Many developments will be required, in terms of collection methods, data specifications and training for staff—and of course there are resource implications. However, once implemented, the NMDS promises to provide useful and timely information for governments, the child care sector and the broader community.

For more information on the children's services NMDS, please follow this link to the bulletin: www.aihw.gov.au/publications/aus/bulletin22/bulletin22.pdf

Medical Indemnity National Collection

Project 2

At the Medical Indemnity Forum in April 2002, Health Ministers decided that a 'national database for medical negligence claims' should be established, to assist in determining future medical indemnity strategies. Since mid-2002 the AIHW has been working with Commonwealth, state and territory groups and the Medical Indemnity Data Working Group (MIDWG), under the auspices of Australian Health Ministers' Advisory Council, to develop a Medical Indemnity National Collection (MINC) for the public sector.

The MINC includes information on medical indemnity claims against the public sector handled by state and territory health authorities. The collection does not currently include data on claims managed by private sector medical indemnity insurers, but discussions are under way to work towards a national report combining both sectors.

MINC data are provided by health authorities to the AIHW for national collation and analysis every six months. The first six months of MINC data were published in December 2004 on the AIHW web page. The report includes claims data covering the period 1 January to 30 June 2003, estimated to represent approximately 50% of all public sector claims in scope for the period. It is expected that data completeness and quality will improve rapidly.

Data were provided on 2,666 public sector claims open during the reporting period of which 272 were finalised during this period. An additional 787 new claims were

opened between 1 January and 30 June 2003. Findings from the first reporting period include:

- Obstetrics (398 claims, or 15% of all claims) was the most frequently recorded area of clinical practice (or hospital department) in which an incident giving rise to a claim occurred. Accident and emergency was the next most frequent area (346 claims, or 13%), followed by general surgery (302 claims, or 11%) and gynaecology (251 claims, or 9%).
- The most commonly recorded areas of possible error, negligence or problem giving rise to a claim (i.e. primary incident/allegation type) were procedures (845 claims, or 32% of all claims), diagnosis (572 claims, or 22%) and treatment (313 claims, or 12%).
- The most commonly recorded reserve range was \$10,000–<\$30,000, which accounted for 29% of all claims. Obstetrics and paediatrics were associated with higher reserves.
- Overall, for finalised claims, 2.4 years was the main period of time between the occurrence of the incident giving rise to the claim and the placement of a reserve. The mean period from reserve placement to finalisation was 1.7 years.

A financial year report covering the period 1 July 2003 to 30 June 2004 will be published in mid 2005.

For more information please contact Ms Ros Madden, on 6244 1189 or ros.madden@aihw.gov.au



Senator Kay Patterson at the Royal Children's Hospital (Melbourne) child care centre during the launch of *A Picture of Australia's Children* (see page 2). Shania Guimaraes, 5, can be seen using the Minister as a role model.

AIHW's Executive Unit

As the first line of support for the Institute Director and the Board, the AIHW's Executive Unit also gives assistance and advice to Institute staff, partners and clients across a broad range of corporate issues. Unit staff take pride in their commitment to a culture which values responsiveness, innovation, flexibility and working consultatively and collaboratively with others.

The staff share a strong commitment to excellent client service as well as a high focus on teamwork and keeping up good relations with all Institute staff. The nature of the Unit's work means we are involved in a diverse range of projects which span all the Institute's activities.

The Unit provides support services to the Director, the AIHW Board, the Executive, and the Ethics Committees. Between us, we manage the secretariat function for an alphabet soup of national information committees in the health, community services and housing assistance sectors. We take an innovative approach to our work, constantly seeking ways to make sure that the service we give makes it as easy as possible for our committee members to contribute to the achievement of excellent, nationally consistent health and welfare statistics and information.

Confidentiality of our data is of vital importance to the AIHW. The Executive Unit is first point of contact for questions of privacy issues at AIHW. One of our key responsibilities is ensuring that the Board's decisions regarding confidentiality of information held by the Institute are followed. The Unit has responsibility for the Institute's suite of privacy policies and procedures developed to help staff maintain the confidentiality of our data.

Some of the publications the Unit coordinates are: the Annual Report, the Work Program, AIHW input to the Portfolio Budget Statements and, in association with the Business Promotion and Media Unit the AIHW's newsletter, AIHW Access.

