

Creating Our Future

Shire of EAST
Pilbara
THE HEART OF THE PILBARA

Community Safety Plan

2026 - 2031

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ACKNOWLEDGEMENT OF COUNTRY

The Shire of East Pilbara acknowledges the Traditional Owners throughout this vast region and their continuing connection to the land, waters and community.

We pay our respects to the members of these Aboriginal communities, their cultures, and to their Elders past, present and emerging.

MESSAGE FROM THE PRESIDENT

On behalf of the Council, I am pleased to present the Shire of East Pilbara Community Safety Plan.

Empowering communities and fostering active participation are important strategies in attempting to prevent crime and enhance community safety. Recognising the pivotal role of collective action, initiatives aim to engage residents in crime prevention efforts, promoting a sense of ownership and responsibility within our neighbourhoods.

Through various awareness programs, workshops, and community meetings, individuals are educated on crime prevention techniques, neighbourhood watch programs, and the importance of reporting suspicious activities to law enforcement. By nurturing a culture of vigilance and cooperation, communities become more resilient against the threat of crime, encouraging strong links and fostering a sense of belonging and pride in local neighbourhoods.

When communities are tightly knit, residents are more inclined to detect and report suspicious activities, bolstering crime apprehension and creating safer environments. Increasing community awareness and understanding crime prevention initiatives through targeted campaigns and development projects will strengthen these bonds and allow our community to develop the knowledge and resources, to actively work towards crime prevention.

Through residents gaining more knowledge about community safety measures, opportunities for people to commit crime can be minimised. Communities with strong social networks and active participation tend to experience lower crime rates, as strong links contribute to an environment that encourages positive behaviours.



Cr Anthony Middleton

President, Shire of East Pilbara

MESSAGE FROM THE CHIEF EXECUTIVE OFFICER

In working to strengthen crime prevention in our community and to enhance community safety, the Shire plays a pivotal role in fostering stakeholder partnerships and internal capacity.

We have prioritised the development of positive working relationships with various other organisations which include law enforcement agencies, local businesses, schools, community groups, and the general public.

By adopting a coordinated approach, these partnerships aim to combine all the resources and expertise we have available to us to implement effective crime prevention strategies. Building strong partnerships and encouraging participation among stakeholders is essential in increasing community engagement and making safe, resilient neighbourhoods.

Through collaborative efforts and shared responsibilities, local governments can effectively address local safety concerns, promote community empowerment, and create environments where everyone feels safe, secure and supported.



Steven Harding
Chief Executive Officer, Shire of East Pilbara

INTRODUCTION

The Shire of East Pilbara is the largest Shire within Australia, stretching approximately 372,571 square kilometres. Nestled within this vast expanse are key town sites including Newman, Marble Bar, and Nullagine. Additionally, the Shire encompasses several Aboriginal Communities such as Jigalong, Punmu, Parnngurr, Kunawarritji, Kiwirrkurra Irrungadji, Warralong and Goodabinya each contributing to the rich culture of the region.

With a population of 9,760 residents as of the 2021 ABS Census, the Shire of East Pilbara boasts a distinct character. Further adding to its uniqueness are the 19,098 jobs within its bounds, with a staggering 71% stemming from the mining industry. The dominance of the mining sector underscores the economic landscape, with the world's largest open-cut iron ore mine, Mount Whaleback, proudly situated in Newman.

Given the uniqueness of the Shire of East Pilbara, addressing its challenges demands a tailored and nuanced approach. The Local Government is keenly attuned to the area's distinctiveness, demographic composition, and economic dynamics, emphasising the need for targeted strategies to address the multifaceted issues within this Local Government area.

Key Result Areas and Outcomes

KEY RESULT AREAS	OUTCOMES
Economic	A diverse and sustainable economy, with a balanced population, providing equal opportunities and prosperity for all, and a fair share of the returns from our resources
Social	Safe, connected and family-friendly communities where all people thrive, and have their needs met at all ages and stages of life
Built Environment	Distinctive places, with safe, easy and affordable travel, reliable communications, housing choice, and capacity for residential, industrial and commercial expansion
Natural Environment	Clean, green towns, using resources sustainably, and preserving landscapes and cultural places for current and future generations
Governance	Vibrant local democracy, forward-thinking civic leadership, and transparent stewardship of the community's assets and resources

COMMUNITY PROFILE



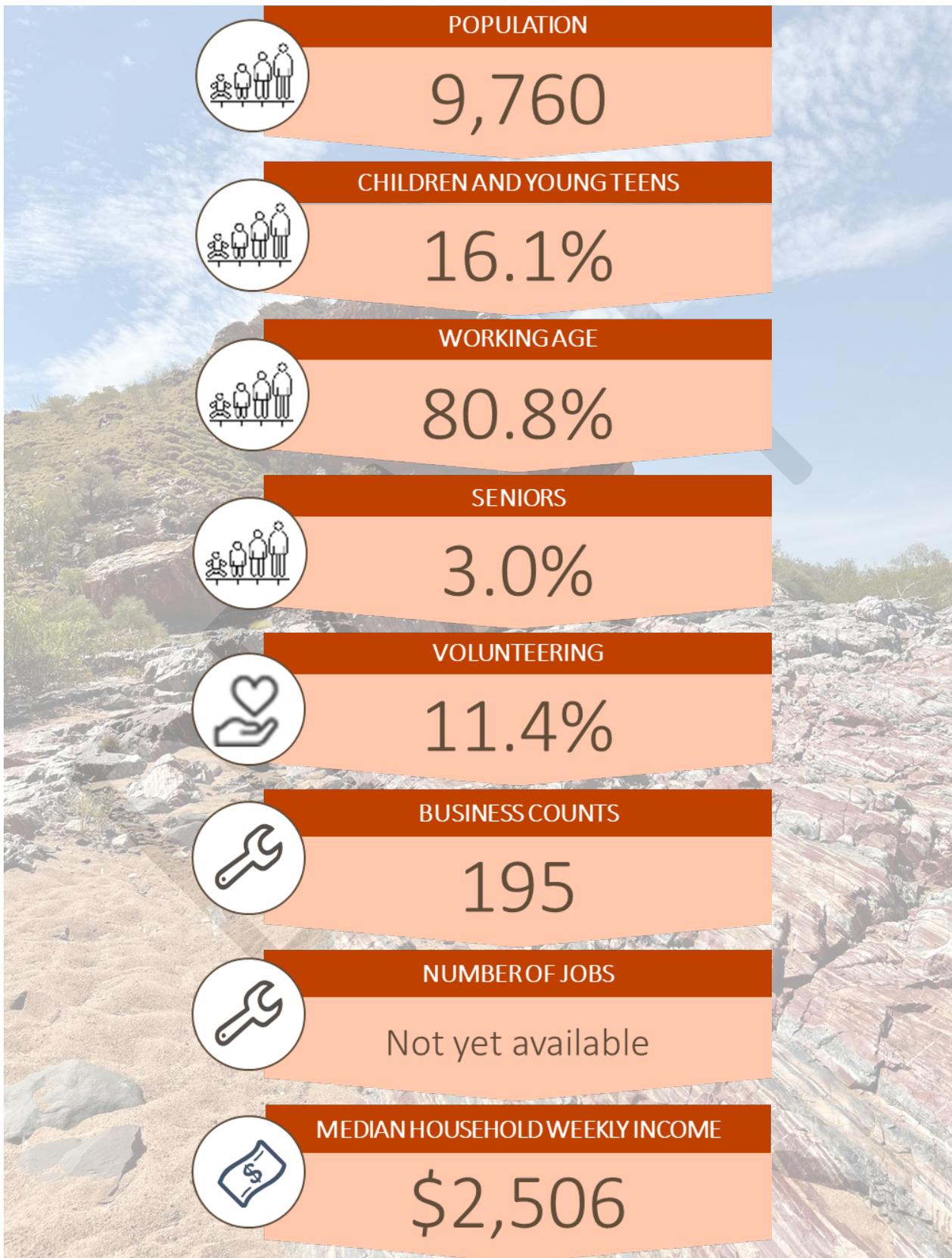
The Shire of East Pilbara is one of the four local government areas in the Pilbara region of Western Australia. With an area of 372,571 square kilometres, it is the largest local government region in Australia.

The population of the Shire of East Pilbara was 9,760 in the 2021 Census.

The snapshot below shows key characteristics of the population. The main change being a 10% decline in the population from 2016 to 2021. More detail, including comparisons with Western Australia as a whole, can be found in Appendix 1.

Note that in addition to the resident population, there is also a substantial transient workforce population, with 35,500 FIFO workers. This equates to 32,308 mining FTEs, which is expected to increase by 5,000 in the next 5 years.

Snapshot of key characteristics



Source: all statistics are from the [ABS 2021 Census East Pilbara Community Profile](#).

AIM

This Community Safety Plan (The Plan) aims to provide guidance to the Shire of East Pilbara on initiatives that can be implemented to both enhance the perceived safety within the community and reduce statistical criminal activity. The Plan will achieve this aim by planning, implementing, and evaluating sustainable actions to make a liveable, vibrant, and enhanced community experience within the Shire.

KEY FOCUS AREAS

Based on the engagement and statistics the actions in this plan has been grouped around three key themes:

Topic 1 - Physical and Built Environment and Environmental Design. The strategy of physical and built environmental design for crime prevention encompasses a multifaceted approach aimed at enhancing security and fostering safer communities.

Known as “Designing Out Crime”, this approach focuses on leveraging various elements such as lighting, fencing, landscaping, and surveillance to deter criminal activity. Central to Designing Out Crime are principles like surveillance, territorial reinforcement, access control, space management, target hardening, and mixed-use development, which collectively contribute to creating environments less conducive to crime.

Moreover, community involvement is crucial in crime prevention efforts, as individuals often underestimate their role in safeguarding their surroundings. Through initiatives like Crime Prevention Through Environmental Design (CPTED), emphasis is placed on discouraging criminal behaviour through thoughtful design that disrupts the thought process of potential offenders.

By planning and designing spaces with safety in mind, communities can foster environments that not only prevent crime but also promote public safety. Furthermore, the upkeep of public areas is paramount, as well-maintained spaces instil greater feelings of safety among residents and visitors alike, reinforcing the effectiveness of crime prevention strategies at the grassroots level.

Topic 2 - Increase Community Participation and Awareness. Empowering communities and fostering active participation are integral strategies in the endeavour to prevent crime and enhance community safety. Recognising the pivotal role of collective action, initiatives aim to engage residents in crime prevention efforts, promoting a sense of ownership and responsibility within neighbourhoods.

Through various awareness programs, workshops, and community meetings, individuals are educated on crime prevention techniques, neighbourhood watch programs, and the importance of reporting suspicious activities to law enforcement.

By nurturing a culture of vigilance and cooperation, communities become more resilient against criminal threats, encouraging robust community links and fostering a sense of belonging and pride within neighbourhoods.

When communities are tightly knit, residents are more inclined to detect and report suspicious activities, thus bolstering crime detection efforts and creating safer environments. Increasing community awareness and understanding of crime prevention initiatives through targeted marketing, educational campaigns, and community development projects further strengthens these bonds and equips a community with the knowledge and resources to engage in crime prevention efforts.

By educating residents about community safety measures and fostering a collective understanding of crime prevention strategies, opportunities for criminal activities can be minimised. Moreover, communities with vibrant social networks and active participation in local activities tend to experience lower crime rates, as strong interpersonal connections contribute to an environment that discourages deviant behaviour.

Conversely, neighbourhoods characterised by disorganisation, low levels of trust, and minimal social interaction often face higher crime rates, posing risks to community safety. Effective community participation in local organisations not only fosters social cohesion but also enhances residents' ability to address local issues collectively, including those affecting youth.

Topic 3 - Stakeholder Partnerships and Internal Capacity. To strengthen crime prevention and enhance community safety, local governments play a pivotal role in fostering stakeholder partnerships and internal capacity. The Shire has prioritised the development of positive working relationships with various entities, including law enforcement agencies, local businesses, schools, community organisations, and the public.

By adopting a coordinated approach, these partnerships aim to leverage resources and expertise to implement effective crime prevention strategies. Building strong partnerships and encouraging participation among stakeholders are essential steps in increasing community engagement and fostering safe, resilient neighbourhoods. Through collaborative efforts and shared responsibilities, local governments can effectively address local safety concerns, promote community empowerment, and create environments where everyone feels secure and supported.

WHAT IS COMMUNITY SAFETY AND CRIME PREVENTION

Community safety refers to the collective efforts and strategies aimed at creating environments where individuals feel secure and protected from crime, violence, and other threats to their well-being. It encompasses both the actual and perceived safety of communities and involves a range of measures designed to prevent crime, address social issues, and promote resilience. Community safety is about feeling safe in the home, on the street, or at work. It relates to the quality of life and means a person can pursue and obtain the fullest benefits from their domestic, social, and economic lives without fear or hindrance from crime and disorder. This includes increasing the actual and perceived safety of the environment.

Community safety recognises the need for different areas of the community to work together to create a safer environment for people in which to work, live, study, play, and travel through. This involves a multi-stakeholder approach and means building partnerships between police, government agencies, neighbouring councils, partners, community organisations, and residents alike to initiate and achieve these goals.

By collaborating with diverse stakeholders through a multifaceted approach, underlying factors contributing to crime, such as social inequalities, economic opportunities, and community cohesion can be addressed. Stakeholders from various sectors can provide valuable insights into these complex issues and help develop comprehensive strategies that address the root causes of crime. Such a plan must include both planning and community development improvements and ensure ongoing consideration of the most vulnerable groups in decision-making processes.

