

## **Strategic Community Reference Group**

## Meeting 1 Report — Public health

Date: Wednesday 19 March 2025

**Time:** 6.00–8.30 pm

**Location:** Civic Centre Conference Room 2 and 3

90 Boas Avenue, Joondalup

Facilitator: Joel Levin — AHA! Consulting

**Attendees** 

Presiding Member: Cr John Raftis

Elected Members: Cr Rohan O'Neill

Cr Rebecca Pizzey

**Community Members:** 

North-Central Ward Bettina Gould

Central Ward Linda Smith

South-West Ward Len Collier

South-East Ward Rachel Kemp

Janine Blake

South Ward Josh Hurley

Lynda Crawford

Youth Josh Challis

Subject Matter Experts: <u>Assunta Di Francesco</u> — Health Promotion Coordinator,

North Metropolitan Health Service

<u>Catrina McStay</u> — Senior Research Fellow, Edith Cowan University <u>Frith Klug</u> — Research Project Coordinator, Edith Cowan University

City Officers: Chris Leigh, Director Planning and Community Development

Joe Hussey, Manager Regulatory Services

Rebecca Maccario, Manager Strategic and Organisational Development

Charles Slavich, Principal Environmental Health Officer

Emily Peters, Policy Officer

**Observers:** Shani Toki — Health Promotion Officer, North Metropolitan Health Service

**Apologies:** Mayor Albert Jacob

Allan Connolly, North Ward Community Representative Helen Winterton, North Ward Community Representative Susan North, Central Ward Community Representative David Hudson, South-West Ward Community Representative

Tara Lie, Youth Representative Aimee Wright, Youth Representative

**Did not attend:** Cr Christopher May

Camila Mazzo, North-Central Ward Community Representative

## **Overview**

The purpose of the meeting was to provide input into the development of a new Public Health Plan. The meeting contributed to identifying the public health needs of the local community and explored public health priorities.

The objectives of the meeting were:

- To profile the City's role and current activities in public health
- To review the State Government public health priorities and the City of Joondalup community profile
- To identify priorities for a local public health plan.

Subject matter experts were invited and participated in the Strategic Community Reference Group meeting. Additionally, City Officers gave a presentation to define public health plans in the WA legislative context and explain why the City is developing a new Public Health Plan.

The following subject matter experts attended this meeting:

Assunta Di Francesco — Health Promotion Coordinator, North Metropolitan Health Service

Assunta Di Francesco is the Health Promotion Coordinator for the Healthy Population Program at the North Metropolitan Health. As part of the Health Promotion Service team, Assunta's work is focussed on reducing chronic disease and injury in the population by addressing smoking and vaping, poor diet quality, harmful alcohol use, and physical inactivity. Assunta's team recently supported the City of Nedlands to develop their public health plan, worked closely on the City of Vincent's Smoke-free Town Centres Project, and Food and Drink Policy, and supported the Stirling Local Drug Action Team. Assunta has over 20 years of experience in health promotion, working across different settings and risk factor areas.

## Frith Klug — Research Project Coordinator, Edith Cowan University

Frith Klug is a Public Health Nutritionist with 25 years of experience in strategy, research, policy development, behaviour change, and project management across diverse sectors, including health and utilities. She holds a Bachelor of Food and Nutrition from La Trobe University and a Bachelor of Commerce from the University of Western Australia. Frith is also a Chartered Accountant and a Graduate of the Australian Institute of Company Directors. Frith currently works within ECU's Nutrition and Health Research Innovation Research Institute. Her recent research has explored how local governments in Western Australia aim to improve food environments through a comprehensive review of local public health plans.

## Catrina McStay — Senior Research Fellow, Edith Cowan University

Catrina McStay is an Accredited Practicing Dietitian with over 10 years' professional and practical experience working in the field of public health nutrition policy. Catrina has researched and formulated departmental policy positions and government submissions on key public health related matters. Catrina's research has focused on the impact of the food environment, food policy and law, and food insecurity on health and wellbeing outcomes; and has particular interest in children's nutritional intake, food access and food safety. Catrina is currently a Senior Research Fellow in the Food Environments Team at ECU's Nutrition and Health Research Innovation Research Institute. In this role, Catrina is currently leading the research translation workstream, which includes public health planning related research projects.

## **Preparation**

To ensure an engaging experience, Strategic Community Reference Group members were expected to familiarise themselves with the pre-reading material provided ahead of time. The information in the pre-reading materials was designed to introduce the topic and promote contribution to the discussion.