Unit staff have demonstrated their commitment to a collaborative and healthy corporate culture through their leadership of the Institute's Social Club which organises a host of functions and services for fellow Institute staff.

Executive Unit Staff

Margaret Fisher has headed the Executive since 1998. Margaret is Secretary to the AIHW Board and the Institute's Executive Committee and supports two national committees, the National Community Services Information Management Group and the National Advisory Group on Aboriginal and Torres Strait Islander Health Information and Data. Margaret's responsibilities also include managing the Unit's financial and human resources issues and overseeing the production of the Annual Report and Work Plan.

Margaret is interested in foreign culture and has recently spent a month in Vietnam teaching English on a volunteer basis to put into practice lessons learned from postgraduate studies at the University of Canberra. Margaret also loves spending time with family and friends, especially if sailing is involved.

Margaret Blood joined the Institute in February 2004. Margaret supports the Statistical Information Management Committee and the Health Data Standards Committee, and also provides administrative support for the Institute's involvement with the National Health Information Group and the National E-Health Transition Authority.

Margaret enjoys reading, travelling, jogging and hiking.

Sonja Seselja is a long-standing member of the Executive Unit, having joined the Institute in 2000. As Secretariat to the AIHW Board, Ethics, and Audit and Finance Committees, Sonja has extensive experience in relation to governance of the Institute. Sonja also supports the National Public Health Information Working Group and is President of the AIHW Social Club.

In her spare time, Sonja enjoys fine dining, ballroom dancing and shopping, and is kept busy chasing after her little boy.

from the Inside

Lisa Willett joined the Institute in April 2004. Lisa currently supports two national data committees—the National Community Services Data Committee and the National Housing Data Development Committee.

In association with the Business Promotion and Media Unit, she also coordinates *AIHW Access*. Lisa is the Unit's source of advice about how we can best exploit technology to enhance the service we offer to our many clients.

As Vice President of the AIHW Social Club Lisa takes an active interest in progressing the social aspects of the Institute.

Outside of work Lisa enjoys all sports, the outdoors and spending time with her young son.

Megan Davies is a recent recruit through the AIHW Graduate Program. Megan commenced in January this year after completing honours in psychology at the ANU. Megan is currently working on privacy issues pertaining to the Institute, which utilises her science/law background. Megan will also be playing an active role in the functions of the Ethics Committee and will be supporting the Unit's secretariat functions for the many national committees.

Megan enjoys spending time on the South Coast and playing social tennis with friends.

Wendy Jobson commenced work at the Institute in November 2002 on a job-share basis providing executive support to the Institute's Director. Wendy's flexibility and easygoing nature allow her to adapt to the ever-changing environment of executive support work.

Outside of work, Wendy enjoys working out at the gym and travelling.

Leonie Smorhun is the other half of the Director's executive support team. Leonie has the ability to juggle the various challenges she is faced with on a daily basis. She never fails to provide a personal and practical approach to her work.

Leonie enjoys taking long walks with Monty the dog, travelling and entertaining friends.

Wendy and Leonie are a great example of how job sharing works. Richard Madden describes it as follows: 'I am often not sure whose week it is: the service is seamless, all accomplished in a one hour changeover each Wednesday. They are a model for flexible working.'

Richard's view of the Executive Unit: 'This team supports a wide array of groups, across all sectors of the Institute. They are too frequently almost invisible, but the Institute is really fortunate to have such a skilled and committed team at its heart. I can't praise them enough.'



(Left to right): Wendy Jobson, Margaret Blood, Margaret Fisher, Megan Davies, Richard Madden, Leonie Smorhun, Lisa Willett, and Sonja Seselja.

This article highlights some of the more significant work undertaken during 2004/05 by the national health information committees that report to the National Health Information Group (NHIG) and for which the AIHW provides the secretariat. It also provides an update on the National Housing Data Agreement Management Group (NHDAMG). More information about these committees is on the AIHW website.

Statistical Information Management Committee

The Statistical Information Management Committee (SIMC) held its last meeting for 2004 on 8 November. The first meeting for 2005 was held on 22–23 March.

The November meeting of the SIMC considered proposals for national minimum data sets in relation to Outpatient Care, Mental Health Establishments and Community Mental Health Care. The SIMC also agreed to arrangements to improve the timeliness of data provision for national collections, including realistic standards for the timeliness of data supply and periodic reports on the extent to which timeliness standards are adhered to by both data providers and the AIHW.

