

## Priority Queensland populations

### *health consumers and carers at risk of being left behind...*

Health consumers want to be involved in defining/refining who are the priority Queensland populations and what healthcare would look like for them. They also would like to see a transparent reporting system so anyone in Queensland can see that what is being said is being provided to these priority populations, *is* being provided to them (as measured by the people themselves).

Consumers can also see the value of focusing on the *commonalities* of these groups because many of the challenges they face may be similar. For example access to health care, navigating between services and health literacy. We have broken up the priority populations according to domains about the person. Consumers identified that if a person fits into more than one of these domains, the focus on them should be greater e.g. a person from a non-English speaking background who lives in rural QLD with a chronic health condition fits in three domains so the focus on them should be greater.

Priority populations according to:

#### **Their health and/or physical-psycho-social function**

- People with chronic health conditions and disabilities
- People with chronic health conditions and disabilities who cannot get the care they need in their own homes
- People who have auto-immune issues or who are immune-compromised
- People with intellectual impairments
- People with psycho-social disorders
- People with mental health conditions
- People with OCD related to germs or disease or agoraphobia
- People with rarer conditions or specific vulnerabilities
- People on regular doses of medication who require dose reviews
- People who are dependent on others for their care/communication: those who are cognitively impaired, have a speech impairment, live with dementia
- People who live with a disability but do not receive NDIS funding
- People whose surgery had to be suspended and now face different types of surgery e.g. double mastectomies
- People who are now dealing with the consequences of surgery, treatments being suspended or deferred

- People who are now caught up in the catch up back log or have become lost in the system and care is not being followed up

#### **Their cultural/language identity**

- People who are Aboriginal and Torres Strait Islanders
- People from CALD backgrounds
- People who are immigrants
- New migrants with no access to Medicare-funded services
- Those who need a translator

#### **Their age**

- Elderly people in rural and remote areas.
- Children
- Adolescents and young adults

#### **Where they live**

- People who are homeless
- People who are at risk of family and domestic violence
- People who live in rural and remote communities
- People in shared accommodation with shared amenities
- International students
- People in Residential Aged Care Facilities
- People in corrective services and young offenders who are imprisoned

#### **Their lives**

- People who live on low incomes
- People who are LGBTIQ+
- People without a smartphone, computer, internet or financial means to bridge the digital divide.
- People who have lost their job

#### **Their beliefs/attitudes**

- People who don't trust the system
- People who are scared about returning to work or a 'new normal' because of their health concerns
- Shy quiet people who don't push forward
- The hidden people – who are intentionally being left behind (prejudice against seeking health care because they believe they are invulnerable or have anxiety bordering on depression or perceive social stigma related to a health issue)