

Brisbane South Joint Regional Needs Assessment 2025-27 Summary

Our region

Over **1.2 million people** lived in Brisbane South in 2022 (23% of Qld).

The region's population is expected to grow to **1.4 million** by 2031.

Over **3,800 km²** in size

Life expectancy at birth (2022) **81.6 years**

Males: 79 years

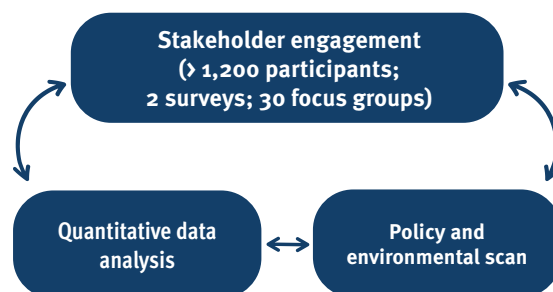
Females: 84.4 years

Our community is diverse:

- **31%** were born overseas
- **1 in 4** speak language other than English
- **2.8%** Aboriginal and/or Torres Strait Islander
- **4%** Pasifika and Maori peoples
- **5.4%** of people reported having a profound or severe disability (requiring assistance)

Needs assessment process

1. Needs identification



2. Prioritisation




The Brisbane South Joint Regional Needs Assessment (JRNA) identified 97 needs through stakeholder consultation, an analysis of local data, and a review of key policies, strategies and reports. Following needs identification, 121 individuals—including consumers, clinicians, healthcare executives, and community service representatives—participated in a three-step prioritisation process including shortlisting and ranking. The final output was 12 high-priority and 12 medium-priority needs

Next steps


The JRNA provides insights into the health and service needs, and priorities, of the residents of the Brisbane South region to inform future planning, commissioning, service delivery and programs of work. To inform this work at a system level, the JRNA has been shared with the Commonwealth Department of Health and Aged Care and the Queensland Department of Health.

Locally, Brisbane South PHN and Metro South Health will use the JRNA priorities to focus our individual and collective efforts and resources on needs that matter the most to the Brisbane South community. The JRNA also supports development of stronger partnerships between the primary and acute care sectors, and with community service organisations to address broader factors influencing health.


Our priorities




Priority populations: The JRNA priorities focus on multiple population groups including Aboriginal and/or Torres Strait Islander people, people from culturally and linguistically diverse backgrounds, people living with disability, people experiencing homelessness, women, youth (15-24 years), older persons (65+ years), LGBTIQ+ people and other priority groups.



Health conditions: Mental health conditions (and associated service gaps), prevention and management of chronic disease and dementia were all identified as a priority for the Brisbane South region.



Issues: Domestic and family violence (DFV), financial barriers to healthcare and ability to attend medical appointments were the key issues prioritised by the Brisbane South community. These issues reflect the rising cost of living, transportation challenges in parts of the region, and greater awareness of DFV and its impact.



Service use: Long wait times, limited availability and capacity of health services, and access to bulk-billing GP services were seen as high-priority needs for the region. These needs affect both primary and acute care and reflect the growing demand for services due to population growth, ageing and increase in chronic disease.

Brisbane South JRNA 2025-27 Priorities

H	Health need type: needs that may be helped by healthcare but might also be impacted by broader factors such as housing and education
S	Service need type: identified gaps in the service provided, that can be addressed by health services
	Lead agency refers to Brisbane South PHN (BSPHN), Metro South Health (MSH)

	High Priority
	Medium Priority

		Lead agency
Priority populations		
Culturally responsive and inclusive services - Culturally responsive, respectful and inclusive health services for Aboriginal and/or Torres Strait Islander people, CALD people, people with disability, youth (15-24 years of age), LGBTIQ+ people and other priority populations	S	Joint
Aboriginal and/or Torres Strait Islander people - Aboriginal and/or Torres Strait Islander people experience poorer health outcomes compared to the rest of the population	H	Joint
Aboriginal and/or Torres Strait Islander people - Timely service access for Aboriginal and/or Torres Strait Islander people	S	Joint
People living with disability - People living with disability experience poorer health outcomes compared to rest of the population	H	Joint
People living with disability - Access to services for people with disability, including education to understand and navigate NDIS assessments	S	Joint
Homeless/houseless people - Access to services for people experiencing homelessness, including housing/accommodation support	H	Joint
Women - High rates of family and domestic violence impact the health and wellbeing of women	H	Joint
Culturally and linguistically diverse people - Access to quality language services to reduce barriers to getting care	S	Joint
Care across the lifespan		
Children and young people - Supports for families, communities, parents and caregivers to create the best conditions for children to grow up healthy	H	Joint
Children and young people - Support for developmental delays and behavioural conditions in children and young people	H	Joint
Older people - High rates of dementia impact health and wellbeing	H	Joint
Older people - Access to services for older people in line with population ageing	S	Joint
Mental health, alcohol and other drugs		
High prevalence of mental health conditions	H	Joint
Access to mental health services and supports, including access to psychologists/psychiatrists	S	Joint
Chronic health conditions		
Preventative and early intervention health programs to prevent illness and chronic disease	S	Joint
Chronic disease management and supports	S	Joint
Addressing risk factors for chronic diseases: high and increasing prevalence of obesity	H	Joint
Wider determinants of health		
Financial barriers impact ability to access healthcare	H	Joint
Access to transport impacts ability to attend medical appointments	H	Joint
Primary Care Services		
Access to GP bulk-billing services	S	BSPHN
Service navigation and integration		
Holistic, joined-up care across both primary care and acute care services	S	Joint
Access and service models		
Wait times and availability of health services	S	MSH
Capacity of health services to meet growing demand, including health workforce	S	Joint
Alternative models of service delivery to meet growing demand	S	Joint
Geographic inequities (no high/medium priority needs)		
Infectious diseases (no high/medium priority needs)		