During 2004 the SIMC provided advice on the advantages of using the national health information governance arrangements for developing and collecting the statistical information required to support the safety and quality agenda. It has now been agreed that safety and quality data items should be collected as part of a mainstream health data collection to reinforce their inclusion in the core business of healthcare, and that the National Health Information Group, and its standing committees including SIMC and the Health Data Standards Committee (HDSC), should oversee the identification, development and routine collection of this data under established processes. At its March 2005 meeting, the SIMC agreed on arrangements for taking this work forward.

Data linkage was another important area of focus for the SIMC during 2004. SIMC sponsored a project to assess the state of readiness of jurisdictions to undertake or permit health data linkage in hospital morbidity collections. A draft report outlining the findings of this project was considered by SIMC at its March 2005 meeting. With Australian Health Ministers' Advisory Council (AHMAC) funding support, SIMC is also sponsoring a series of pilot projects during 2004–05 to progress statistical data linkage within hospital morbidity data collections and between health data collections. During August 2004, the SIMC established a working group to consider the actions and support required to progress the development of a framework for a national protocol for the linkage of health care data. The working group held its first meeting on 22 March 2005, immediately before the SIMC meeting.

For more information, please contact the Secretary,
Ms Margaret Blood, on 02 6244 1123 or
margaret.blood@aihw.gov.au

Health Data Standards Committee

The Health Data Standards Committee (HDSC), chaired by Dr Ching Choi of the AIHW, advises the NHIG on national standards for data definitions and classifications for health. This includes the development and revision of the *National Health Data Dictionary*. The Version 12 supplement to the Dictionary was released during 2004, adding 95 new data elements or concepts to the Dictionary and modifying 66 data elements or concepts.

A significant milestone for the HDSC occurred during November 2004 when the AHMAC agreed to a four-year funding commitment (covering the period 2004–05 to 2007–08) for the work associated with the development and

maintenance of the *National Health Data Dictionary*. This commitment, which is in addition to the annual cost-shared budget allocation for projects to be undertaken by the AHMAC committees, reflects a welcome recognition of the central role that the *National Health Data Dictionary* plays in supporting the integrity and comparability of national health statistical information.

For more information, please contact the Secretary,
Ms Margaret Blood, on 02 6244 1123 or
margaret.blood@aihw.gov.au

National Housing Data Agreement Management Group

Following the introduction of the 2003 Commonwealth–State Housing Agreement (CSHA) in July 2003 a joint review was undertaken of the National Housing Data Agreement (NHDA) and the Agreement on National Indigenous Housing Information (ANIHI).

The NHDA was first established in the 1999 CSHA as a subsidiary agreement. The extensive review process reported back to the Housing Ministers' Advisory Committee (HMAC) in August 2004. It recommended that the NHDA developed in 1999 be retained for the 2003 CSHA which is a five-year agreement. It also recommended retention of the ANIHI.

As a result of the review the National Housing Data Agreement Management Group (NHDAMG) now reports to HMAC through the HMAC Policy and Research Working Group (PRWG) whereas it had reported directly to HMAC under the 1999 CSHA. This change brings a far greater interaction of the data side with the policy and research work of housing ministers.

Also under the new arrangements the National Housing Data Development Committee now reports to both the NHDAMG and to the National Indigenous Housing Information Implementation Committee. This joint approach ensures shared expertise across the full range of data development and reporting. The development of common approaches across the CSHA and related programs to defining and measuring need, alignment of national reporting requirements and the use of common standards should continue under this arrangement.

The role of the NHDAMG is to develop and manage data for mainstream housing programs, including public rental housing, community housing and state-owned-and-managed Indigenous housing. These data are provided for the Council of Australian Governments Report on Government Services as well as for national CSHA reporting. Housing assistance for Indigenous Australians has been recognised as a key component of the 2003 CSHA and the NHDAMG is focusing on further improvements in data about access to mainstream housing assistance by Indigenous households.

A major area of work for the NHDAMG in 2005 is the conduct of two important national tenant surveys. The National Social Housing Survey of public housing tenants and the National Social Housing Survey of community housing tenants will provide important data on the housing services delivered to tenants and the outcomes of provision of housing assistance. The data provide housing agencies with information that is used to understand the needs and concerns of tenants, areas requiring improved services and to demonstrate the value of the social housing sector.

