

# Terminology and definitions

## **Aboriginal and Torres Strait Islander people:**

Referred to as ‘Indigenous Queenslanders’ or ‘Indigenous Australians’.

## **Accessibility/Remoteness Index of Australia (ARIA):**

Remoteness was determined using the six categories of *Remoteness areas* classification: major cities, inner regional, outer regional, remote, very remote, and migratory.<sup>198</sup> ARIA scores are based on how far the population must travel to access services.

**Adults:** Usually defined as those aged 18 years and older.

**Age standardisation:** To facilitate comparisons between various populations with different age structures, rates may be adjusted for the age structures by relating them to a reference population<sup>199</sup> (in this report the 2001 Australian population). Age standardised prevalence rates are used to compare Queensland with other jurisdictions and nationally, where they are available. Crude prevalence is more often also used to compare hospitalisation rates within Queensland.

**Amphetamines:** refers to both amphetamine and methamphetamine (most commonly known as ‘ice’ or ‘crystal’). The broad category of amphetamines in the Australian Standard Classification of Drugs of Concern includes methamphetamine as a sub-category.<sup>200</sup> Illicit drug use includes the pharmaceutical misuse of amphetamine for non-medical purposes. It is noted that the vast majority of amphetamine used in Australia is methamphetamine.<sup>135</sup>

**Australian Bureau of Statistics (ABS):** Australia’s official statistical organisation and a statutory authority.<sup>201</sup>

**Australian Dietary Guidelines:** The *Australian dietary guidelines* recommend the consumption of five food groups<sup>99</sup>: 1) fruit 2) vegetables and legumes/beans 3) milk, yoghurt, cheese and/or alternatives 4) lean meats and poultry, fish, eggs, tofu, nuts and seeds, and legumes and beans and 5) grains (includes cereal foods, mostly wholegrain and/or high cereal fibre varieties). Consumption is recommended in quantities that are appropriate to life stage, sex, and energy needs.

## **Australian Institute of Health and Welfare (AIHW):**

Major agency for health and welfare statistics and information.<sup>202</sup>

**Body mass index (BMI):** Refers to a simple index of weight-for-height, calculated as  $BMI = \text{weight (kg)} / \text{height (m)}^2$ , that is commonly used to classify underweight, healthy weight, overweight and obese (refer to separate entries for each BMI category).<sup>49</sup> BMI for children takes into account the age and sex of the child and has different cut-offs for BMI categories than those used for adults.<sup>203</sup>

**Children:** Usually defined as those aged 5–17 years.

**Chronic conditions of ageing and disability:** Includes the ICD chapters for musculoskeletal conditions, nervous system diseases, mental disorders (including dementia and substance use disorders), endocrine, nutritional and metabolic disorders including diabetes, and diseases of eyes and ears.

**Chronic obstructive pulmonary disease (COPD):** Term to describe chronic lung diseases that limit lung airflow, and includes emphysema and chronic bronchitis.<sup>204</sup>

**Clandestine laboratories:** Refers to an illicit operation that has occurred in properties and areas identified as being subject to drug manufacture, chemicals use, waste storage or any other activity carried out either completely or in part, to manufacture illicit drugs or substances.<sup>205</sup>

**Condition (health condition):** A broad term that can be applied to any health problem, including symptoms, diseases and certain risk factors, such as high blood cholesterol and obesity. Often used synonymously with disorder or problem.

**Confidence interval (CI):** In general, a range of values expected to contain the true value 95% of the time (95% CI).<sup>199</sup>

**Crude rates:** The number of cases in a given time period in a geographic area divided by the total number of persons in the population.<sup>199</sup> Crude rates more accurately reflect the health burden in the community.

**Dietary factors combined:** Estimated burden of disease due to joint effects of all diet-related risk factors included in the analysis.<sup>24</sup> More detailed information on page 70.

**Disability:** Temporary or long-term reduction of a person’s capacity or function, including illness.<sup>199</sup>

**Disability adjusted life year (DALY):** Measure of overall burden of disease and injury, where the DALY for a disease or condition is the sum of the YLL and YLD.<sup>24</sup>

**Discretionary or unhealthy foods:** The *Australian dietary guidelines* describe discretionary foods as those that are not essential or a necessary part of a healthy dietary pattern.<sup>99</sup> These foods are high in kilojoules, saturated fat, added sugars and/or salt or alcohol. The ABS has identified a group of foods consistent with the guidelines based on the national food recall survey in 2011–12.

**e-cigarettes:** Refers to electronic cigarettes, otherwise known as electronic nicotine delivery systems or personal vaporisers containing nicotine, and are used in a manner than simulates smoking.<sup>52</sup>

**Financial years:** Reported using the convention, 2015–16.<sup>206</sup> Periods covering two full years are reported using the convention, 2015–2016.