SHIRE'S ROLE

It is essential that this work be carried out at the local level, and that it be guided by a collaborative community-based process. The process must include meaningful and comprehensive inquiry into community safety issues and needs; and a collaborative process of analysis, planning, and action is required.

While law enforcement in the Shire of East Pilbara is the responsibility of the Western Australian Police Force, the core service delivery of the Local Government has impacts on Community Safety and Crime Prevention through its provision of services, facilities, infrastructure, maintenance, and its advocacy role in strengthening communities. The Local Government is the closest pillar within the Government structure to the community, and as such, has a unique capacity to understand and engage with the community as well as facilitating the involvement of stakeholder engagement on several matters, especially within the realm of Community Safety and Crime Prevention. By taking a proactive and collaborative approach, local governments can help create safer and more resilient communities for all residents.

Local governments operate under statutory laws and provide some discretionary services to meet the needs of the community. The primary roles of the Shire are outlined below.

Delivery of Facilities and Services

This includes parks and gardens, roads, footpaths, drainage, waste management, sport and recreation facilities, library, events, and support for community groups. Some of those services are based on assets, for instance roads and buildings. Maintenance and renewal of assets is a vital part of the Shire's role.

Regulation

Local governments have specific regulatory responsibilities that are essential for community wellbeing. For example, they have a regulatory role in public health (e.g. licensing and monitoring food premises), the appropriateness and safety of new buildings, and the use of land. These areas are subject to regulation to ensure a minimum standard is adhered to, as well as to minimise the potential to impose costs or adverse effects on others (e.g. food poisoning or injuries). Balancing the rights of those wishing to operate and the rights of those who may be affected or consider themselves to be affected can be challenging.

Facilitation, Influence and Advocacy

In some cases, the Shire enables or facilitates services to be provided by others or in partnership with the Shire rather than directly providing or funding the service (for example facilitating community care efforts through volunteer programs etc). Influencing the decisions of others who do or can contribute to positive community outcomes in the Shire is an important role. Advocacy to regional agencies, the Federal and State Government and other agencies for recognition, funding, policy or planning support is a good example.

Civic Leadership

The Shire is uniquely able to provide civic leadership. While there are many others in the community with leadership capacity and responsibility, the Shire is the only entity with a democratic mandate to represent the community as a whole. It is the only entity with a statutory mandate to plan for the future of the community across social, economic and environmental wellbeing. It is therefore uniquely placed to bring together key players across government, industry and the community sector to align and coordinate activity, maintain momentum and track progress.

Good governance and leadership plays a central role in signalling community confidence in its future, building and supporting the leadership of others within the community, attracting people to the Shire and the town, and positioning the community to leverage external funding and investment.

SCOPE

The scope of this Plan includes finding solutions to address community issues under the three key focus areas of Built Environment and Environmental Design, Increased Community Participation and Awareness, and Stakeholder Partnerships and Internal Capacity. Through stakeholder engagement, and both internal and external literature reviews, priority problems have been identified, and this Plan will address these concerns through the implementation of the proposed strategies in these three key areas within the Shire of East Pilbara.

The Plan is a Shire of East Pilbara document and as such, implementation and evaluation of the actions outlined in this plan will be the responsibility of the Shire. The Plan does not include strategies that do not have involvement from the Shire. Partnerships and collaboration with other agencies are acknowledged, however, actions are written to reflect the Shire's responsibility and extent of control over complicated issues. This Plan does not include strategies out of the local government's scope.

It is also important to note that there are currently over 25 social service providers working in the Shire who cover areas such as youth, Indigenous Affairs, outreach, and re-engagement, as well as action plans from other business units in the Shire who are equipped to tackle the larger social issues currently present in the Shire. Therefore, this plan does not include actions to duplicate the work that is already being done to address such issues.

CRIME STATISTICS

Community Crime Profile Data

Based on the data provided below gathered through the WA Police Force Website, it shows that across the towns of The Shire the highest frequency offences include:

Newman

- Assault (Family)
- Property Damage
- Assault (non-family)
- Stealing
- Drug Offences
- Property Damage
- Breach of Violence Restraint Order

Marble Bar

- Assault (Family)
- Stealing of Vehicle

Nullagine

- Assault (Family)
- Stealing

Although it is important to recognise the higher frequency offences from a place-based perspective, it is also important to note that there are large differences in offending between Newman, Marble Bar, and Nullagine, with Newman reporting 1,518 more offences than Marble Bar, and 1,542 more offences than Nullagine in the previous reporting period.

In analysing the data across selected offences across a 5-year period for Newman (Figure 2), while there is an increase across most of the selected offence types in the last reported year in comparison to the 5-year average, selected offences against property were the only one of these to have a decreased (-20.57%). Delving deeper into the data, it becomes apparent that commonly perceived threats to the community, such as dwelling burglary, motor vehicle theft, and property damage, have all shown a decline in reported incidents between 2021 and 2025 for the area of Newman.

In considering the data, it is important to note its limitations as it is known that not all crime incidents are reported, and certain crimes tend to be under-reported more than others. All statistics below have been sourced from the WA Police Force website.

Figure 1: Crime Statistics 2024-2025 Shire of East Pilbara

Offence - 2024-2025	Jigalong	Marble Bar	Newman	Nullagine
Arson	1	1	8	
Assault (Family)	13	16	315	35
Assault (Non-Family)	1	5	126	2
Breach of Violence Restraint Order	2	2	74	4
Burglary	9	10	129	19
Deprivation of Liberty			2	
Drug Offences	6	3	118	
Fraud & Related Offences			18	
Graffiti			5	
Property Damage	8	11	108	10
Receiving and Possession of Stolen Property		1	16	
Sexual Offences		4	34	2
Stealing	2	2	123	5
Stealing of Motor Vehicles	6	4	56	9
Threatening Behaviour (Family)	3	3	51	2
Threatening Behaviour (Non-Family)	1	1	30	1
Weapon Offences	1	3	22	1
	53	66	1235	90

Figure 2: Newman 5 Year Averages (Selected Offences)

Summary Offence Categories	2020-2021	2021-2022	2022-2023	2023-2024	2024-2025	5 Year Average	% Change from 5 Year Average
Selected Offences Against the Person (excluding Family Related Offences)	120	116	133	198	193	152	+26.97%
Family Related Offences (Assault and Threatening Behaviour)	220	254	252	410	390	305.2	+27.78%
Selected Offences Against Property	436	438	844	829	481	605.6	-20.57%
Drug Offences (Possession and Dealing)	40	51	42	54	122	61.8	+97.4%

ACTION PLAN

Action	Responsibility	2026-2027	2027-2028	2027-2028	2029-2030	2030-2031	Evaluation Measures
Topic 1 - Physical and Built Environment and Environmental Design							
<i>Recommendation 1 - Create environments that promote community safety and crime prevention through strategic design interventions (CPTED).</i>							
Implement a safety audit of public spaces with a focus on CPTED principles and their use in the development of new areas (including a lighting audit throughout the Shire to identify areas where lighting needs improving for night-time safety). Consider community consultation to obtain this information.	Regulatory Services Directorate / Infrastructure Services Directorate.	✓	✓	✓	✓	✓	<p>* Continue to invest in public spaces, amenities and heritage protection across the Shire.</p> <p>* Continue to invest in the CCTV network across the Shire and incorporate Crime Prevention Through Environmental Design (CPTED principles).</p> <p>* Safe, connected and family-friendly communities where all people thrive, and have their needs met at all stages of their life.</p>

Action	Responsibility	2026-2027	2027-2028	2027-2028	2029-2030	2030-2031	Evaluation Measures
Regularly inspect the Shire's parks and reserves to verify that trees and bushes are pruned adequately, thereby enhancing sightlines in accordance with Crime Prevention Through Environmental Design (CPTED) principles as well as maintaining their safety from broken glass and other safety hazards (needles).	Infrastructure Services Directorate / Community Safety Team	✓	✓	✓	✓	✓	<ul style="list-style-type: none"> * Continue to invest in public spaces, amenities and heritage protection across the Shire. * Continue to invest in the CCTV network across the Shire and incorporate Crime Prevention Through Environmental Design (CPTED principles). * Safe, connected and family-friendly communities where all people thrive, and have their needs met at all stages of their life.
Investigate the option to install concrete reinforced planter boxes (hardcover) or similar in high-risk areas within Newman.	Infrastructure Services Directorate	✓	✓				<ul style="list-style-type: none"> * Advocacy and partnerships for addressing issues impacting safety of communities and improving information sharing and coordination.

Recommendation 2 - Cultivate spaces that are conducive to resident's well-being, foster a sense of security and ownership among community members, and minimise opportunities for criminal activity.

Action	Responsibility	2026-2027	2027-2028	2027-2028	2029-2030	2030-2031	Evaluation Measures
<p>Continue to install new CCTV cameras throughout the towns and ensure they are effectively monitored. Create a CCTV Strategy to provide the strategic framework for future upgrades. Identify new locations based on crime statistics and feedback from the community.</p> <p>Purchase body worn cameras for officers.</p>	Community Safety Team	✓	✓	✓	✓	✓	<ul style="list-style-type: none"> * A CCTV system that's compliant with the AS 4806.2 – 2006. * A reliable CCTV system that provides Police with sufficient evidence to identify and prosecute offending parties. * A reduction in downtime and service requests for CCTV system fixes. * Decrease in criminal offences. * Continue to invest in public spaces, amenities and heritage protection across the Shire.

Action	Responsibility	2026-2027	2027-2028	2027-2028	2029-2030	2030-2031	Evaluation Measures
<p>Advocate for an incentivised target hardening program for residents and commercial properties - offering a yearly rebate, decided by Council, per residential or commercial property for the installation of target hardening additions such as CCTV, security screens, door/window locks, sensor lights or fencing (CCTV to be added to the WA Police Cam-App website).</p> <p>Rate payers: Residential – 2,486 Commercial – 1005.</p>	Community Safety Team	✓	✓	✓	✓	✓	<p>* Advocacy and partnerships for addressing issues impacting safety of communities and improving information sharing and coordination.</p> <p>* Safe, connected and family-friendly communities where all people thrive, and have their needs met at all stages of their life.</p> <p>* Promote healthy and safe lifestyle choices and uphold public health and safety.</p>
<p>Carry out an inspections to identify all illegal dumping areas within proximity to Newman, Nullagine and Marble Bar and organise removal of rubbish.</p>	Community Safety Team / Waste Management Team	✓		✓		✓	<p>* Promote healthy and safe lifestyle choices and uphold public health and safety.</p> <p>* Advocacy and partnerships for addressing issues impacting safety of communities and improving information sharing and coordination.</p>

Topic 2 - Increase Community Participation and Awareness

Recommendation 1 - Increasing awareness of Community Safety and Crime Prevention throughout the community and education on the role they can take.

Action	Responsibility	2026-2027	2027-2028	2027-2028	2029-2030	2030-2031	Evaluation Measures
Develop and distribute a community safety campaign that increases understanding and awareness of home safety with a self CPTED assessment for businesses and residents.	Community Safety Team	✓	✓	✓	✓	✓	* Advocacy and partnerships for addressing issues impacting safety of communities and improving information sharing and coordination. * Safe, connected and family-friendly communities where all people thrive, and have their needs met at all stages of their life.
Produce and implement a campaign to increase awareness and use of the Police Assistance Line (131 444) for non-urgent and reporting matters in collaboration with WAPOL as well as increase awareness of programs such as “Eyes on the Street” and “Goodbye Graffiti”.	Community Safety Team	✓	✓	✓	✓	✓	* Advocacy and partnerships for addressing issues impacting safety of communities and improving information sharing and coordination.

Action	Responsibility	2026-2027	2027-2028	2027-2028	2029-2030	2030-2031	Evaluation Measures
<p>Continue to review opportunities to increase the emergency management capabilities of community members in remote indigenous communities.</p> <p>E.g. Firefighting trailer training, red cross pillowcase project.</p>	Community Safety Team / Community Experience Team	✓	✓	✓	✓	✓	<p>* Advocacy and partnerships for addressing issues impacting safety of communities and improving information sharing and coordination.</p> <p>* Support improved services to remote Aboriginal Communities.</p>
<p>Carry out school visits to all towns and communities to educate children on the importance of animal welfare.</p>	Community Safety Team	✓	✓	✓	✓	✓	<p>* Advocacy and partnerships for addressing issues impacting safety of communities and improving information sharing and coordination.</p>

Recommendation 2 - Improve perceptions of community safety and services within the Shire, particularly amongst those groups that are most vulnerable in the community.

Action	Responsibility	2026-2027	2027-2028	2027-2028	2029-2030	2030-2031	Evaluation Measures
Continue to use best endeavours to deliver community safety information videos and good news story videos through collaboration with WAPOL to reduce bias generated from negative public perceptions.	Community Safety Team	✓	✓	✓	✓	✓	* Advocacy and partnerships for addressing issues impacting safety of communities and improving information sharing and coordination.
Promote awareness of Ranger services provided by the Shire, including animal management, CCTV and emergency management.	Community Safety Team	✓	✓	✓	✓	✓	* Advocacy and partnerships for addressing issues impacting safety of communities and improving information sharing and coordination.

Recommendation 3 - Encourage community engagement and capacity, engagement, collaboration, and empowerment within the community to effectively address crime prevention and enhance community safety.

Action	Responsibility	2026-2027	2027-2028	2027-2028	2029-2030	2030-2031	Evaluation Measures
Continue the use of public street signage in hotspots - including to raise awareness of theft prevention such as “Lock it or Lose It” campaigns as well as signage to inform against public drinking.	Community Safety Team	✓	✓	✓	✓	✓	* Safe, connected and family-friendly communities where all people thrive, and have their needs met at all stages of their life.
Advocate to campaign alongside WAPOL to raise awareness and increase participation in the registration of CCTV to the WA Police-Cam-Map CCTV Database.	Community Safety Team	✓	✓	✓	✓	✓	* Safe, connected and family-friendly communities where all people thrive, and have their needs met at all stages of their life.