#### **Outcomes**

## Presentation — What is a public health plan

The Strategic Community Reference Group meeting opened with a presentation from City Officers to define public health plans in the Western Australian legislative context and clarify the purpose of developing a new City of Joondalup Public Health Plan 2026–2031. The presentation covered the State Government Public Health Plan priorities, the City's role and activities in the public health sphere, the social determinants of public and individual health, and included the following aspects of strategic planning for local public health.

## Purpose of a Public Health Plan

- The City of Joondalup Public Health Plan 2026–2031 will be a new plan to respond to local health risks and establish objectives and policy priorities for the promotion and protection of public health in the city.
- The *Public Health Act 2016* (WA) requires each local government to create a local public health plan that applies to its district.
- Local public health plans must be consistent with the WA State Public Health Plan, with a focus on the specific public health needs of the local community.
- Through informed and responsible public health planning, the draft City of Joondalup Public Health Plan 2026–2031 will aim for long-term resilience with a focus on measures that promote positive health outcomes for the city's community.

### What is public health?

The Public Health Act 2016 (WA) defines public health broadly as:

- a) The wider health and wellbeing of the community.
- b) The combination of safeguards, policies and programs designed to protect, maintain, promote and improve the health of individuals and their communities to prevent and reduce the incidence of illness and disability.

Public health considerations include a wide range of actions aimed at improving the wellbeing and quality of life for all communities and individuals. Actions to enhance public health incorporate both historical and proposed activities in the natural and built environment.

#### Determinants of health

An individual's physical and psychological make up interacts with their societal, environmental and socioeconomic conditions.

Many factors combine to affect the health of individuals and communities, including:

- where we live
- the state of our environment
- our genetics
- our income and education level
- our relationships with friends and family.

Knowledge and attitudes, health risk behaviour, social support, and the built and natural environments can all strengthen or undermine individual and community health.

#### WA State Public Health Plan

The draft WA State Public Health Plan 2025–2030 was released for consultation in February 2025. The draft plan assists local governments to develop their local public health plans in alignment with the State Government's.

The State Government's Public Health Plan outlines a vision, objectives, principles and policy priorities for everyone in WA. It provides a framework for local governments to adapt according to their unique community health and wellbeing needs.

Vision: The best possible health, wellbeing and quality of life for all Western Australians — now and into the future.

## Overarching objectives:

- 1. Aboriginal health and wellbeing: Address racism and strengthen the cultural determinants of health for Aboriginal people in WA.
- 2. Equity and inclusion: Ensure public health programs and services are accessible, equitable and culturally secure.

#### Core objectives:

- Promote: Foster strong communities and healthier environments
- Prevent: Reduce the burden of chronic disease, communicable disease, and injury
- Protect: Protect against public and environmental health risks, effectively manage emergencies and lessen the health impacts of climate change
- Enable: Bolster public health systems and workforce, and leverage partnerships to support health and wellbeing.

## Local public health plans

A local public health plan must address the following criteria as it relates to the local government district:

- identify the public health needs
- examine data relating to health status and health determinants
- establish objectives and policy priorities for the promotion and protection of public health
- establish the development and delivery of public health services
- include a report on the local government's performance of its functions under the *Public Health Act* 2016 (WA).

#### Local Government role

As the level of government closest to the community, the City plays a vital role in public health. Local governments can directly influence many determinants of health through the provision of a broad range of services, including:

- infrastructure and property services
- recreational facilities
- health services
- Community services
- building services
- planning and development
- facility administration
- cultural services
- utility services (some areas)
- additional services (some areas).

#### Public health in the City of Joondalup

The City of Joondalup delivers a wide range of services, programs and initiatives to fulfill some of the health and wellbeing needs of the local community. Many services delivered by the City are statutory requirements under State and Commonwealth legislation. Other services, programs and initiatives are required under local laws, and others are delivered under the direction of Council.

Below are some examples of the services, programs and initiatives provided by the City that contribute to positive health and wellbeing outcomes in the community.

