

Appendix 1. Methods and Search Results

Methods

Our objective was to identify what information on Indigenous child health is currently being collected and how it is accessed and used. The term *Indigenous* refers to all people who identify as Aboriginal or Torres Strait Islander (ATSI) origin. We recognise the importance of the Indigenous concept of health as a holistic concept including social and emotional wellbeing.

Data Sources

We searched PubMed and Informat databases and the internet for information related to Australian Indigenous child health using the following key words/phrases: Indigenous/Aboriginal, Child/Children, Health, Australia. The websites of State and Federal Departments of Health, the Australian Bureau of Statistics (ABS), the Australian Institute of Health and Welfare (AIHW) and research institutions involved with Indigenous health research (e.g. the Sax Institute, Telethon Institute for Child Health Research and The Menzies School of Health Research) were also searched. The Google search engine was used to conduct a general internet search using the keywords above. Relevant documents were reviewed for information about data sources, collection methods and useful references.

Inclusion criteria

We included data collections that met the following criteria:

- National scope or state/territory collection from which national estimates may be determined
- Data published in or after 2000
- Information on children aged <15 years
- Indigenous status recorded to allow analyses of health outcomes
- Information about health outcomes/indicators

Data Extraction

The following information was extracted for each document:

- Data Source
- Agency Responsible for the collection
- Variables collected
- Quality of Indigenous identifiers
- Time periods for collection(s)
- Who uses the data collected
- Purpose of the data collection and any specific impacts resulting from its use
- Limitations of the data (particularly in terms of Indigenous child health)

Data relating to small samples collected for specific research projects were excluded.

Search results

From the literature and internet searching, we identified 459 titles published in or since 2000. After exclusion of 230 irrelevant titles and 9 duplicate titles, 220 abstracts were reviewed. Of these, 187 did not meet our inclusion criteria because they were either small studies about specific communities or were based on routine data collected by states/territories. We identified and reviewed 15 national data collections which included Indigenous status and age (Table 1); six national data collections and reports specific to Indigenous health (Table 2); and 12 national data collections with a primary focus on child health (Table 3).

In the process of excluding data collections that did not meet our inclusion criteria we noted three important state-based projects that warranted inclusion (Table 4). The Western Australia Aboriginal Child Health Survey (WAACHS) and the Study of Environment on Aboriginal Resilience and Child Health (SEARCH) are potentially nationally representative and useful sources of information due to their size and specific focus on Indigenous child health outcomes and determinants. The Northern Territory Aboriginal Health Key Performance Indicators (NTAHKPI) collection was included due to its coverage of Aboriginal Medical Services and future potential for national coverage.