Topic 3 - Stakeholder Partnerships and Internal Capacity

Recommendation 1 - Foster a culture of partnership, communication, and coordination among diverse stakeholders, including government agencies, law enforcement, community organisations, businesses, residents, and other key actors.

Action	Responsibility	2026-2027	2027-2028	2027-2028	2029-2030	2030-2031	Evaluation Measures
Use internal capacity to conduct an audit of all vacant properties within the Shire and use the available legislation to ensure properties are maintained and suitable for human habitation.	Regulatory Services Directorate	✓		✓		✓	* Increase activation in the suburbs to reduce anti-social behaviour. * Safe, connected and family-friendly communities where all people thrive, and have their needs met at all stages of their life.
Continue to promote and support community place and space activations, particularly in areas with elevated crime or heightened perceptions of criminal activity.	Community Experience Directorate	✓	✓	✓	✓	✓	* Support art and culture, and events and activities that bring people together in shared experience and celebrations.

Action	Responsibility	2026-2027	2027-2028	2027-2028	2029-2030	2030-2031	Evaluation Measures
Form and nurture partnerships with key stakeholders to develop community capacity building and utilise shared knowledge and resources to support the community in safety and crime prevention.	Community Safety Team	✓	✓	✓	✓	✓	<ul style="list-style-type: none"> * Safe, connected and family-friendly communities where all people thrive, and have their needs met at all stages of their life. * Promote healthy and safe lifestyle choices and uphold public health and safety.
Advocate for the re-establishment of the Liquor Accord with relevant stakeholders and maintain its membership at quarterly meetings with the intention of reducing the availability of alcohol to at-risk groups and reduce alcohol related crimes.	Community Safety Team and Environmental Health Team.	✓	✓	✓	✓	✓	<ul style="list-style-type: none"> * Reduction in alcohol & drug related issues in the towns and communities. * Responsible service of alcohol for all licensed venues in all towns. * Safe, connected and family-friendly communities where all people thrive, and have their needs met at all stages of their life. * Promote healthy and safe lifestyle choices and uphold public health and safety.
Investigate the option to offer an after-hours security service within Newman.	Community Safety Team	✓					<ul style="list-style-type: none"> * Safe, connected and family-friendly communities where all people thrive, and have their needs met at all stages of their life. * Promote healthy and safe lifestyle choices and uphold public health and safety.

Action	Responsibility	2026-2027	2027-2028	2027-2028	2029-2030	2030-2031	Evaluation Measures
Seek funding for an annual program for the free de-sexing, microchipping and registration of all dogs within the towns of Marble Bar, Nullagine and Newman. This is to stop the ongoing breeding of domestic dogs with wild dogs, increasing their numbers and leading to attacks on people, livestock and other dogs.	Community Safety Team	✓	✓	✓	✓	✓	<ul style="list-style-type: none"> * Safe, connected and family-friendly communities where all people thrive, and have their needs met at all stages of their life. * Promote healthy and safe lifestyle choices and uphold public health and safety. * Advocacy and partnerships for addressing issues impacting safety of communities and improving information sharing and coordination.
Work with organisations such as Meta Maya, Pilbara Aboriginal Medical Services (PAMS), Kanyirninpa Jukurrpa Rangers, AMRRIC, Dept of Biodiversity Conservation and Attractions, and others, to visit Indigenous Communities to assist with animal management to decrease the rates of dog attacks on people, livestock and other dogs.	Community Safety Team	✓	✓	✓	✓	✓	<ul style="list-style-type: none"> * Support improved services to remote Aboriginal Communities. * Advocacy and partnerships for addressing issues impacting safety of communities and improving information sharing and coordination. * Safe, connected and family-friendly communities where all people thrive, and have their needs met at all stages of their life.

Action	Responsibility	2026-2027	2027-2028	2027-2028	2029-2030	2030-2031	Evaluation Measures
Increase community safety patrols within Newman and where possible, Marble Bar and Nullagine to report incidents of public drinking and volatile substance abuse to the relevant stakeholder for action.	Community Safety Team	✓	✓	✓	✓	✓	<p>* Safe, connected and family-friendly communities where all people thrive, and have their needs met at all stages of their life.</p> <p>* Promote healthy and safe lifestyle choices and uphold public health and safety.</p>
Review training opportunities to upskill the Community Safety Team to better serve the evolving needs of the wider community.	Community Safety Team	✓	✓	✓	✓	✓	<p>* A highly trained Community Safety Team who can assist the members of the community with a multitude of tasks.</p> <p>* Promote healthy and safe lifestyle choices and uphold public health and safety.</p>

Recommendation 2 - Create a supportive ecosystem where stakeholders can work together synergistically to identify, prioritise, and implement evidence-based strategies and interventions that address the root causes of crime and safety challenges.

Action	Responsibility	2026-2027	2027-2028	2027-2028	2029-2030	2030-2031	Evaluation Measures
Work with the Community Services Teams to compile and distribute a directory of social services provided to the community as well as conduct an audit to identify gaps and lobby for funds/organisations to address identified service gaps.	Community Services Team	✓	✓				* Safe, connected and family-friendly communities where all people thrive, and have their needs met at all stages of their life.
Advocate for the creation of a safe space to allow those people under the influence of drugs and or alcohol to recover and receive support in a safe location.	*Community Safety Team *Community Experience	✓	✓	✓	✓	✓	* Reduction in alcohol & drug related issues in the towns and communities. * Safe, connected and family-friendly communities where all people thrive, and have their needs met at all stages of their life.

Action	Responsibility	2026-2027	2027-2028	2027-2028	2029-2030	2030-2031	Evaluation Measures
Advocate for the installation of Automatic Number Plate Recognition (ANPR) cameras within Newman, Nullagine and Marble Bar to assist WA Police with identifying vehicles and drivers of interest within the Shire.	*Community Safety Team *IT Services	✓	✓				* Continue to invest in public spaces, amenities and heritage protection across the Shire. * Continue to invest in the CCTV network across the Shire and incorporate Crime Prevention Through Environmental Design (CPTED principles).

DRAFT



HOW WILL WE KNOW IF THE PLAN IS SUCCEEDING?

The Plan covers areas that are outside the direct responsibility of the Shire. The indicators below are not measures of the Shire’s performance in most cases. They are highly influenced by the actions of others and in some cases by wider economic and social forces well beyond the Shire’s control. However, the indicators play an important role in showing whether progress towards the community’s vision and outcomes is being achieved, or whether the Shire, community and other stakeholders need to redirect resources and effort.

This Plan’s actions will be monitored through community engagement from the use of the MARKYT Scorecard, with the addition of the Safety Scorecard Survey, on an annual basis. Using the available data from these reports, the Plan will be reviewed by its cessation in 2029 to inform an updated version.

The following table shows the Key Result Areas, outcomes and the key indicators of success. The data source for each indicator is also shown. These indicators will be monitored and reported annually.

Key performance indicators are also being developed through the Shire’s service plans. These will be added once finalised and included in the Shire’s annual monitoring and reporting.

Social <i>Safe, connected and family-friendly communities where all people thrive, and have their needs met at all ages and stages of life</i>	
Indicators	Data source
<ul style="list-style-type: none"> ▪ Perception of safety 	<ul style="list-style-type: none"> ▪ Community survey
<ul style="list-style-type: none"> ▪ Intentions to remain in East Pilbara 	<ul style="list-style-type: none"> ▪ Community survey

APPENDIX 1: COMMUNITY PROFILE

Snapshot of the Shire

The Shire of East Pilbara Estimated Resident Population for 2023 is 10,401, with a population density of 0.03 persons per square km.

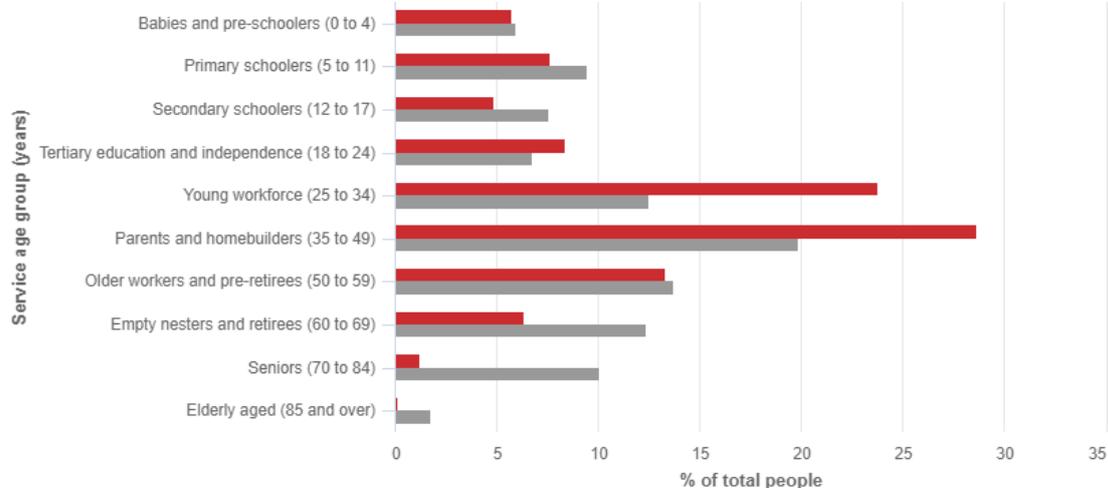
Our health is influenced by the environment we live in and the choices we make. Healthy choices and behaviours play an important part of people leading longer, healthy and active lives. These include increasing physical activity, improving diet, safeguarding mental health and wellbeing and reducing risky behaviours.

It is important the Shire understands the community’s current health status and barriers to determine what initiatives the Shire should focus on.

Age structure - service age groups, 2021

Total persons

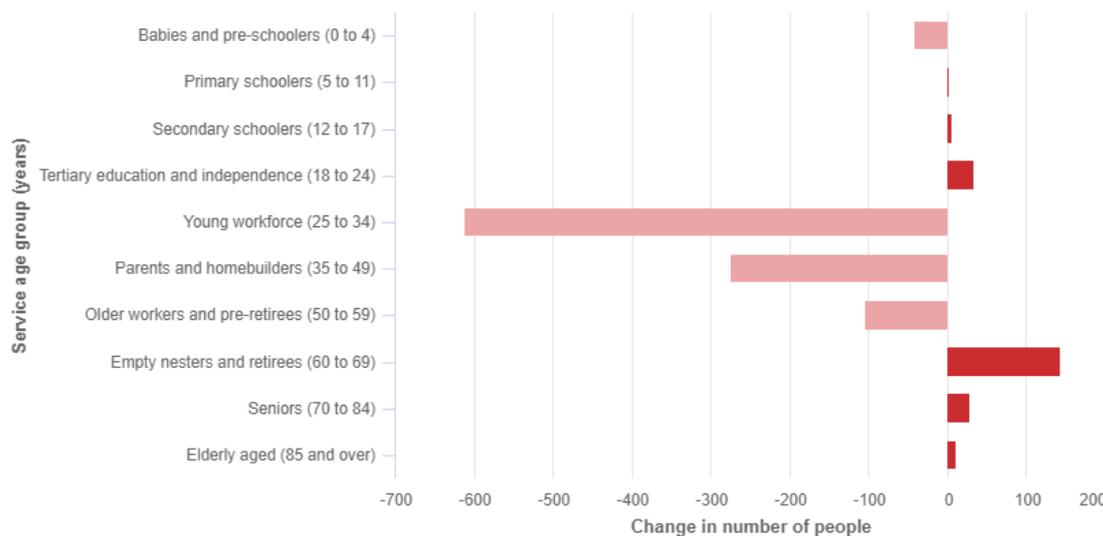
■ Shire of East Pilbara ■ Regional WA



Source: Australian Bureau of Statistics, [Census of Population and Housing, 2021](#) (Usual residence data). Compiled and presented in profile.id by .id (informed decisions).

Change in age structure - service age groups, 2016 to 2021

Shire of East Pilbara - Total persons



Source: Australian Bureau of Statistics, [Census of Population and Housing, 2016 and 2021](#) (Usual residence data). Compiled and presented in profile.id by [_id](#) (informed decisions).

Analysis of the service age groups of the Shire of East Pilbara in 2021 compared to Regional WA shows that there was a lower proportion of people in the younger age groups (0 to 17 years) as well as a lower proportion of people in the older age groups (60+ years).

Overall, 18.2% of the population was aged between 0 and 17, and 7.6% were aged 60 years and over, compared with 23.0% and 24.2% respectively for Regional WA.