- · Midge management
- Emergency management
- · Firebreak inspections
- Sporting facilities
- Community venue management
- Leisure facilities
- Pathways
- Cycling infrastructure
- · Fitness equipment

- · Libraries
- · Community events
- · Arts development
- · Children's programs/events
- Youth programs/events
- · Senior's programs/events
- Environmental planning
- · Urban planning
- Building inspections

- · Premises inspections
- · Food safety inspections
- Construction and maintenance
- · Field patrols and services
- Natural areas management
- · Stormwater drainage
- · Community education
- · Climate change management
- · Waste management

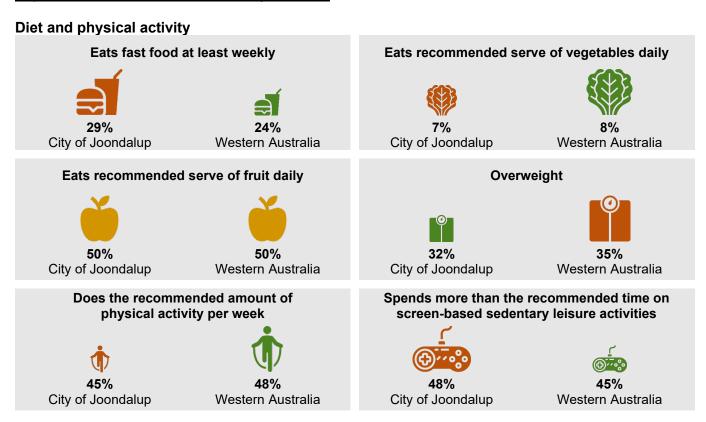
The slides from this presentation can be found at Appendix 2.

## Discussion — City of Joondalup public health picture

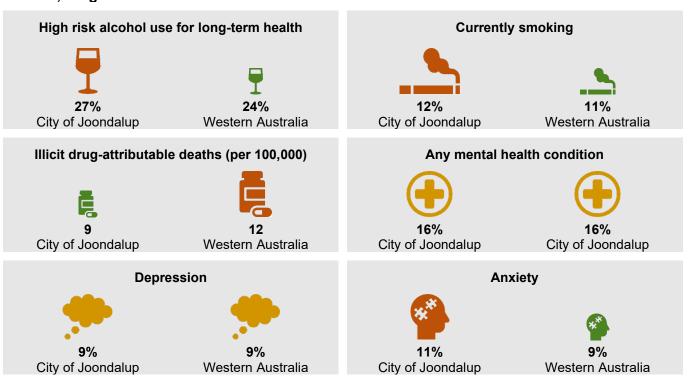
The purpose of this facilitated discussion was to explore the 'City of Joondalup health and wellbeing snapshot' and encourage members to think broadly about causative factors that impact public health. Participants received physical versions of the 'health and wellbeing snapshot' and 'Determinants of health' infographic to accompany the same information presented on the slides.

The discussion began with an exploration of the 'City of Joondalup health and wellbeing snapshot'. The tables below show the statistics provided to participants.

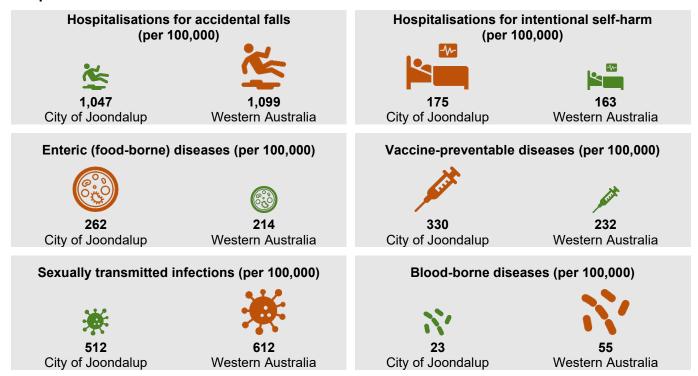
## City of Joondalup health and wellbeing snapshot



#### Alcohol, drugs and mental health



#### Hospitalisations and disease



### Discussion — Health and wellbeing snapshot Q&A

After exploring the health and wellbeing snapshot, members asked City Officers and subject matter experts how this snapshot was developed, including where the data came from, whether they can access the raw data and subsequent related questions and comments. Below is a dialogue of questions/comments from Reference Group members and answers by subject matter experts.

**Question:** Where did these statistics come from?

#### Answers:

- City Officers advised that the snapshot was based on information prepared by the WA Department of Health and provided to the City to inform the development of the local public health plan.
- The subject matter expert explained that the WA Department of Health sourced this data from multiple records systems and databases, including the WA Health and Wellbeing Surveillance System, a running survey managed by the Epidemiology Directorate of the WA Department of Health.
- [provided post-meeting] Other data sources:
  - · WA Hospital Morbidity Data Collection (WA Department of Health Information and System Performance Directorate)
  - WA Cause of Death Unit Record File (Australian Co-ordinating Registry, the Registries of Births, Deaths and Marriages, the Coroners, the National Coronial Information System)
  - · WA Notifiable Infectious Diseases Database (WA Department of Health Communicable Disease Control Directorate)
  - · 2021 Estimated Resident Population (Australian Bureau of Statistics)
  - · 2021 Census of Population and Housing (Australian Bureau of Statistics).