For more information on the NHDAMG or other
housing information issues, please contact David Wilson
on (02) 6244 1202 or david.wilson@aihw.gov.au

METeOR: an inventive breakthrough @aihw

Continued from page 1

Foremost were the staff of the AIHW Metadata Management Unit, led by David Braddock, and including Heather Logie, Shubhada Shukla, Alison Tong Lee, Savindi Wijeratne, and Peter Menzel.

This team was backed up by the National Data Development and Standards Unit (NDDSU) at AIHW, led by Trish Ryan. The Unit worked closely with Nigel Mercer, an independent consultant, on the initial design and development of the METeOR system.

The METeOR project was guided by Anny Stuer, assisted by a Steering Committee from within the AIHW and a Reference Group comprising mostly representatives of the states and territories.

The system was built by a team from Synop Pty Ltd, headed by Peter Bailey.

AIHW Director Richard Madden outlined his vision for METeOR as a 'hub' of data standards, linking health, housing and community services data information. He also hoped that the mechanisms, processes and standards within METeOR would not only be the 'gold standard' for administrative and survey data as at present—the same standards could also cross into world of e-health and be used for clinical data.

'There is also the potential to use the standards in METeOR in other areas of government, and in whole-of-government approaches to metadata. METeOR could even be used as a global metadata registry for health, community services and housing assistance', Dr Madden said.

Guests at the launch were then treated to an entertaining 'Dave and Anny' show (David Braddock and Anny Stuer) as they rattled through some of METeOR's innovative features.

But the 'star' of the main show was undoubtedly James O'Loughlin, who gave an entertaining but at times serious address on using data sensibly, cleverly and well.

He said that we should not be come so obsessed with information or facts that we lose our sense of irony or humour. He then related the story of Paula Yates and Bob Geldof conveying their hope that they wanted only a 'normal life' for their children 'Fifi Trixabelle, Peaches Honeyblossom, and Pixie'.

James also said that his experience with inventions had shown him that the benefits of any new technologies were not necessarily proportional to the money invested in them.

Despite hosting The New Inventors, James said he was 'naturally suspicious' of new technology.

'I heard about this "clever" fridge the other day that beeped loudly if you accidentally left the door open. I thought, "If it's that bloody clever why can't it shut the door as well?"'

'Or what about the person who asked for a leaf blower that was quieter, and maybe incorporated some exercise into its operation. Had they thought of a broom?'

James also talked about inventions and innovations (such as METeOR) being not only good for the economy—they were 'good for the soul'.

'In a world where there is so much information, where you can feel like you are being spied on, information is nevertheless an enormous resource', Mr O'Loughlin said.

'And the more accurately you can analyse it, the better you can direct your resources to solving problems.'

'Data can be a friend, an ally and a tool (always a tool), but it depends on us being clever and innovative, and how well we are able to harness it.'

'With those thoughts I would like to declare METeOR "open" and wish all those who sail with him or her all the best.'

For more information about METeOR, visit
<http://meteor.aihw.gov.au>



The Hon. Peter Collins, James O'Loughlin, David Braddock, Anny Stuer and Richard Madden at the METeOR launch.



Spotlight on Dr Anny Stuer

If there has been one constant in the professional and personal life of Anny Stuer then it would have to be change. Living her life between the two quite distinct cultures of Australia and France, and never afraid of rising to new work challenges, Anny Stuer, Head of the Business and Information Management Division at AIHW, certainly seems very comfortable with change. It could even be said that she has a certain sense of the explorer about her.

Born and brought up in France, it was Anny's love of the wide open spaces that drew her to Australia in her early twenties.

Having already completed a languages degree majoring in English, and with a 12-month stint as an exchange student in the United States under her belt, Anny felt the urge to explore further afield than the familiar surroundings of France.

'During my time in the US I was lucky enough to travel the length and breadth of the country.'

'What I found fascinating in the US was the immensity of the landscape and the wilderness, so in many ways I felt a little bit claustrophobic on returning to France.'

Wishing to continue with her passion for languages and linguistics, Anny came to Adelaide as an exchange teacher, teaching French and German, while also enrolled as a PhD student in France. But Anny soon moved to Canberra and changed the topic of her PhD away from linguistics.

