# Exploring the health of culturally and linguistically diverse (CALD) populations in Queensland: 2016–17 to 2019–20

## **Fact sheet 5:** Overview of hospitalisation, death and potentially avoidable deaths.

**Purpose of this factsheet:** To provide a summary of key findings of Hospitalisation, death and potentially avoidable death rates.

This fact sheet is part of the Queensland Health CALD Data Report release. For more information, see the full report on the *Queensland Health website*.

### Background



The Australian Bureau of Statistics (ABS) defines the CALD population mainly by country of birth, language spoken at home, English proficiency, or other characteristics (including year of arrival in Australia), parents' country of birth and religious affiliation.

A hospitalisation is an episode of admitted patient care which can be a total hospital stay or a portion of a hospital stay (from admission until discharge, transfer or death) or a portion of a hospital stay beginning or ending in a change of type of care (e.g. from acute care to rehabilitation).



Potentially avoidable deaths include deaths that are potentially preventable through individualised care and/or treatable through existing primary or hospital care.

As part of the Australian Health Performance Framework (AHPF), it is important to examine trends and patterns in life expectancy, mortality rates and major causes of death. This can help evaluate health strategies and guide policymaking.



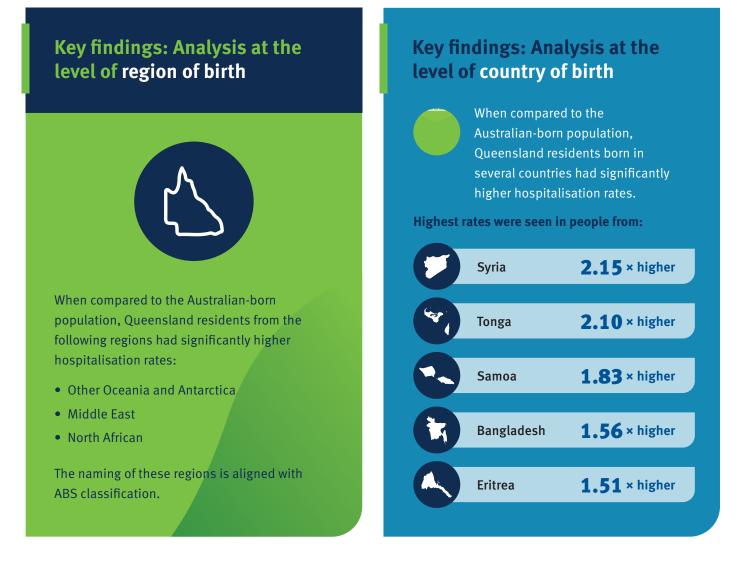
Rates of death and leading causes of death differ between population groups due to variations in population characteristics, causes of death at different ages, characteristics of the places where people reside, the prevalence of illness and risk factors and access to health services.

**Please note:** This report was developed to inform evidence-based health service planning and delivery. It should not be interpreted as performance indicators for the communities mentioned. The findings present an opportunity for further discussion and exploration to unpack underlying issues at community and system levels.



- This study explored hospitalisation, death and potentially avoidable deaths and compared the rates between overseas born and Australian-born populations in Queensland.
- Analysis of these indicators did not highlight any specific health conditions, as was in the case for the analysis of potentially preventable hospitalisations (PPH), where data was adequate to draw meaningful conclusions.
- Disparities in health outcomes were particularly visible when data were disaggregated by region and country of birth, compared to analysis by broad population categories.

### **Hospitalisation rates**



#### **Death rates**

### Key findings: Analysis at the level of region of birth



No region had significantly higher death rates when compared to the Australian-born population.

### Key findings: Analysis at the level of country of birth

When compared to the Australianborn population, Queensland residents born in several countries had significantly higher death rates.

#### Highest rates were seen in people from:



#### Potentially avoidable death rates

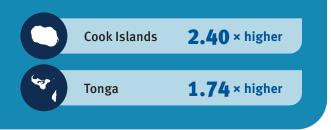
### Key findings: Analysis at the level of region of birth



When compared to the Australian-born population, Queensland residents from Other Oceania and Antarctica had significantly higher potentially avoidable death rates.

### Key findings: Analysis at the level of country of birth

When compared to the Australian-born population, Queensland residents born in the following countries had significantly higher potentially avoidable death rates:



NESB – Non-English Speaking Background MESB – Mainly English Speaking Background CALD – Culturally and Linguistically Diverse

#### For more information email: multicultural@health.qld.gov.au