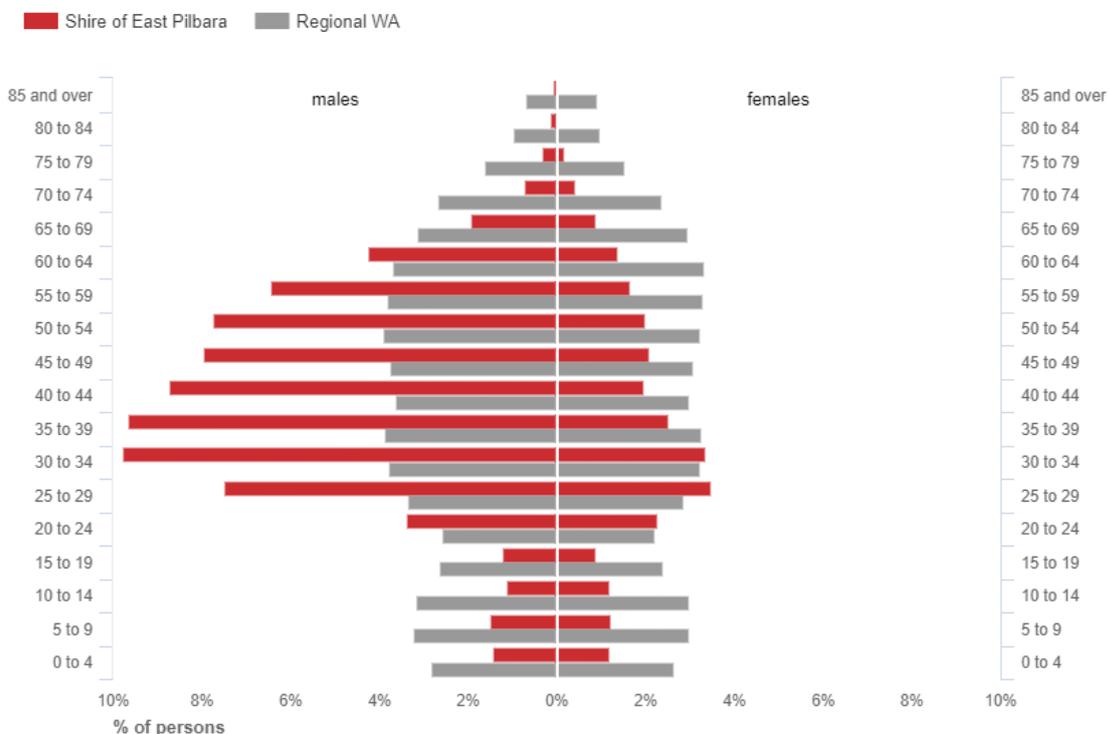
The major differences between the age structure of the Shire of East Pilbara and Regional WA were:

- A *larger* percentage of 'Young workforce' (23.8% compared to 12.5%)
- A *larger* percentage of 'Parents and homebuilders' (28.6% compared to 19.9%)
- A *smaller* percentage of 'Seniors' (1.2% compared to 10.1%)
- A *smaller* percentage of 'Empty nesters and retirees' (6.3% compared to 12.4%)

Life Expectancy

Life expectancy at birth estimates represent the average number of years that a newborn could expect to live, assuming current age-specific death rates are experienced throughout their lifetime. It is a statistical measure to give an indication of the rate of potentially fatal diseases within the area and does not consider non-fatal health outcomes such as disability or quality of life.

Age-sex pyramid, 2021



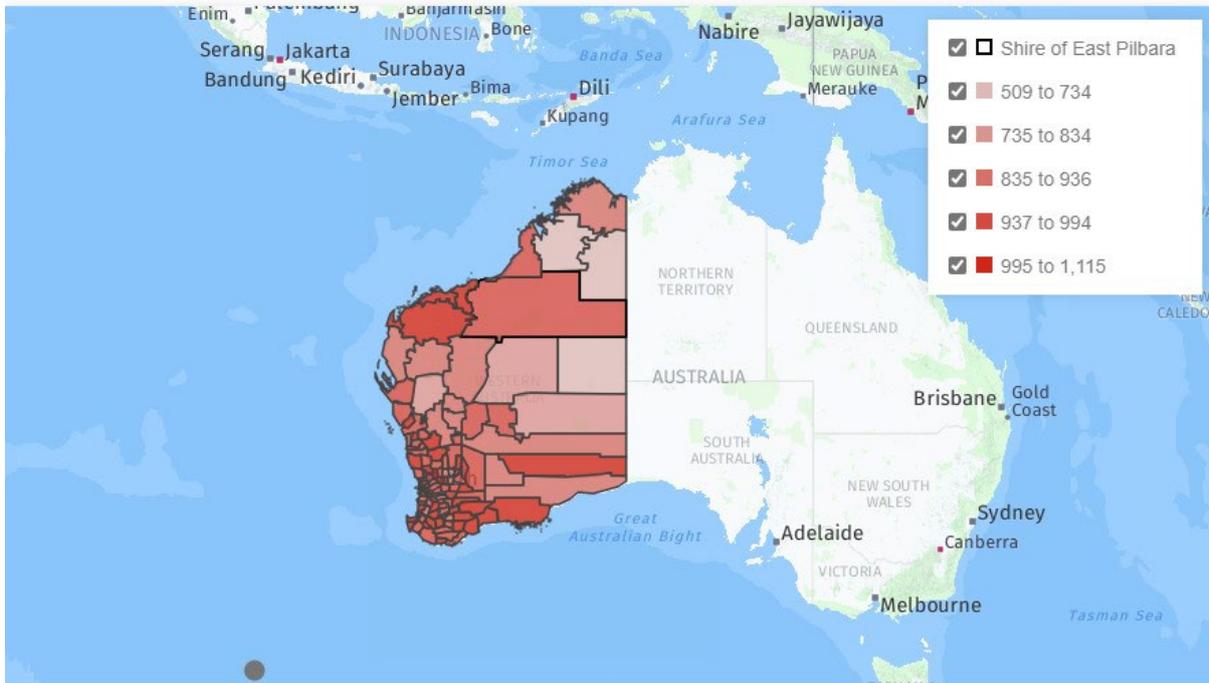
Source: Australian Bureau of Statistics, [Census of Population and Housing](#), selected years between 1991-2021 (Enumerated data). Compiled and presented in profile.id by .id (informed decisions).

The age-sex pyramid is a demographic tool which shows patterns of change in the age structure and sex ratio of an area over time. Its name comes from the traditional pyramid shape of an area which indicates a lot of children in large families, with a lower life expectancy and relatively few elderly. This shape is quite rare in developed nations like Australia. As nations and areas transition over time this shape turns into a column where there are less children, a mix of ages, including many elderly. The sex ratio of males to females can also be seen - young areas are likely to have more males, while elderly areas generally have more females due to longer life expectancy.

SEIFA Index of Disadvantage for the Shire of East Pilbara in 2021 was 939.

Index of Relative Socio-economic Disadvantage

2021 Local Government Areas



Source: Australian Bureau of Statistics, Census of Population and Housing 2016.
Compiled and presented in profile.id by .id (informed decisions).

The Shire of East Pilbara Socio-Economic Indexes for Areas (SEIFA) measure the relative level of socio-economic disadvantage and/or advantage based on a range of Census characteristics. Two of the SEIFA indexes: the Index of Relative Socio-Economic Disadvantage (IRSD) and the Index of Relative Socio-Economic Advantage and Disadvantage (IRSAD) can be selected below.

Index of Relative Socio-Economic Disadvantage (IRSD)

This index contains only disadvantage indicators (e.g. unemployment, low incomes or education levels, single parent families, low skilled occupations, poor English proficiency), so is best used to distinguish between disadvantaged areas, but doesn't differentiate between those areas which are highly advantaged, and those just lacking a lot of disadvantage (with population close to the middle). This index is more commonly used for funding allocations and advocacy, because it highlights the areas of most need.

Index of Relative Socio-Economic Advantage and Disadvantage (IRSAD)

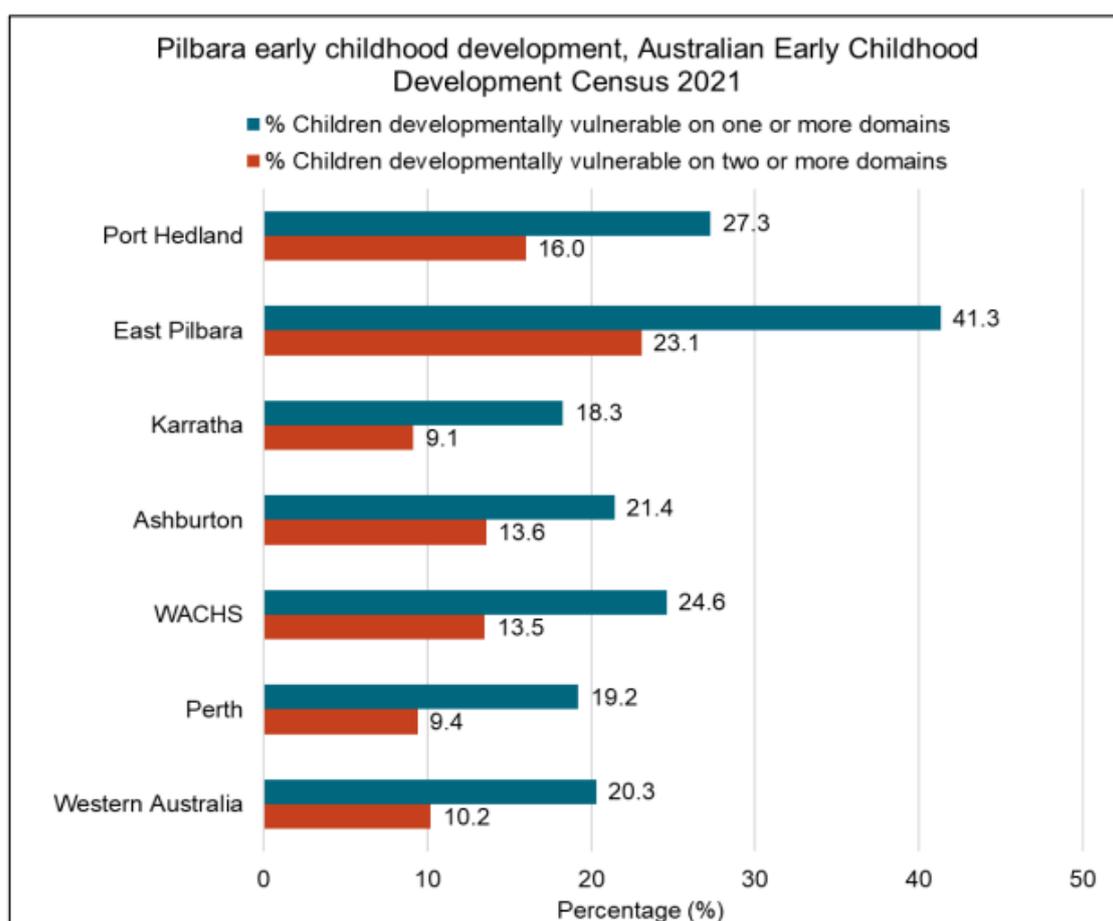
This index contains indicators of disadvantage as well as additional indicators of advantage (e.g. professional occupations, high income, higher education levels, high rent, large dwellings), Characteristics are also weighted differently than the IRSD, so areas do score differently on either measure. Often the IRSAD index will show a more "spread out" distribution with a greater range of scores from very high to very low, due to its ability to measure advantage above the average level.

SEIFA indexes are a good place to start to get a general view of the relative level of disadvantage in one area compared to others, but it is important to also look at these underlying characteristics as they can differ markedly between areas with similar SEIFA scores and shed light on the type of disadvantage being experienced.

A higher score on the index means a lower level of disadvantage or (in the case of IRSAD only) a higher level of advantage. A lower score on the index means a higher level of disadvantage on both indexes, and a lack of advantage on the IRSAD.

The percentile column indicates the approximate position of this small area in a ranked list of Australia’s suburbs and localities in 2021. It’s meant to give a broad indication of where the area sits within the whole nation. A higher number indicates a higher socio-economic status. For instance, a percentile of 72 indicates that approximately 72% of Australia’s suburbs have a SEIFA index lower than this area (more disadvantaged), while 28% are higher. This applies a comparison to suburbs even when the index concerned doesn’t relate to a suburb.

In 2021, Newman had the lowest level of Disadvantage in the Shire of East Pilbara, with a SEIFA index score of 1,037.7.



Source: Australian Early Development Census

Lifestyle Risk Factors

Lifestyle risk factors are risk factors that individuals can modify such as diet, exercise, smoking and drinking alcohol. In the Shire of East Pilbara, the most common long-term health condition was asthma, while 15.2% of the population reported one or more health conditions.

New research suggests that children may be more likely to be hospitalised for severe asthma complications during a heatwave. It is a problem that is only expected to increase as hotter weather patterns become more frequent.

The State Public Health Plan for Western Australia identifies that, “WA’s Aboriginal population have demonstrably poorer health outcomes than the non-Aboriginal population. These include significantly lower rates of life expectancy at birth, higher rates of infant and child mortality, higher rates of avoidable and preventable mortality rates, higher prevalence of chronic conditions (such as diabetes, cardiovascular disease, and respiratory disease), and higher potentially preventable hospitalisations.”

(Government of Western Australia, 2019)

Following Indigenous principles of land management, governments like the Shire must encourage a new era of reciprocity and kinship with nature and support gender justice by supporting women and girls' education and rights, which reduces fertility rates and raises the standard of living. Cultural narratives should be encouraged through art and media, thereby establishing a systemic response based on kinship with nature. Family violence prevention programs, alcohol prevention programs, accessible social housing and food security would all help to alleviate poverty in the community.

The Shire of East Pilbara is committed to finding a pathway for our most vulnerable populations which includes the elderly, children, pregnant women and people with disabilities and life-threatening illness or diseases.

The Shire believes in promoting a shared vision for a healthy and safer community by encouraging active local participation and fostering an inclusive environment where every voice is heard.

UNICEF has recognised that children have the right to a healthy life, to food, and water which is unpolluted, clean air and an education and these inalienable rights need to be reinforced by government at all levels.

