

Aboriginal and Torres Strait Islander Needs

The 2021/22 – 2023/24 Health Needs Assessment has identified two health and service issues in the Brisbane North community that relate specifically to First Nations people. These two issues encompass all aspects of health and healthcare services more broadly. These needs are listed below:

Health Issues	Service Issues
✓ Gap in health outcomes	✓ Equity in care

LEGEND:

Relative rank for prioritised needs:



Health Issues	Overall Prioritisation Rank
Gap in health outcomes	

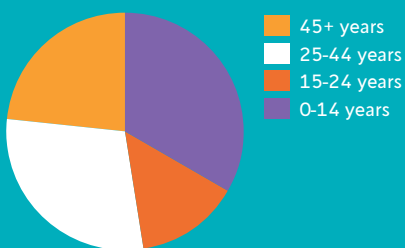
Nationally, Aboriginal and Torres Strait Islander people experience poorer health outcomes than non-Indigenous Australians due to the inequality they experience in all aspects of life. The impact of social determinants including lower attainment of education and employment, contribute significantly to their comparably lower health status.

The Australian Burden of Disease study found that in the Brisbane North region:

- Indigenous residents experienced 1.9 times the expected burden of disease and injury based on Queensland non-Indigenous rates.
- More than 70 per cent of Indigenous disease burden came from the six leading broad cause contributors—mental disorders, cardiovascular disease, diabetes, chronic respiratory disease, cancers and nervous and sense organ disorders.
- There was an 8.0 year gap in health adjusted life expectancy between Aboriginal and Torres Strait Islander residents and the total Queensland population.
 - » Cardiovascular disease contributed 1.8 years to the gap and diabetes 1.7 years.
- Mental disorders, cardiovascular disease and diabetes were the largest contributor to the gap in disease and injury burden between Indigenous and non-Indigenous residents

Overview of Aboriginal and Torres Strait Islander population in Brisbane North Region

The Queensland Government Statistician’s Office estimated there are 26,400 Aboriginal and Torres Strait Islander people who reside in the Brisbane North region in 2021. Data from the 2016 Census found:



In our region, the age structure of First Nations people is heavily skewed towards younger age cohorts.

33.4%

of Aboriginal and Torres Strait Islanders in Brisbane North were aged 0–14 years, 14.1% were aged 15–24 years, and 29.2% were aged 25–44 years.

22.9%



of one-family households (74.5% in total, compared to multiple family, group or lone person households), were **one-parent families** (over double the percentage of non-Indigenous households, 9.7%)

33.4%



of dependent children in families with Aboriginal and/or Torres Strait Islander persons were from **jobless families** (three times the percentage of non-Indigenous children, 9.5%)

7.9%



had profound or severe disability (nearly double the percentage of non-Indigenous people, 4.7%)

46.6%



aged 15 years and over had completed Year 12 or equivalent (compared to 65.1% of non-Indigenous people)

16.8%

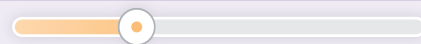


unemployment rate (compared to 6.9% for non-Indigenous people)

Service Issues

Overall Prioritisation Rank

Equity in care



Equity in care refers to the equal opportunity for individuals to access and fulfill their health care needs. The distribution of service access to Medicare-subsidised services or identified healthcare providers by Aboriginal and Torres Strait Islander people in the region is not equitable. While this cohort of people more prominently reside in the northern areas of Moreton Bay North, those that live elsewhere have lower rates of access to select health care services comparatively.

Consultation

When asked about the barriers that our community experiences in accessing health services:

“Systemic racism within the public health system—especially to Indigenous patients.” — GP Clinic

“Aboriginal healthcare for children with eye and hearing difficulties plus elderly Indigenous people with mental health problems from chronic drinking and malnutrition.” — Community Member

“‘Rehabilitation program’ was offered by a GP as a health need for Aboriginal and Torres Strait Islander.” — Market Research