**Food security:** Refers to the constant access to sufficient, safe, nutritious food to maintain a healthy and active life, including the financial resources to purchase food.<sup>100</sup>

**Gross domestic product (GDP):** Equivalent to total national expenditure plus exports of goods and services minus imports of goods and services.<sup>206</sup>

**Health adjusted life year (HALE):** Refers to the average number of years at birth that a person can expect to live in full health if the current patterns of mortality and disability continue throughout their life.<sup>199</sup>

**Health gap:** The health gap between Indigenous and non-Indigenous Australians is illustrated by relative rate differences in DALYs between the two populations, for individual risk factors that contribute to disease burden.<sup>24</sup>

**Healthy weight:** Refers to the category classified as a body mass index in the range of 18.50–24.99.

**Homeless:** A person is considered to be homeless if they do not have suitable accommodation and their current living arrangement is in a dwelling that is inadequate or has no tenure (or initial tenure is short and not extendable) or does not allow them to have control of, and access to, space for social relations.<sup>21</sup>

**Hospital and Health Services (HHSs):** Queensland has 16 HHSs, of these 15 HHSs are geographically based. Children's Health Queensland HHS is related to services provided to children and is not geographically based.

**Hospitalisations:** The term used for the total number of separations in all hospitals (public and private) that provide acute care services. A separation is an admitted episode of care which can be a total hospital stay or a portion of a hospital stay ending in a change of status.

**Hypertension:** Prolonged elevation of the blood pressure also referred to as high blood pressure.

**Illicit drug use:** Includes the use of illegal drugs, non-medical use of pharmaceutical drugs and misuse of substances.<sup>52</sup>

**Incidence:** Number of new health-related events (for example, illness or disease) in a defined population in a defined period of time.<sup>199</sup>

**Indigenous Queenslanders:** Refers to Aboriginal and Torres Strait Islander people who are usual residents of Queensland.

**Infant mortality rate:** Number of deaths of children under one year of age in one calendar year per 1000 live births in the same calendar year.<sup>68</sup>

**International Classification of Diseases (ICD):** Standard classification of specific conditions and groups of conditions determined by an internationally representative group of experts and used for health records.

**Joint effects (burden of disease):** The impact of multiple risk factors on disease burden that takes into account the complex interaction and overlap of risk factors on disease outcome.<sup>24</sup>

**LGBTQI:** Refers to people and families who identify as lesbian, gay, bisexual, transgender, queer and intersex.<sup>18</sup>

**Life expectancy:** Average number of additional years a person of a given age and sex might expect to live if the age-specific death rates of the given period continued throughout their lifetime.<sup>199</sup>

**Lifestyle related chronic conditions:** Defined in this report as a group of seven chronic conditions that are major causes of disease burden and have the highest attributable risk factor burden (excluding alcohol related effects). They include coronary heart disease, stroke, lung cancer, colorectal cancer, breast cancer, COPD and diabetes. Diabetes is excluded from hospitalisations.

**Low birth weight:** In this report low birth weight includes all births (still born and live births of at least 20 weeks gestation or greater than 400g) with a birthweight less than 2500g, excluding only those for whom no weight was recorded. This is consistent with Queensland Government priorities reporting.<sup>207</sup> Nationally, low birthweight is defined as less than 2,500 grams and excludes multiple births, stillbirths and births of less than 20 weeks gestation.<sup>208</sup> The National Core Maternity Indicator definition differs again.<sup>209</sup>

**Maternal smoking:** Refers to women who smoke tobacco during pregnancy.<sup>38</sup>

**National Health and Medical Research Council (NHMRC):** Australia's leading body promoting development and maintenance of public and individual health standards.<sup>210</sup>

**Neonatal death:** Refers to the death of a live-born baby up to 28 days of age.<sup>38</sup> Perinatal deaths include neonatal deaths and stillbirths (that is, fetal deaths).

**Non-discretionary or healthy foods:** The *Australian dietary guidelines* describe non-discretionary foods as those that are an essential part of a healthy dietary pattern.<sup>99</sup>

**Non-melanoma skin cancer (NMSC):** Includes basal cell carcinoma and squamous cell carcinoma.

**Notifications:** Reports of specified health conditions to government by medical practitioners, pathology laboratories and hospitals.<sup>47</sup> In Queensland, this is legislated by the *Public Health Act 2005*.

**Obese:** Refers to the weight category classified as a body mass index (BMI) in the range of 30.00 or more.<sup>49</sup> The obese category is classified as: class I where BMI is 30.00–34.99, class II where BMI is 35.00–39.99, and class III where BMI is 40.00 or more.<sup>49</sup> Severely obese is the combined prevalence of class II and class III obesity.