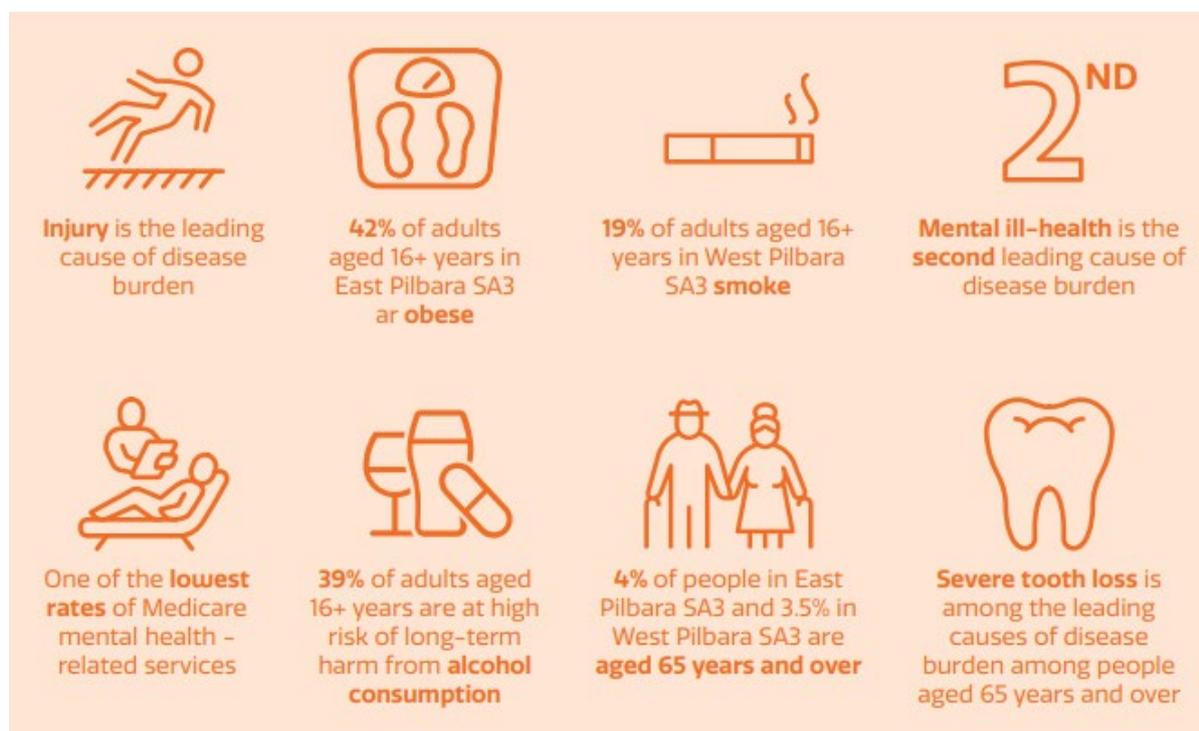
"It's clear that young people are feeling a sense of abandonment by the older generation. When an entire generation is having these kinds of feelings in an ongoing way, this signals that a major social issue is brewing. If young people don't have a sense of trust in governments and democratic processes, if they don't have a sense of hope, then this can have a highly damaging impact on their participation and engagement in democracy, not to mention on their psychosocial development, health and wellbeing," said Professor Amanda Third, lead researcher with UNICEF on the future for Australian children, between the ages of 10-18.

In Australia, rural and remote communities are more prone to the health-related impacts of climate change. The geographical location of regional communities makes them more at risk of extreme weather events such as heatwaves, extended periods of drought or low rainfall or high rainfall and flooding.

In Australia, heat waves have increased in the past 70 years. Part of the role of local government is to ensure that communities already disadvantaged by inequitable access to health care, due to living in regional Australia, are not further disadvantaged by the impact of climate change on health.

In some communities, infrastructure such as housing, telecommunications, transport and sanitation is lacking. This exacerbates existing health challenges and other disadvantages and leaves many communities more vulnerable to health risks. The development of sustainable communities and businesses through regionally specific transition plans is also very important if food security is threatened by flooding or fires in rural and remote communities. This dedicated funding for building research capacity across rural and remote Australia will create and ensure sustainable communities.

Pilbara Needs Assessment 2022-2024, conducted by the WA Primary Health Alliance advised:



(WA Primary Health Alliance, 2022)

From 2014-2018, the rate of unintentional drug induced deaths in Country WA was 8.3 per 100,000. In 2014-2018 the East Pilbara and West Pilbara SA3s had the second highest rate range of 7.5 to 9.9 deaths per 100,000 for unintentional drug-induced deaths (Penington Institute, 2020)

“Stakeholders have identified an emerging trend in drug use in children under 14 years and as young as five years old particularly in Nullagine, Marble Bar, Newman and Western Desert Communities. Stakeholders identified a lack of youth-specific services in the Pilbara region for alcohol and other drug use among children, as well as for mothers and babies. Additionally, feedback from stakeholders cited concerns about Fetal Alcohol Syndrome Disorder (FASD) in their communities, a lack of evidence about rates of FASD, and the health needs of children and young people suffering from FASD.” (WA Primary Health Alliance, 2022)

Organisations like <https://www.reddust.org.au> offer children, teens and youths' different pathways and role models.

Seed Mob <https://www.seedmob.org.au> offers teens an opportunity to create a more just and sustainable world, faced with the uncertainty of climate change. Aboriginal and Torre Strait Islander youth are at the forefront of climate change in the remote and regional areas they live, so they have the most at stake.

It's these communities on the frontline that need to be leading solutions and building societies that are resilient, healthier, cleaner and more just. Seed Mob is Australia's first Indigenous led youth group for climate justice, building strong communities and powered by renewable energies.

Heavy rainfall due to storms leading to flooding can result in psychological trauma, defined as any event that involves exposure to actual or threatened death or serious injury. Around 90% of residents in outer regional and remote areas are more affected than those in major cities in Australia.

Extreme weather events have a significant impact on mental health and wellbeing in the short and medium term and this relationship increases with the remoteness of the location. In a longitudinal study of the psychological impact of the Black Saturday bushfires in 2009, it was determined that most people affected by the fires were resilient to trauma and recover with time. However, the Lismore flooding events 2022, indicated communities had not recovered from one traumatic weather event before the next one impacted their community. The extent of on-going life stress was a predictor for delayed development of flood related post-traumatic stress disorder. Noting that the geographical landscape around Lismore is different to that in the East Pilbara Shire, there are still lessons to be learned from climate impact events, like floods and fire.

Drought also has an impact on mental health in rural and remote areas. The impact of drought is thought to be modulated by the characteristics of the drought and the remoteness of the resident. The levels of distress are in the sub-clinical range of moderate distress, putting them at increased risk of developing a mental health disorder. An association has also been found between drought severity and suicide in remote and rural males aged 30-49. In a retrospective study, there was a 15 per cent increase in the relative risk of suicide in this demographic when the drought index rose.

Problem alcohol use was found to be high in all communities and remained high over time. Such research illustrates the persistent nature of the mental health and wellbeing implications for extreme weather events, attending in more frequency with climate change impacts. The Australian Government has recognised that climate change is a significant and enduring threat to health and considers that the health risks are greater for those living in rural and remote communities.

The Australian Government has committed to rolling out mitigation and adaptation strategies for climate change driven by human activity. The development of the National Health and Climate Strategy will begin to administer the need for action in three main areas:

Extreme weather events, food security and vector-borne disease. Such strategies indicate why immunisation is an important tool in protecting communities. 8b

Major Causes of Death

When considering causes of death, three main disease groups are responsible for chronic disease and death. Cardiovascular disease (CVD), respiratory disease, mental illness, diabetes and dehydration are the main conditions nationally.

Chronic diseases can range from debilitating arthritis and low back pain to life-threatening heart disease and cancers. These conditions may never be cured completely, so there is generally a need for long-term management. Once present, chronic diseases often persist throughout life, although they are not always the cause of death.

Examples of chronic diseases coronary heart disease and stroke) • cancers (such as lung and colorectal cancer) • many mental disorders (such as depression) • diabetes • many respiratory diseases (including asthma and COPD) • musculoskeletal diseases (arthritis and osteoporosis) • chronic kidney disease • oral diseases. These chronic diseases have each been the focus of recent surveillance efforts, because of their significant health effects and costs, and because actions can be taken to prevent them.

In addition to the personal and community costs, chronic diseases result in a significant economic burden because of the combined effects of health-care costs and lost productivity from illness and death. Estimates based on allocated health-care expenditure indicate that the 4 most expensive disease groups are chronic—cardiovascular diseases, oral health, mental disorders, and musculoskeletal—incurring direct health-care costs of \$27 billion nationally, in 2008–09. This equates to 36% of all allocated health expenditure. This amount is conservative because not all health-care expenditure can be allocated by disease, particularly diseases predominantly managed in primary health care. Chronic disease costs would also be far greater if non-health sector costs, such as residential care, were included. Although patterns of spending vary by disease group, most health dollars that can be allocated to diseases are spent on admitted patient hospital services, out-of-hospital services, medications, and dental services. The large cost, in the order of several billions of dollars, is one of the key drivers for more efficient and effective ways to prevent, manage and treat chronic disease. 8

The Western Australian Burden of Disease Study 2015 (Department of Health Western Australia, 2021) indicated that in the Pilbara health region, coronary heart disease, dementia and severe tooth loss were among the leading causes of health costs.

Mental health was the second leading cause of disease burden in the Pilbara region. Disease burden is the impact of a health problem on a given population and can be measured using a variety of indicators such as mortality, morbidity or financial cost. Mental health measured 16% to the total disease burden for the Pilbara region (Department of Health Western Australia, 2021). Depressive disorders were the leading cause of mental health burden for women in the Pilbara while suicide and self-inflicted injuries were the second leading cause of mental health burden in males (Department of Health Western Australia, 2021).

The burden of disease attributable to suicide and self-inflicted injuries increases with remoteness and is one of the five most burdensome diseases in outer regional or remote and very remote areas of Australia. These drivers of inequity must be addressed in responses to health outcomes and climate change. Higher temperatures, less rainfall and flooding all have a measurable effect on the health and wellbeing of Australians – especially those living in rural, remote and regional centres.

Management of chronic disease in primary care

From 2013-14 to 2018-19, percentage of population utilisation of GP chronic disease management plans (CDMPs) increased in the region from 2.7% to 5.0% in East Pilbara SA3 and from 3.3% to 4.5% in West Pilbara SA3 (Australian Institute of Health and Welfare, 2020c). However, utilisation was still considerably below the national rate for SA3s in remote areas, which increased from 8.8% to 12% over the same period. Feedback from local stakeholders suggests that this may be an indication of a lack of allied health services in the region. (WA Primary Health Alliance, 2022)

Top five causes of death, Pilbara residents, 2014–2018

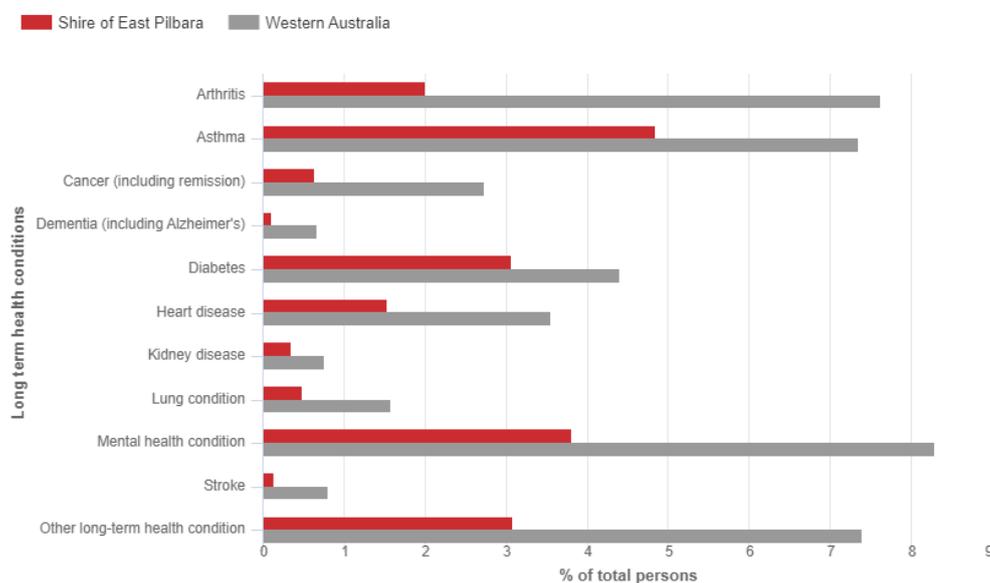
		1st	2nd	3rd	4th	5th	Total
West Pilbara	Condition	Neoplasms	Circulatory diseases	External causes of mortality	Endocrine and nutritional diseases	Respiratory diseases	
	No.	71	59	54	18	15	267
	SRR	0.72	1.13	0.82	1.61	0.9	0.89
East Pilbara	Condition	Circulatory diseases	Neoplasms	External causes of mortality	Respiratory diseases	Digestive diseases	
	No.	73	54	52	23	20	297
	SRR	1.63	0.69	1.07	1.54	2.21	1.22
Pilbara Total	Condition	Circulatory diseases	Neoplasms	External causes of mortality	Respiratory diseases	Digestive diseases	
	No.	132	125	106	38	33	564
	SRR	1.36	0.71	0.93	1.2	1.61	1.04

ASR = age standardised rate per 100,000 person years

SRR = Standardised Rate Ratio, relative to the WA rate. An SRR lower than 1 is lower than the WA average, an SRR higher than 1 is higher than the WA average.