'I found that quite a lot of work had already been undertaken on my original topic, so I was encouraged to focus instead on French immigration and settlement in Australia, which I did through the Department of Demography at the Australian National University.'

'My thesis covered the historical, economic and cultural aspects of the French presence in Australia, all based on very scattered and disparate records, and involved creating and analysing a good deal of statistics to reveal their patterns of immigration and settlement.'

This experience paved the way for Anny to use these new-found demography skills in her career that followed, not just in research and statistics, but also expanding into the areas of policy and business development, and client relations.

Anny's career path took her to national organisations such as the ANU, the Department of Immigration, the Department of Sport and Recreation, and the Department of Employment,

Education and Training (as it was then known), with a stint in private business thrown in for good measure.

So, with such variety, what have been some of the highlights?

'Quite early on I took on the job of editing the contents of a bicentennial encyclopaedia on the People of Australia at the ANU. I edited some 300 articles by just about every Australian demographer and historian.'

'This was such a fantastic opportunity and it allowed me to become very attuned to the issues of style editing versus content editing—the sort of thing that we do here at AIHW all the time.'

Anny also singles out her time in education and training as being particularly interesting.

'I took on numerous projects over the years within the Department of Employment, Education and Training, which have not only been very challenging but have led me in one way or another to the work that I do at AIHW now.'

'For some time in the 1990s, for example, I headed up an area dedicated to competency development, which was responsible for encouraging the health professions to adopt competency standards. We worked very closely with nurses, dentists, physiotherapists, doctors and other health professionals in developing and applying a competency-based approach to education and training, as distinct from a qualifications-based approach, and this was very enlightening for me, to be involved in the health sector in this way.'

Anny also had the opportunity to use the experience she had gained within the private sector to establish an international consultancy business within the Department of Employment, Education and Training, providing employment services and training programs to other countries.

'The idea that public servants could be consultants and command market rates was quite new and exciting, and it took some perseverance to turn the initial scepticism within the organisation to encouragement and support.'

'By then I realised that I found it energising to be at the helm or in the midst of new initiatives.'

'Of course it meant managing change, and that is not easy, but every time we created a dynamic and exciting environment, and we all got a buzz from it.'

The main job, however, that prepared Anny for work at the Institute was heading the Overseas Support Branch of the

Department of Immigration. It was her first time working in an operational corporate support role rather than in a policy, research or commercial area.

'In coordinating and supporting the operations of some 80 offices worldwide I became very interested in what makes organisations not only work well, but also work better. I was able to combine initiatives such as regional business planning, an overseas training program, a performance information system and email communications between posts, with IT and financial resources. What made each of the elements work well was that they reinforced each other under the one support framework.'

And so Anny joined AIHW in 2000 as the Head of the then Economics and Business Services Division. She found herself in charge of all corporate functions, and two areas of statistical analysis—labour force and expenditure.

'Having these latter two areas under my wing at that early time has given me a good idea of what the statistical units need from the business services side, and at the same time making me far more aware of the ongoing challenges that business services units face in meeting those needs.'

When the Institute established a fourth division in mid-2003, functions were redistributed and Anny saw the opportunity for her own Division to focus more on information infrastructure as a way of strengthening the business of the Institute.

'From a business perspective, we had made some significant progress, like establishing a transparent cost recovery regime, introducing an Institute-wide business planning process, streamlining many of our policies and guidelines, and linking training programs to our business needs.'

'We had also achieved some milestones in information management, such as putting data cubes on our website, increasing our IT systems' performance, and improving the management of our data collections.'

But as Anny sees it, 'Information is our business, and there seems to be no end to what we need to consider, evaluate, engineer and re-engineer when it comes to information management'.

So, Anny's division became the Business and Information Management Division, and the new focus has generated more initiatives.

'We have completely re-engineered our internal data catalogue and created a catalogue of AIHW data holdings for external users. We have restructured and redesigned both our Intranet and website. And we have just completed the development of our new metadata online registry, METeOR.'

'We are also focusing on producing better business information, such as financial and workforce reports, and analyses of our business performance, web traffic and publications sales.'

Anny sees the ongoing challenge for the Division as being able to balance what must be achieved on a daily basis while striving to do better for tomorrow.

'It's the balance between introducing innovations so we can continue to be at the cutting edge, while remaining cautious in terms of what we can afford and maintain.'