**Organisation for Economic Co-operation and Development (OECD):** Group of 34 member countries using information to help governments foster prosperity and fight poverty through economic growth and stability.<sup>71</sup> Australia became a member in 1971.

**Overweight:** Refers to the category classified as a body mass index in the range of 25.00–29.99.

**Patient days:** Refers to occupied bed days for patients in hospitals and day surgery units.<sup>75</sup>

**Perinatal deaths:** Includes all stillbirths (fetal deaths) of at least 400g birth weight or at least 20 weeks gestation, and neonatal deaths of live-born babies up to 28 days of age.<sup>38</sup> The recording of stillbirths varies by jurisdiction.<sup>2</sup> In Queensland, in addition to a doctor or coroner and one or both parents, other informants may provide the second part of the notification to fully register a perinatal death. In Queensland, stillbirths are registered as a birth and a death, whereas in most other jurisdictions they are only entered as a stillbirth as part of the birth registration process. These differences result in different reporting outcomes, where the National Perinatal Data Collection is the preferred source for Queensland Health (Table 1, page viii).

**Potentially preventable hospitalisations (PPHs):**

Admissions to hospital that potentially could have been prevented through the provision of appropriate non-hospital health services.<sup>211</sup> These are defined nationally, while Queensland Health reports a modified suite of conditions.<sup>1</sup> The national indicator only includes diabetes where it was coded as the primary or principal diagnosis. The Queensland Health definition also includes admissions for diabetes as an ‘other’ diagnosis where the primary diagnosis was defined (including selected cardiovascular, renal and eye conditions).

**Premature death:** Generally refers to a death that occurs before the age of 75 years.<sup>1</sup>

**Prevalence:** Measure of disease occurrence or frequency, often used to refer to the proportion of individuals in a population who have a disease or condition at a particular point of time.<sup>199</sup>

**Primary Health Networks (PHNs):** Queensland has seven PHNs that work directly with all levels of the health care system to facilitate efficient and effective outcomes for patients.

**Proxy-report:** Method of collecting information about health status, usually during a survey where a parent or guardian reports a status measure on behalf of a child or dependent, such as their height, weight or physical activity.<sup>34</sup>

**Psychological distress:** Assessed using the Kessler Psychological Distress Scale (K10) which is a scale of non-specific psychological distress based on 10 questions about the frequency of negative emotional states in the four weeks prior to interview.<sup>212</sup>

**Rates:** A measure of the frequency of the occurrence of an event or phenomenon in a defined population in a specified period of time.<sup>199</sup>

**Self-report:** Method of collecting information about health status, usually during a survey where a person self-reports a status measure such as their height, weight or physical activity.<sup>34</sup>

**Significant:** Term used in this report to reflect a level of importance as well as statistical difference. Statistical significance is based on non-overlap of 95% CIs and where these criteria are not met, non-significant results are described with terms such as ‘similar’, ‘stable’ or ‘no difference’.<sup>1</sup>

**Stillbirth (fetal death):** A stillbirth or fetal death is the death of a fetus prior to the complete expulsion or extraction from its mother as a product of conception of at least 20 completed weeks of gestation or with a birth weight of at least 400g.<sup>38</sup> The death is indicated by the fact that after such separation the fetus does not breathe or show any other evidence of life, such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles. Perinatal deaths include stillbirths (that is, fetal deaths) and neonatal deaths.

**Sufficient physical activity for health benefit:** Defined as 150 minutes of moderate activity over five or more sessions in a week, for adults and is usually limited to those aged 18–75 years.<sup>146</sup>

**Sugar sweetened drinks:** ABS definition for drinks that have added sugar (cordials, soft drinks, flavoured mineral waters, energy and electrolyte drinks, fortified waters, and fruit and vegetable drinks) where data was collected from the 2011–12 national food recall survey.<sup>104</sup>

**Suicide and self-inflicted injuries:** the intentional taking of one’s own life or deliberately causing one’s own death, with intent verified by coronial assessment.<sup>68</sup> Also referred to as intentional self-harm.

**Underweight:** Refers to the category classified as a body mass index in the range of less than 18.50.

**World Health Organization:** Directing and coordinating authority for health in the United Nations.<sup>213</sup>

**Years of life lost due to disability (YLD):** Measure of burden of disease and injury, capturing health loss due to any short-term or long-term condition.<sup>24</sup>

**Years of life lost due to premature death (YLL):** Measure of burden of disease and injury, capturing health loss due to premature death.<sup>24</sup>

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