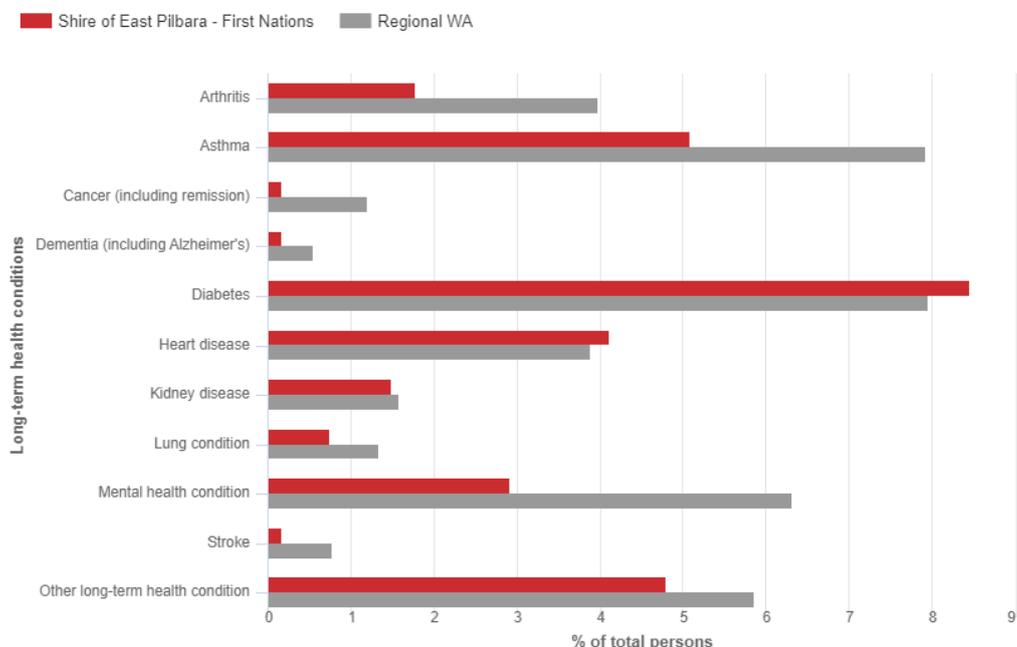
Source: Department of Health, Health Tracks

Long term health conditions, all persons, 2021



Source: Australian Bureau of Statistics, Census of Population and Housing, 2021 (Usual residence data). Compiled and presented in profile.id by _id (informed decisions).

Long term health conditions 2021

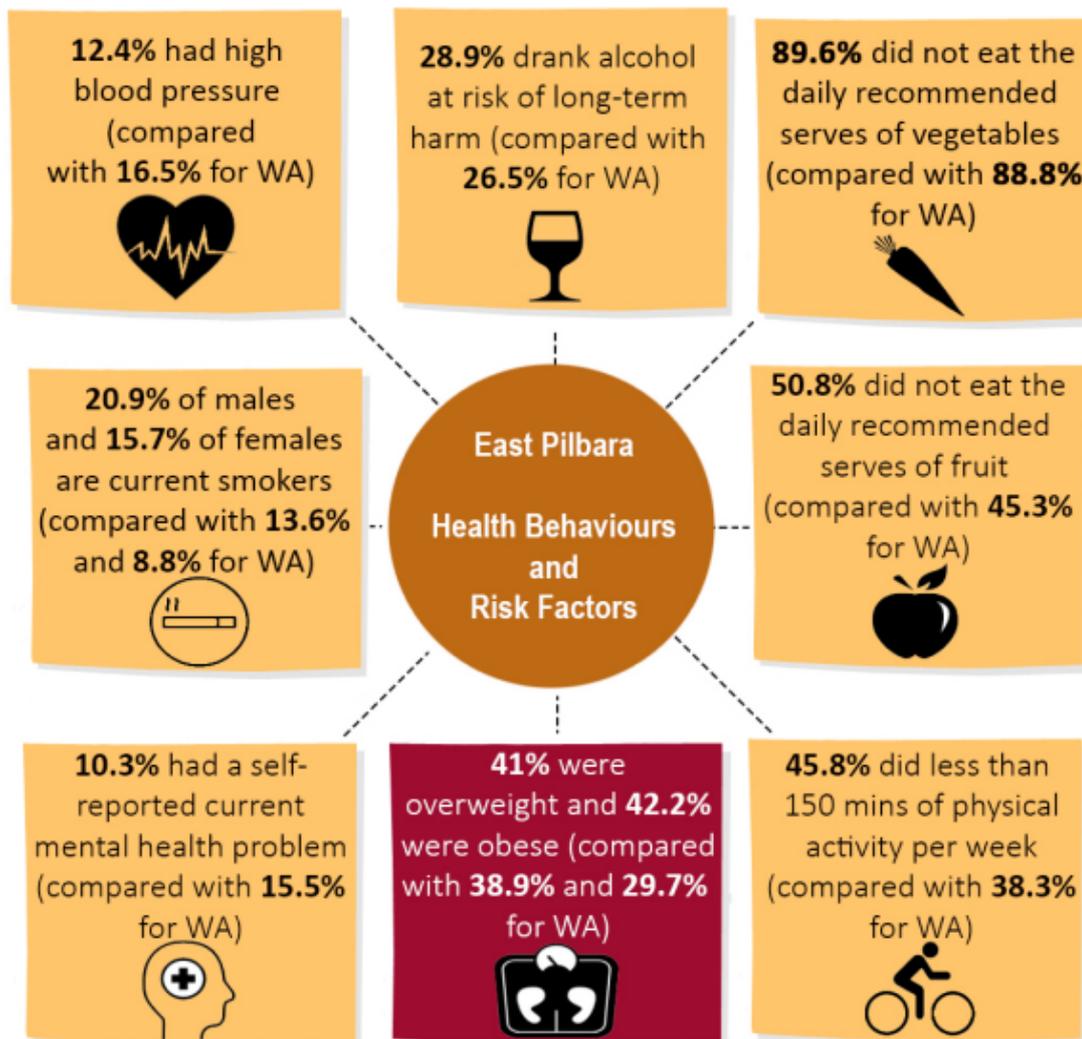


Source: Australian Bureau of Statistics, Census of Population and Housing, 2021 (Usual residence data). Compiled and presented in profile.id by _id (informed decisions).

East Pilbara Health Risk Factors

East Pilbara health risk factors

The graphics below highlight the prevalence of key health risk factors for the East Pilbara district. These are self-reported measures collected through the Department of Health's Health and Wellbeing Surveillance System.



Adults aged 16+, 2015-2019.

Source: Health and Wellbeing Surveillance System, Epidemiology Branch, Department of Health

Note: Colour coding reflects where a District rate is significantly different (red higher, green lower, amber similar) than the State rate. The State rate may still be at a level of concern.

East Pilbara HD Health Profile, 16 years and over, HWSS, January 2016 to December 2020

	East Pilbara HD		Western Australia	Significant difference~
	Prevalence Estimate	Estimated Pop^	Prevalence Estimate	From WA
	Per Cent	Persons	Per Cent	
Currently smokes	22.0	4,416	10.5	Higher
Eats less than two serves of fruit daily	52.6	10,582	53.1	-
Eats less than five serves of vegetables daily	89.6	18,019	89.5	-
Eats fast food at least weekly	26.4	5,311	34.0	-
Drinks at high risk levels for long-term harm (a)	28.2	5,667	25.9	-
Drinks at high risk levels for short-term harm (b)	11.9	* 2,391	10.3	-
Spends 21+ hours per week in sedentary leisure time	32.3	6,492	39.1	-
Less than 150 mins of physical activity per week (c)	40.4	7,945	39.7	-
Current high blood pressure (d)	11.0	2,210	17.3	Lower
Current high cholesterol (e)	11.8	2,377	17.6	-
Overweight (f)	43.9	8,826	38.2	-
Obese (f)	38.9	7,831	31.2	-
High or very high psychological distress	5.9	* 1,180	9.0	-
Attended a primary health care service in the past 12 months	83.3	16,759	89.9	-
Arthritis	13.9	2,801	20.0	-
Injury (g)	15.2	3,066	20.5	-
Current asthma	10.5	* 2,111	9.0	-
Mental health problem (h)	9.2	* 1,849	16.7	Lower
Stress related problem (i)	4.6	* 923	10.3	Lower
Anxiety (i)	6.3	* 1,269	9.8	-
Depression (i)	5.4	* 1,091	9.0	-

Source: WA Health and Wellbeing Surveillance System, Epidemiology, DOH.

This information is based on responses from 256 adults within the East Pilbara HD areas and 30162 adults within the State.

* Result has a RSE between 25% and 50% therefore should be used with caution.

. Result has a RSE above 50% therefore has been withheld.

~ Determined by comparing confidence intervals, where intervals that do not overlap are deemed significantly different. NA indicates that a comparison is not available.

^ Estimated population refers to the estimated number of people with the risk factor/ condition. It is derived by multiplying the Estimated Resident Population by the persons prevalence estimate.

(a) Drinks more than 2 standard drinks on any one day.

(b) Drinks more than 4 standard drinks on any one day.

(c) Adults aged 18 years and over only. Refers to moderate minutes with minutes spent in vigorous physical activity doubled.

(d) Currently have high blood pressure or take medication for high blood pressure. Of those who have had their blood pressure measured.

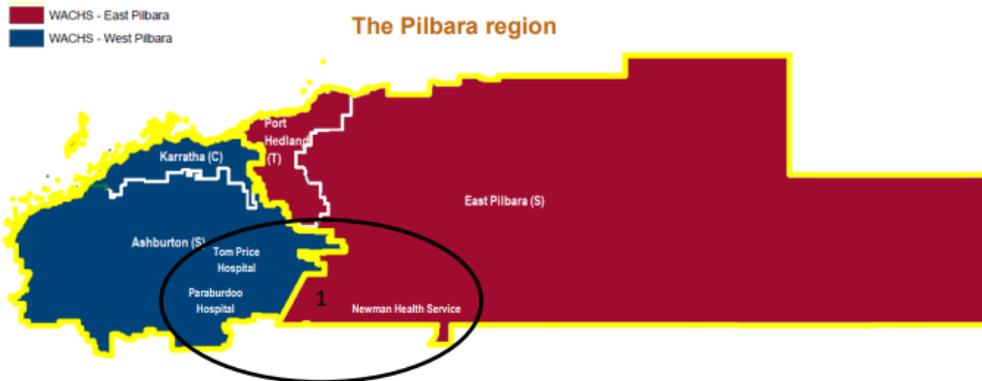
(e) Currently have high cholesterol or take medication for high cholesterol. Of those who have had their cholesterol measured.

(f) Height and weight measurements have been adjusted for errors in self-report.

(g) Injury in the last 12 months requiring treatment from a health professional.

(h) Diagnosed by a doctor with a stress related problem, depression, anxiety or any other mental health problem in the last 12 months.

(i) Diagnosed by a doctor in the last 12 months.



Geographic district	Operational district *	Local Government Area (S) = Shire, (C) = City	Hospitals
West Pilbara	West Pilbara	Karratha (C)	Karratha Health Campus
		Karratha (C)	Roeboume Hospital
		Ashburton (S)	Onslow Health Service
	Inland (see map for detail)	Ashburton (S)	Paraburdoo Hospital
		Ashburton (S)	Tom Price Hospital
East Pilbara		East Pilbara (S)	Newman Health Service
	East Pilbara	East Pilbara (S)	Marble Bar Nursing Post
		East Pilbara (S)	Nullagine Nursing Post
		Port Hedland (T)	Hedland Health Campus

Overview of regional service activity, by hospital, 2020-21

Sources: WACHS Emergency Department Collection, WACHS Inpatient Collection (excludes boarders and unqualified newborns), WACHS Outpatient Appointment Collection (excludes Did Not Attends and

