

Who are our consumers?

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Abstract

Background:

Although, culturally and linguistically diverse (CALD) population groups that attend Australian paediatric hospitals are likely to reflect the recent migration patterns of Australia, it is unclear how such diversity has changed health care utilization.

Aim/ Objectives:

This study aims to describe the linguistic and cultural diversity of patients and their family's attending a tertiary specialist paediatric hospital in Sydney, Australia as a first measure to better understand who our healthcare consumers are.

Methods:

A retrospective audit of paediatric inpatient data admitted during 2015- 2017. Variables of interest included include country of birth, primary language spoken at home, postcode of permanent residence, age of child, gender, and interpreter utilization. Data were cleaned and coded in SPSS (version 21). Exploratory analyses will be conducted. Analysis of variance (ANOVA) and Poisson regression analysis measured differences in health service utilization.

Results:

Hospital admissions were consistent during the study period. Inpatients were predominantly male (87542, 57.5%) and were, on average, 6 years of age (SD 5.2). There were no differences in health service utilization (2015 -2017) and variables gender, place of residence, mean number of admissions, mean length of hospital stay, or reported religion practice. An increased rate of health service utilization were reported for children born in Asia (IRR 1.3, p≤0.001, 95%CI 1.2-1.4) and Middle East (IRR 1.4, p≤0.001, 95%CI 1.2-1.6). Families who reported that they preferred to speak Chinese Languages (Cantonese, Mandarin, and other Chinese dialects),

Middle Eastern languages (not Arabic), Khmer and Indian, Sri Lankan and Bangladeshi languages significantly increased utilization.

Conclusions: Findings inform health care managers and enable appropriate planning, for culturally sensitive and competent services and workforce, to meet the linguistic and cultural needs of their healthcare consumers.