It is not difficult to see that Anny's job is a major driving force for her, and that she is constantly exploring new horizons, trying to find better ways of doing business.

In her own time Anny is still in exploration mode, albeit of a different kind. She takes a break from her busy work schedule in almost total seclusion, with her husband at their home in the bush, just outside Canberra.

'Our house is my retreat. It's in a beautiful spot overlooking a gorge and completely surrounded by hundreds of acres of reserve so there's not another house in sight—we are just there for the space, the trees and the wild. Add sacred music by Purcell, Charpentier or Tallis and it's perfect.'

Anny travels quite a bit, returning just about every year to her roots in France. She has also travelled pretty much the whole of Australia in the time she has lived here, and almost everywhere else in between.

'When I am on holidays the thing I enjoy most is just to be on the road and not have any plans of where to stop at the end of the day—a complete contrast to my working life.'

And if there were more hours in the day is there anything else outside work that she would like to do?

'Yes, I hope to have gathered enough material in my life to feed a couple of novels! I know a lot of people say they would like to write a book but I hope that I will be one who succeeds!'

'I would also like to get back to linguistics, picking up my Spanish, German and Russian again—but also delving into the connections between language and culture.'

And on that note it seems that Anny will always be balancing her love of France, with its deep richness soaked in history, and the newness of Australia and the sense of eternity that she gets when in the Australian bush.

'Where I will eventually settle and call home, I don't know, but I don't think it really matters where you end up living your life—it's where you can keep mind, body and soul together that counts!'



Dr Paul Magnus
AIHW Medical Advisor

Which relatives should we invite?

A statistic can tell us nothing

Seriously? Well, let's just say that a statistic *on its own* can tell us little or nothing. We always need to compare it with something else if it's to make any sense. A death rate for a disease that is, say, 500 per 100,000 people makes little sense unless we compare it—either with the figures for previous years, with contemporary rates applied to other settings or groups, or with the rates for another disease.

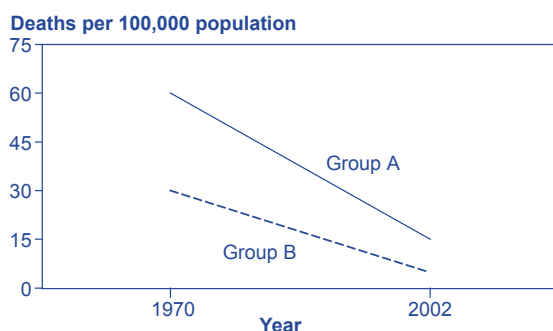
Most basically, we use comparisons in health statistics to find out if something is large, small or middling, getting better or worse or staying the same. We can then make the value judgment that things are good, bad or so-so. Most of the time we're probably not making these comparisons very consciously, but we always need to make them. Otherwise we have no perspective.

But some comparisons can be very tricky. Take measures of inequality. Typically, a level of disease or risk factor for one population group is compared with that of one or more other groups. A standard way of doing this is to express the rate of one group as a ratio of the other—for example, 'men have three times women's rate of heart disease deaths'. This particular inequality is described as a 'mortality ratio' of 3. It is a well-accepted and easily understood approach. Here, the comparison works.

Which relatives are trendy?

But what happens if we want to assess *trends* in inequality? Say we have shown that two groups are unequal in some respect but we want to know if this inequality has grown bigger, smaller or neither over time. As a recent example, this was a question that the Institute tackled in a recent Bulletin. We were comparing long term mortality trends in male Australian 'manual' with those of 'non-manual' workers.

Consider the example in the figure below:



In the figure both groups A and B have had a huge fall in mortality rates from 1970 to 2002. Also, the gap between the two groups—the difference between their rates—has narrowed markedly. In 1970 the gap was 30 deaths per 100,000 and in 2002 it was only 10. So can we say that the inequality has reduced since this gap has narrowed?

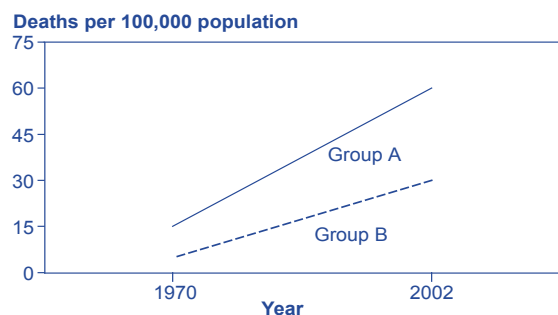
Well, not if we go by comparing the *ratios* over time. The ratio of A/B has now increased, from 2 in 1970 (60/30) to 3 in 2002 (15/5). So if we use ratios as a measure here—and remember we said earlier that they're a well-accepted standard—the inequality has actually increased even though the rates have converged.