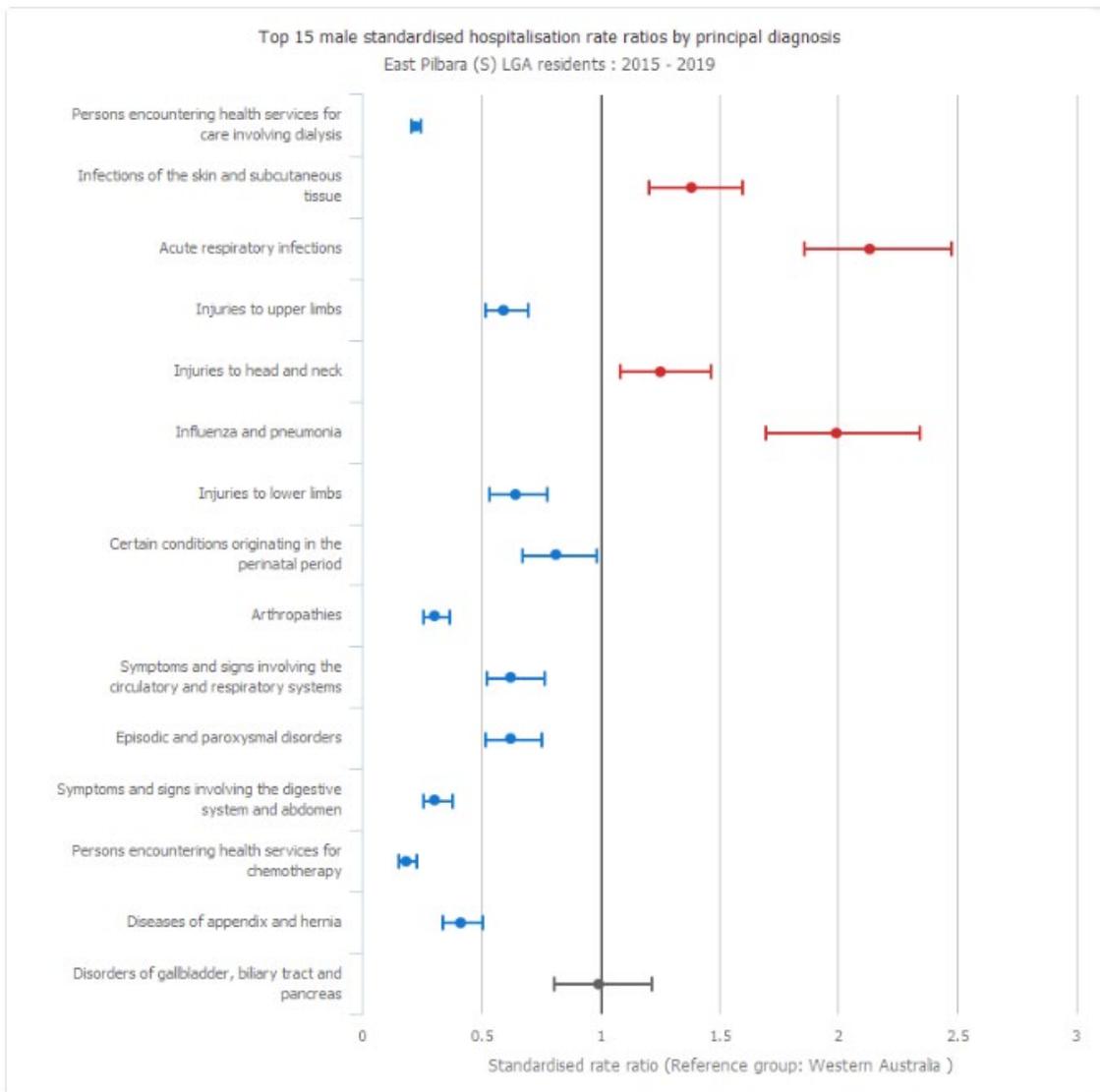
District	Hospital	Emergency Department presentations	Inpatient separations	Outpatient service events
West Pilbara	Karratha Health Campus	23,131	4,253	29,297
	Onslow Health Service	1,595	97	2,105
	Paraburdoo Hospital	948	27	461
	Roebourne Hospital	3,471	53	838
	Tom Price Hospital	3,329	389	1,688
East Pilbara	Hedland Health Campus	28,069	11,908	26,177
	Newman Health Service	8,159	796	2,260
	Marble Bar Nursing Post	521		1,803
	Nullagine Nursing Post	296		1,405
Pilbara Total		69,519	17,558	66,263

Non-Client events). *Includes activity by both Pilbara and non-Pilbara residents.

Pilbara Hospital bed Numbers

District	Hospital	Bed Numbers
West Pilbara	Karratha Health Campus	50
	Onslow Health Service	6
	Paraburdoo Hospital	4
	Roebourne Hospital	10
	Tom Price Hospital	8
East Pilbara	Hedland Health Campus	71
	Newman Health Service	10
Pilbara Total		159

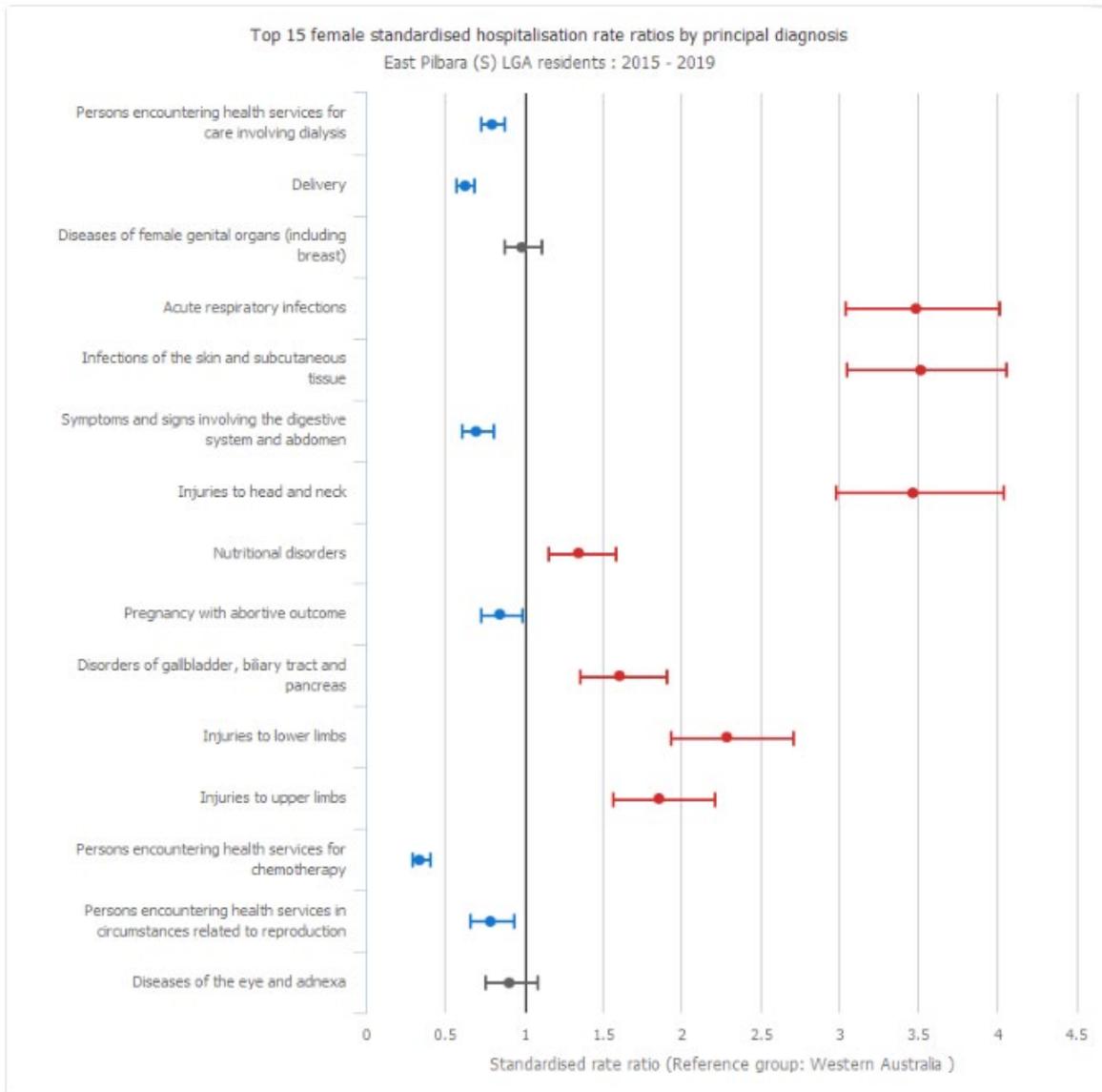
Includes neonatal cots. Source: WACHS Planning and Evaluation Bed Capacity Audit document, accessed September 2022.



Notes

- The error bars represent the 95% confidence intervals of the rate ratio. Red lines are significantly higher than the Western Australia rate while blue lines are significantly lower. Black lines are similar to the state rate.

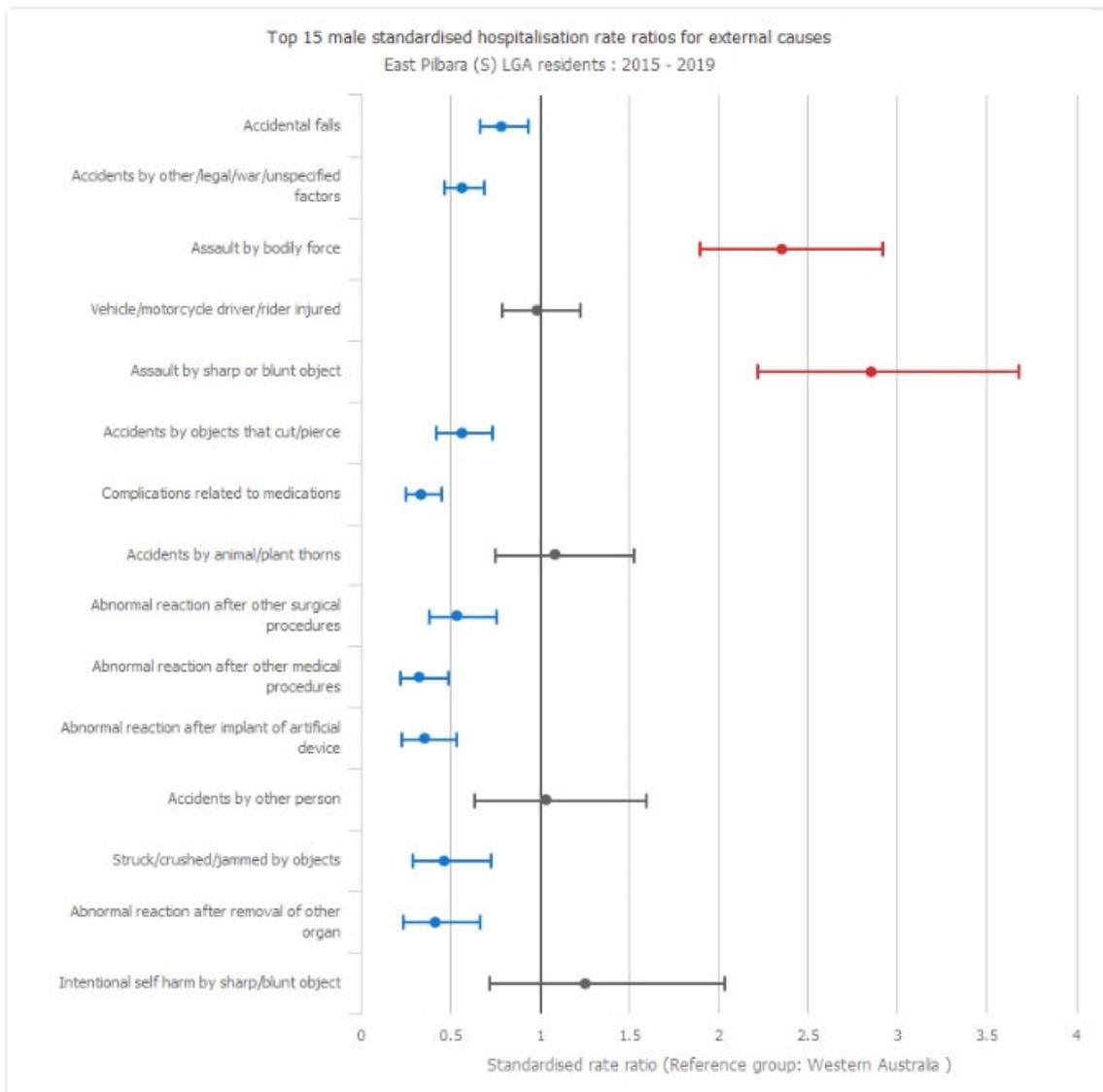
The rates for hospitalisations in males due to infections of the skin and subcutaneous tissue; acute respiratory infections; injuries to head and neck; and influenza and pneumonia were significantly greater than the rates in Western Australians.



Notes

- The error bars represent the 95% confidence intervals of the rate ratio. Red lines are significantly higher than the Western Australia rate while blue lines are significantly lower. Black lines are similar to the state rate.

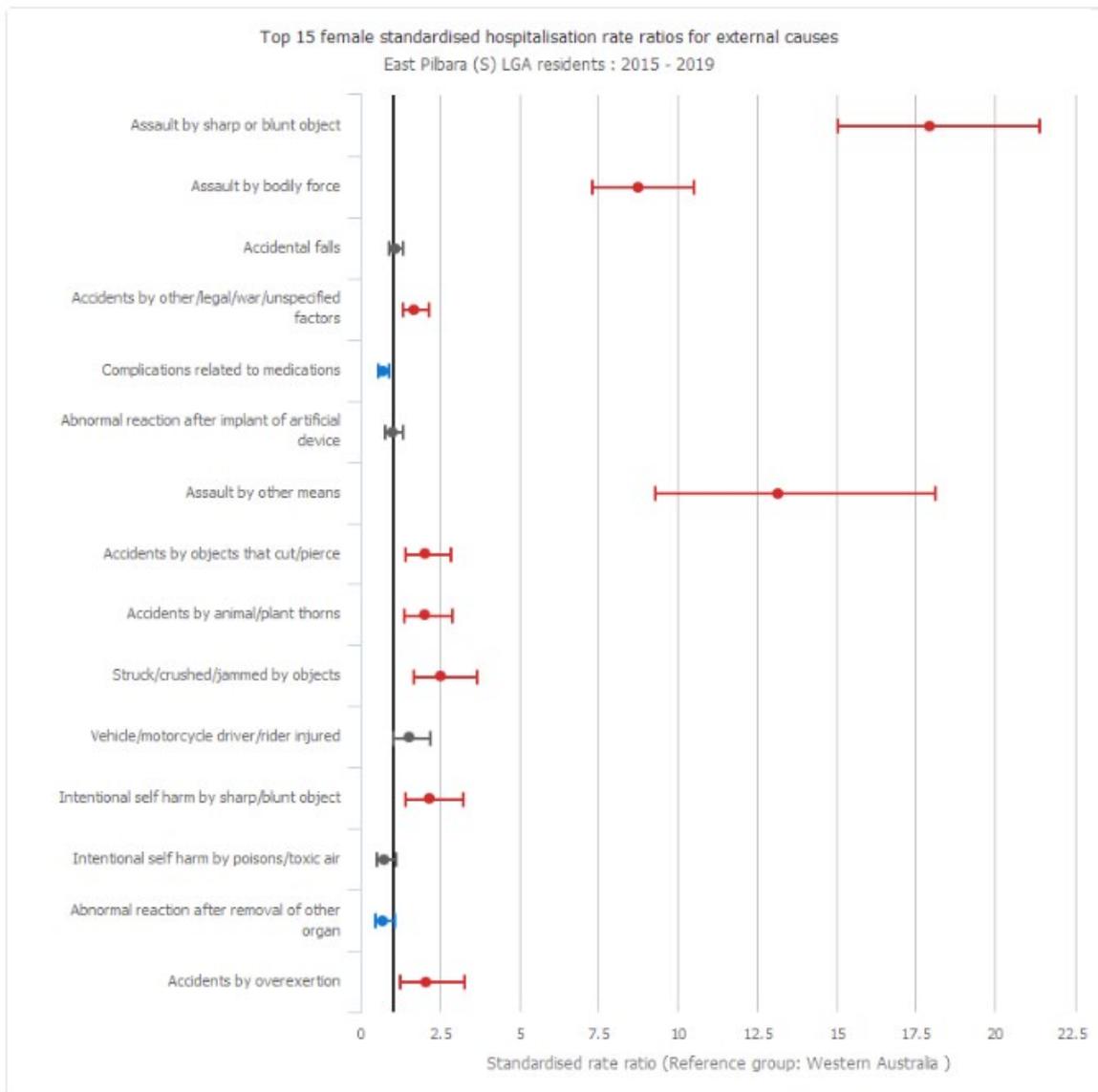
The rates for hospitalisations in females due to acute respiratory infections; infections of the skin and subcutaneous tissue; injuries to head and neck; nutritional disorders; disorders of gallbladder, biliary tract and pancreas; injuries to lower limbs; and injuries to upper limbs were significantly greater than the rates in Western Australians.



