

Availability of falls prevention programs for diverse communities in Greater Sydney: A Gap Analysis

Addressing disparities in program availability for Elderly CALD populations

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Background

- Falls = leading cause of injury-related hospitalisation & death in elderly (65+)
 Australians ¹
- 1 in 3 people aged 65+ fall yearly ²
- CALD populations: growing, underserved ^{3, 4}
- Need to understand availability and cultural suitability of programs

¹ Australian Institute of Health and Welfare, 2022

² Clinical Excellence Commission, 2023

³ Australian Bureau of Statistics, 2021

⁴ Khatri & Assefa, 2022



Research Objectives

- Examine availability of falls prevention programs across 20 LGAs in Greater Sydney
- Compare by:
 - Socioeconomic disadvantage (SEIFA-IRSD)
 - Linguistic diversity
- Identify disparities in access for CALD elderly populations



Methods

- Design: Audit of falls prevention programs in 20 LGAs in Greater Sydney
- Selection Criteria:
 - 7 most/ least disadvantaged (SEIFA)
 - 7 most/ least diverse (linguistically)
- Sources:
 - LHD websites
 - Active & Healthy website
 - Google (NGOs and community listings)



Ranking	Highest SEIFA- IRSD	Lowest SEIFA- IRSD	Least Diverse	Most Diverse
1	Woollahra Municipality	Fairfield City	Sutherland Shire	Burwood Municipality
2	Mosman Municipal Council	Cumberland Council	Woollahra Municipality	Fairfield City
3	Ku-Ring-Gai Council	Canterbury- Bankstown City	Northern Beaches	Strathfield Municipality
4	Lane Cove Council	Liverpool City	Mosman Municipal Council	Cumberland Council
5	Hunters Hill Municipality	Campbelltown City	Penrith City	Canterbury- Bankstown City
6	The Hills Shire	Burwood Council	Hunters Hill Municipality	Parramatta City
7	North Sydney	Blacktown City	Waverley Council	Liverpool City

Table 1. LGA Rankings by SEIFA-IRSD and Linguistic Diversity (Australian Bureau of Statistics, 2023).



Data Analysis

- Programs categorised by:
 - Local Health District/ Government
 - Active & Healthy website
 - Non-Government organisations
- Analysis through column charts
- Trends examined in relation to SEIFA-IRSD & language diversity



Key Results (1/2)

More Disadvantage = fewer programs

- Campbelltown: Elderly population: 23,461
- (SEIFA: 947) \rightarrow 3 programs
- Ku-Ring-Gai: Elderly population: 23,997

(SEIFA: 1,108) \rightarrow 16 programs

More Language Diversity = fewer programs

- Most diverse (avg.) = 6 programs
- Least diverse (avg.) = 9 programs





Figure 2: Total falls prevention programs in the highest/lowest SEIFA-IRSD LGAs, Greater Sydney, for percentage of elderly aged 65+ across all LGAs.





Figure 4: Total number of falls prevention programs in LGAs with the most/ least linguistic diversity, Greater Sydney.



Key Results (2/2)

- Only Ku-Ring-Gai offered a non-English program (Chinese/ Cantonese)
- Highly disadvantaged & diverse LGAs often had:
 - Larger elderly populations
 - Fewer programs compared to elderly population size
 - No tailored language/ cultural programs

Campbelltown, Liverpool, and Fairfield most disadvantaged (In program availability compared to elderly population size)



Discussion

- Disparities not just in quantity, but linguistic relevance
- Most disadvantaged & linguistically diverse LGAs = fewer programs despite higher need
 - Language barriers & low health literacy ⁴
- Reinforces equity vs equality
- Highlights system-level issues in service provision
 - Lack of language options on public health websites ⁵

⁴ Khatri & Assefa, 2022 ⁵ Capurro et al., 2015



Implications & Recommendations

- Policy & planning: Direct more programs into CALD & disadvantaged LGAs
- Cultural tailoring: Address language, trust, and access
- Website accessibility: Add language formats
- Future research: Test effectiveness of culturally tailored models



Limitations

- General linguistic categories may overlook diverse cultural variations within these communities
- Study's reliance on online sources may overlook programs not advertised online



Conclusion

- Major disparities exist in both program availability and suitability
- CALD elderly in Greater Sydney = underserved
- Urgent need for targeted, inclusive, and culturally responsive interventions