Does this make sense? Has health really worsened for group A in our example? Surely not. Yes, group A's 2002 *position*, relative to group B, is now worse, so in that sense the inequality has 'widened'. But in other terms group A's health has clearly improved and the absolute gap has actually narrowed.

So which measure should we choose to measure trends in inequality—the change in the gap or the change in the ratios? If you were publishing a report with the results in our example above, would you say that inequality was increasing or decreasing?

I would submit that it has to be the latter. The commonsense interpretation is that the two groups have become more equal. To assess trends in inequality, the change in gap is the better measure and the change in ratios can be quite misleading.

Not convinced? Then consider the situation in the figure below. It is the precise mirror image of the one above.



In this case, both rates are now increasing and the gap is progressively widening. Things are surely getting worse and more unequal. But hang on: the *ratio* of A/B has progressively fallen. It started out as 3 in 1970 and finished as 2 in 2002. If you were to

go by the change in ratios, you'd have to maintain that inequality was actually reducing. Would that really make sense? Would anyone dance a jig of joy over a picture like that?

I rest my case. When assessing trends in inequality, the gap is the realistic measure.

Of course, there are many other methods and issues in measuring inequalities, especially if trends are not the matter in question. And for assessing inequalities at any one point in time, ratios are always of interest. But I won't go into those other issues, except for the point below.

A final point about small points

The example I've used above also raises another point that should always be borne in mind about comparing rates: the smaller the rates involved (such as in 2002 in the first example) the greater the chance that the relativities will look large. This isn't limited to the field of inequalities; it can apply to many situations.

Say we find that young adults exposed to a certain risk factor have 5 times the death risk of those not exposed. We'd probably be much impressed with this so-called relative risk of 5, especially if told that among older people it was only 1.5. It's not unusual to see a sensational news story along these very lines.

But what if we looked closer and found that the actual death rates among the older group were 300 per 100,000 for the exposed and 200 for the rest, whereas for the younger group they are only 5 and 1? The excess 100 deaths per 100,000 among the exposed older people has far more public health significance than the 4 for the younger group. The relative risk for the younger group is true but can be quite misleading if we don't take a wider view.

It follows that we should always try to have a broad context when judging inequalities in particular and relativities in general. Among many other things, we need to think not only about comparative rates between groups but whether the rates themselves are high or low by some accepted standard.

The moral of all this is that, depending on the occasion, we need to be very careful about which relatives we embrace.

This article has been adapted from a section Paul Magnus wrote in a recent bulletin with Michael de Looper (AIHW: de Looper M & Magnus P 2005. Australian health inequalities 2: trends in male mortality by broad occupational group. Bulletin no. 25. AIHW Cat. No. AUS 58. Canberra: AIHW.) Advice from Dr Ching Choi is very much appreciated.

Catalogue of Holdings of AIHW Data

A Catalogue of Holdings of AIHW Data is now available on the Institute's website: www.aihw.gov.au. The catalogue furthers our commitment to providing statistical information that governments and the community can use to promote discussion and make decisions in the health, housing and community services sectors.

The catalogue contains details about a selection of data held by the Institute for statistical purposes. It has a search feature that can be used to find data holding details according to subject and/or time period. This enables researchers to readily find information on the data holding that they are seeking.

As well as a description of the data holding, details such as scope, coverage, methodology, data availability and contacts for a particular data holding are included. There are also links to related data holdings and documents on the website.

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In redesigning our site, we took note of regular feedback received from users and AIHW staff, together with the results of a questionnaire to which many Access readers responded.



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New features of the redesigned website are:

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- a 'quick links' feature, updated regularly to give you quick access to the most popular areas of the website
- a prominent 'news features' area in the centre of the homepage where we will highlight events, services or recently updated information on the site
- our new Catalogue of Holdings of AIHW Data—a searchable register describing a selection of data collections held by AIHW.

Our new site has been designed with great care to make it accessible to the widest possible range of users, including those with visual impairments and slow internet connections.

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