Notes

- The error bars represent the 95% confidence intervals of the rate ratio. Red lines are significantly higher than the Western Australia rate while blue lines are significantly lower. Black lines are similar to the state rate.

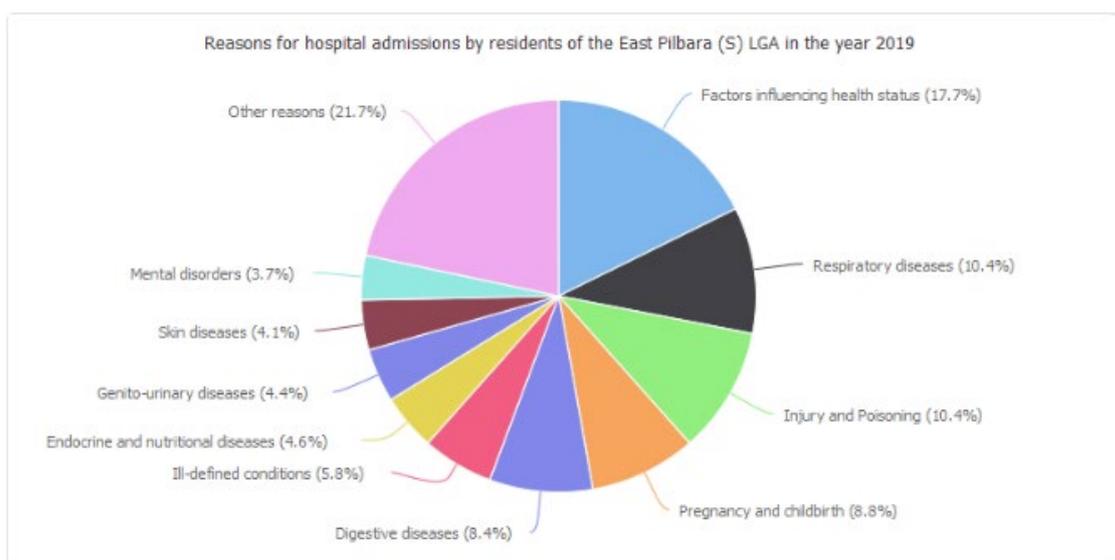
The rates for hospitalisations in males due to assault by bodily force; and assault by sharp or blunt object were significantly greater than the rates in Western Australians.



Notes

- The error bars represent the 95% confidence intervals of the rate ratio. Red lines are significantly higher than the Western Australia rate while blue lines are significantly lower. Black lines are similar to the state rate.

The rates for hospitalisations in females due to assault by sharp or blunt object; assault by bodily force; accidents by other/legal/war/unspecified factors; assault by other means; accidents by objects that cut/pierce; accidents by animal/plant thorns; struck/crushed/jammed by objects; intentional self-harm by sharp/blunt object; and accidents by overexertion were significantly greater than the rates in Western Australians.



For males living in the East Pilbara (S) LGA, based on the hospitalisation data covering the period 2015-2019, only hospitalisations due to respiratory diseases was significantly higher than the state rate after making adjustments for differences in the age-structure.

For females, the number of hospitalisations due to injury and poisoning, skin diseases, respiratory diseases, circulatory diseases, endocrine and nutritional diseases and infectious diseases were significantly greater relative to the state rate after making adjustments for differences in the age-structure.

Table 1. Estimated alcohol-attributable hospitalisations, average bed days and cost by year

Year	Estimated number of hospitalisations	ASR	ASR LCI	ASR UCI	Average bed days	Cost (CPI Adjusted)
2018	115	1081.5	426.2	1736.9	0.8	\$609,942
2019	94	953.8	360.0	1547.6	0.6	\$625,818
2020	99	1017.5	396.3	1638.7	0.8	\$695,492
2021	97	1042.3	290.1	1794.6	0.9	\$755,606
2022	86	876.2	614.9	1137.5	0.9	\$581,121

Table 2. Estimated number and rate of alcohol-attributable hospitalisations 2018-2022 (combined)

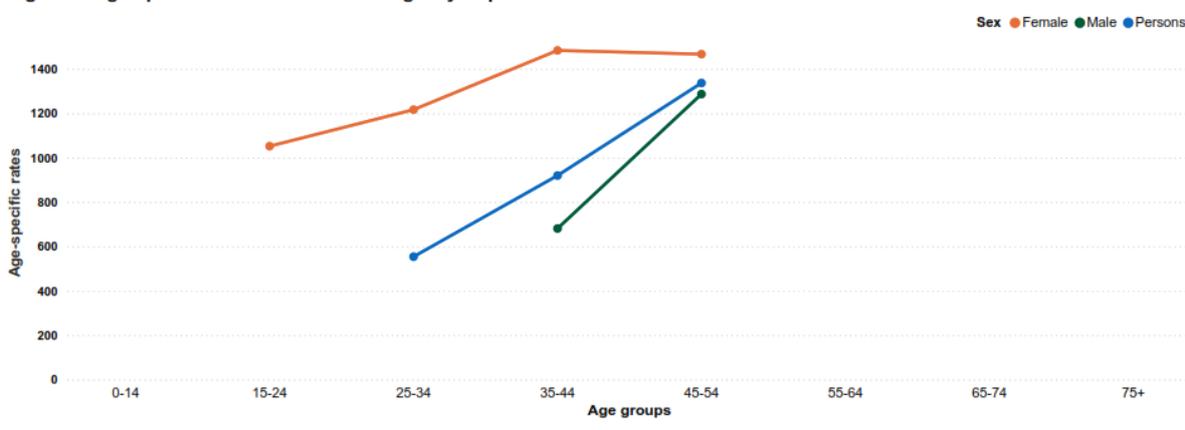
Sex	Estimated number of hospitalisations	ASR	ASR LCI	ASR UCI	SRR	SRR LCI	SRR UCI	Comparison with WA State rate
Female	217	1174.4	724.0	1624.8	1.85	1.62	2.11	Higher
Male	273	902.8	658.8	1146.9	0.86	0.76	0.97	Lower
Persons	490	983.6	768.5	1198.8	1.19	1.09	1.30	Higher

* All rates are per 100,000 population

ASR = Age-standardised rate; SRR = Standardised rate ratio; LCI = 95% lower confidence interval; UCI = 95% upper confidence interval. N/A - Rates are not provided when number of hospitalisations are less than 20 because the derived rates are unreliable. The indirect SRR method only requires a minimum of 6 cases and therefore allows comparison between the geographic area and WA rates.

Average bed days is the mean of the total bed days for any hospitalisation for which there is an alcohol attributable portion. This method has changed since previous dashboard versions, resulting in lower estimates. Estimated numbers less than 6 have been suppressed to protect privacy and data confidentiality. Other numbers have also been suppressed to prevent back-calculation and therefore the percentages may not add up to 100%. Age-specific rates are not provided when the number of hospitalisations is less than 20 for males and females and less than 40 for persons because the derived rates are unreliable. The estimated number of hospitalisations by year in Table 1 may not add up to the total number of hospitalisations in Table 2 due to rounding. "Other" health condition category in Figure 2 is made up of "Other alcohol-attributable injuries", "Other digestive system diseases" & "Other alcohol-attributable diseases".

Figure 3. Age-specific alcohol-related Emergency Department attendance rates 2018-2022



Immunisation rates

Immunisation is a safe and effective way to protect against harmful communicable diseases and, at the population level, prevent the spread of these diseases among the community. Several vaccine-preventable diseases, such as measles, rubella and diphtheria, are now rare in Australia because of Australia's high immunisation rates. See Infectious and communicable diseases. (Australian Government, 2024)

Immunisation is one of the most effective measures to improve the health of a community and is effective in reducing morbidity and mortality rates.⁷ When there is a high vaccine coverage there is less disease circulating, this is known as "Herd immunity".-The Australian Government has estimated that coverage of 92-94% is required for herd immunity, particularly from highly infectious diseases such as measles⁷.

For this reason, the national immunisation coverage target rate has been set at 95%.

Current Australia Wide Statistics are as follows:

State	% DTP	% Polio	% Fully Immunised
ACT	95.70	95.76	95.54
NSW	94.21	94.18	93.98
VIC	95.06	95.07	94.85
QLD	93.10	93.08	92.95
SA	95.31	95.26	95.04
WA	93.07	93.08	92.85
TAS	94.23	93.99	93.75
NT	92.37	92.40	92.14
AUS	94.15	94.13	93.93

This data table is for the five-year-old cohort (60 to less than 63 months old).

Analysis of data: The rolling annualised percentage of all children 'fully immunised' by 60 months of age for Australia is 93.93%.

Coverage for individual antigens due by 60 months was greater than or equal to 92.37% in all states and territories.

(Australian Government Department of Health and Aged Care, 2024)

The data tables below show the percentage of Aboriginal and Torres Strait Islander children fully immunised at one, two and five years of age. The data are for the most recent period available (annual period ending December 2023) and include the percentages for Australia as a whole.

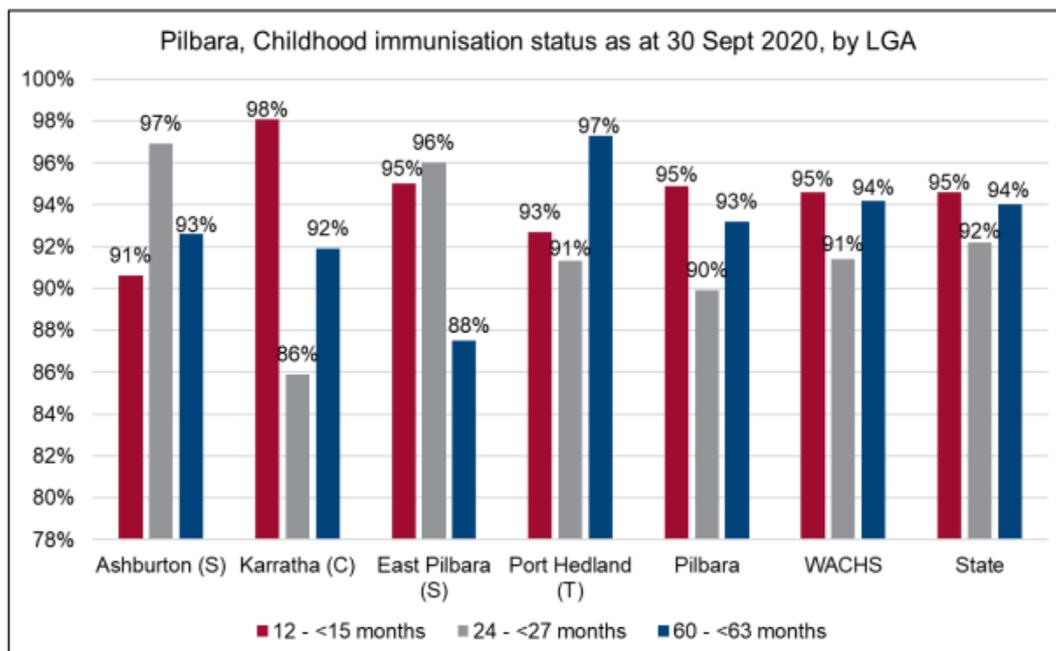
State	% DTP	% Polio	% Fully Immunised
ACT	95.81	95.29	95.29
NSW	96.59	96.42	96.37
VIC	96.19	95.74	95.74
QLD	95.74	95.64	95.56
SA	95.33	94.76	94.57
WA	93.94	93.79	93.67
TAS	96.25	96.09	96.09
NT	93.30	93.01	92.92
AUS	95.71	95.51	95.44

This data table is for the Aboriginal and Torres Strait Islander five-year-old cohort (60 to less than 63 months old).

Analysis of data: The rolling annualised percentage of Aboriginal and Torres Strait Islander children 'fully immunised' by 60 months of age is 95.44%.

For individual antigens due by 60 months of age all jurisdictions achieved coverage greater than or equal to 93.01%.

Pilbara and comparisons childhood immunisation 2020



Source: Department of Health, Health Tracks