

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

Fact sheet 6: Overview of health outcomes for people from Other Oceania and Antarctica region.

Purpose of this factsheet: To provide a summary of key findings highlighted in this report for people from Other Oceania and Antarctica region.

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](#).



Countries included in this region



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.

The ABS categorises the countries of the world into nine major groups. However, for the purpose of this report, these groups were further classified into three broad categories based on country of birth:

- Australian born
- Born outside Australia and from a country with a mainly English speaking background (MESB)
- Born outside Australia and from a country with a non-English speaking background (NESB).

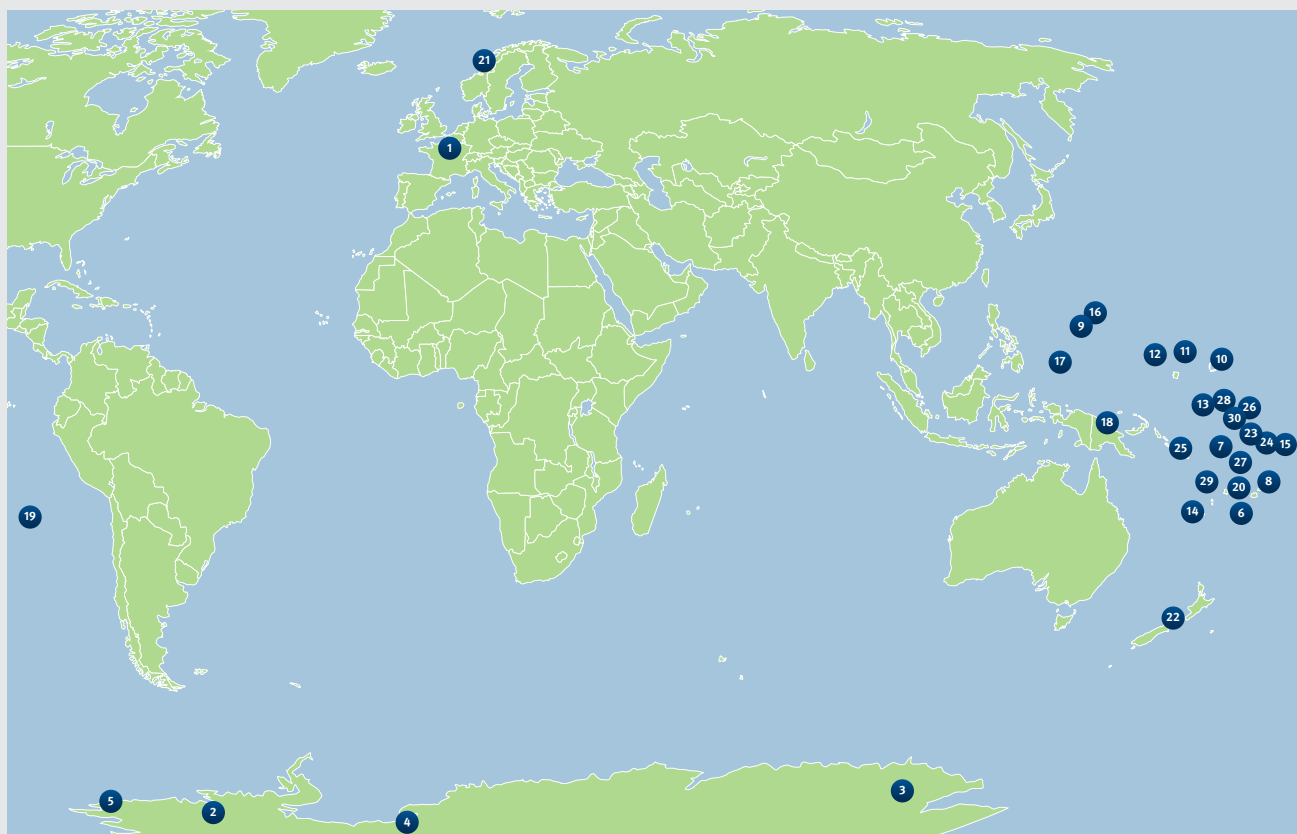
The assignment of MESB and NESB population groups were based on a person's self-reported country of birth, regardless of whether English was their first or preferred language, or their length of residence in Australia.

The three broad categories mentioned above were further disaggregated into 14 regions and countries. For more info, see Appendix B of the [full report](#) (page 92).



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.

Countries included in Other Oceania and Antarctica:



- | | | |
|------------------------------------|-------------------------------------|-----------------------------------|
| 1. Adelie Land (France) | 11. Marshall Islands | 21. Queen Maud Land (Norway) |
| 2. Argentinian Antarctic Territory | 12. Micronesia | 22. Ross Dependency (New Zealand) |
| 3. Australian Antarctic Territory | 13. Federated States of Nauru | 23. Samoa |
| 4. British Antarctic Territory | 14. New Caledonia | 24. Samoa American |
| 5. Chilean Antarctic Territory | 15. Niue | 25. Solomon Islands |
| 6. Cook Islands | 16. Northern Mariana Islands | 26. Tokelau |
| 7. Fiji | 17. Palau | 27. Tonga |
| 8. French Polynesia | 18. Papua New Guinea | 28. Tuvalu |
| 9. Guam | 19. Pitcairn Islands | 29. Vanuatu |
| 10. Kiribati | 20. Polynesia (Excludes Hawaii) nec | 30. Wallis and Futuna |

Key findings: Analysis at the level of region of birth



Potentially preventable hospitalisations (PPH) rate

When compared to the Australian-born population, people from Other Oceania and Antarctica region had:



3.66 × higher rate of vaccine-preventable conditions



1.54 × higher rates of chronic conditions



Lower rates of acute conditions

Top 12 PPH conditions seen in people from Other Oceania and Antarctica region

Other vaccine-preventable conditions

9.81 × higher than Australian-born population

Perforated/bleeding ulcer

2.40 × higher than Australian-born population

Rheumatic heart disease

2.31 × higher than Australian-born population

Diabetes complications

2.02 × higher than Australian-born population

Bronchiectasis

2.01 × higher than Australian-born population

Hypertension

1.76 × higher than Australian-born population

Asthma

1.64 × higher than Australian-born population

Influenza and pneumonia (vaccine-preventable)

1.59 × higher than Australian-born population

Congestive cardiac failure

1.49 × higher than Australian-born population

Pelvic inflammatory disease

1.35 × higher than Australian-born population

Angina

1.21 × higher than Australian-born population

Iron deficiency anaemia

1.11 × higher than Australian-born population

The naming of these regions is aligned with ABS classification.



Hospitalisation rate (all causes)

When compared to the Australian-born population, people from Other Oceania and Antarctica region had **1.20 × higher** rates of hospitalisations than Australia-born population.



Potentially avoidable deaths rate (all causes)

When compared to the Australian-born population, people from Other Oceania and Antarctica region had **1.21 × higher** potentially avoidable death rates than Australia-born population.



Death rates (all causes)

Analysis of death rates by region of birth revealed that no region had significantly higher death rates than the Australian-born population.

Key findings: Analysis at the level of country of birth



Potentially preventable hospitalisations (PPH) rate

Compared to the Australian-born population, people from the following countries in Other Oceania and Antarctica region had significantly higher rates of PPH (all causes)



Samoa

2.08 × higher



Fiji

1.14 × higher



Cook Islands

1.99 × higher



Papua New Guinea (PNG) **1.05 × higher**



Tonga

1.90 × higher

Compared to the Australian-born population, people from the following countries in Other Oceania and Antarctica region had significantly higher rates of:

Vaccine-preventable conditions



Chronic conditions



Acute conditions





Hospitalisation rate (all causes)

Compared to the Australian-born population, people from these countries in Other Oceania and Antarctica region had significantly higher rates of hospitalisations (all causes).



Tonga
2.10 × higher



Samoa
1.83 × higher



Cook Islands
1.38 × higher



Potentially avoidable deaths rate (all causes)

Compared to the Australian-born population, people from these countries in Other Oceania and Antarctica region had significantly higher rates of potentially avoidable deaths (all causes).



Cook Islands
2.40 × higher



Tonga
1.74 × higher



Death rates (all causes)

Compared to the Australian-born population, people from these countries in Other Oceania and Antarctica region had significantly higher death rates (all causes).



Tonga
1.75 × higher



Cook Islands
1.57 × higher



Samoa
1.29 × higher



Definitions

This study analysed and reported on the following health outcomes/variables:

- **Potentially preventable hospitalisations (PPH)** – hospital admissions that potentially could have been prevented by timely and adequate health care in primary care and community-based care settings. These include:
 - **Vaccine preventable condition** – infectious condition for which a vaccine exists. They are classified into vaccine-preventable influenza and pneumonia and *other vaccine-preventable conditions* such as *whooping cough*, *acute poliomyelitis*, *varicella (chicken pox)*, *measles*, *tetanus*, *mumps* and *rubella*.
 - **Chronic condition** – a long lasting health condition with persistent effects and their social and economic consequences can impact on peoples' quality of life. Most may be prevented through behaviour and lifestyle modification but can also be managed effectively through timely care to prevent deterioration and hospitalisation. This report analysed selected chronic conditions: *asthma*, *angina*, *Chronic obstructive pulmonary disease (COPD)*, *congestive heart failure*, *diabetes complications*, *hypertension*, *iron deficiency anaemia*, *rheumatic heart disease* and *bronchiectasis*.
- **Acute condition** – health condition that develops suddenly and lasts for a limited time. Hospitalisation can be prevented with timely and adequate care (usually non-hospital). This report analysed selected acute conditions: *Urinary tract infections (UTI)*, gangrene, *pelvic inflammatory disease (PID)*, *perforated/ bleeding ulcer*, *convulsions*, *dental conditions*, *ear, nose and throat (ENT) infections*, *cellulitis*.
- The study also analysed rates of hospitalisation, deaths, and potentially avoidable deaths.
- For definitions of these variables, see appendix C and D in the *full report*.

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

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



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