**Question:** What is the health and wellbeing surveillance system survey, where are the results published, and can the public access the raw data?

#### **Answers:**

- The subject matter expert could not provide comment on the specifics of the survey, as their organisation is not involved in the survey, which is conducted by the Epidemiology Directorate of the WA Department of Health. However, they noted that reports are likely published annually.
- [provided post-meeting] Additional information:

- WA Health and Wellbeing Surveillance System was established by the Department of Health in 2002 to monitor the health status of the general WA population.
- Each month, approximately 700 Western Australians are randomly selected to complete the survey online or over the telephone to collect de-identified information about their physical and mental health and wellbeing.
- · Annual reports are published on the WA Department of Health's website.

**Comment:** No one has ever heard about this survey or known anyone who has completed it. The sample size must be very small — sceptical about whether these are valid surveys.

Question: Where do the numbers in the snapshot come from if so few people were surveyed?

#### Answers:

Subject matter experts explained that these are not the "real" numbers representing the specific
individuals surveyed, they are estimated numbers for the whole community, found by applying the
Bayesian statistics model to the survey results.

**Question:** What is the "Bayesian" model? Why would you make a health and wellbeing profile using estimated numbers when you can use real numbers?

#### **Answers:**

- The subject matter expert advised that the Bayesian statistics model is used to update the already collated information from previous surveys, with new information from the most recent surveys to create an estimated number or prevalence figure for the whole City of Joondalup community.
- Another expert added that the real numbers would only provide information on the individuals most recently surveyed and is therefore not as useful as the estimated numbers, which more accurately represent the wider community.

**Question:** The community has been burnt by the use of "estimates", "models" and "modelling" in recent times — what makes you confident this model will even work or be appropriate here?

#### Answers:

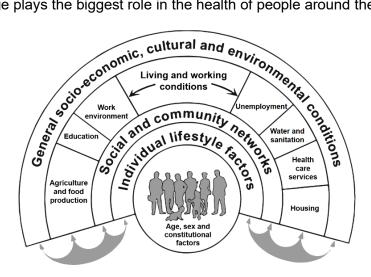
- Subject matter experts reiterated that they are not a part of the collection or analysis of data, adding that they are unsure about the use of other models and modelling practices, but is confident in the use of the Bayesian model for health and wellbeing research.
- Another expert added that the core functionalities of the model are incorporating all the data, analysis, and conclusions past surveys with the most recent survey results to come to a revised estimated number or prevalence figure.

Following this discussion, Members were encouraged to contact City Officers for further information on the 'City of Joondalup Health and Wellbeing snapshot', the WA Health and Wellbeing Surveillance System, other data sources, and Bayesian statistics modelling.

The Reference Group then moved on to the next part of the discussion regarding the determinants of health and the City's responsibilities and influences in the public health sphere.

#### Determinants of health

Participants were shown the infographic below (physical copy also provided) and asked to consider which of the factors in this image plays the biggest role in the health of people around them.



#### City of Joondalup responsibilities and influence

The following information regarding the City's responsibilities and influences on public health was also presented to the Reference Group prior to the discussion:

- The City has responsibilities under more than 40 different Western Australian Acts, including land use planning, building control, public health services, food, domestic animal control, litter control, parking, and roads and traffic.
- The City's responsibilities for health and wellbeing fall under the following three areas:
  - · Health protection and compliance: regulation of tobacco, alcohol, food safety, control of insects and vectors, pollution/waste, noise
  - · Public health emergency management: disaster planning, response and recovery, pandemic planning
  - · Health promotion: Promoting healthy lifestyles, opportunities for social connection, arts, culture and recreation participation.
- The City can have the largest influence on public health and wellbeing through strong, self-reliant and resilient communities whose current and future needs are met. This can be achieved by conducting the following activities:
  - · Safe and nutritious food
  - Safe drinking and aquatic facility water
  - · Safe housing
  - · Mosquito and vermin control
  - Sustainable waste management
  - · Safe communities

- · Walking and cycling paths and trails
- Smoke and alcohol-free environments
- · Parks, reserves and public open spaces
- · Events, spaces and places celebrating community cohesion
- · Health information/education activities and programs
- · The way communities are designed

#### Discussion

In table groups, members were asked to look at the determinants of health infographic and consider what may be the most likely reasons for the statistics in the City of Joondalup health and wellbeing snapshot. A plenary discussion followed, where the original table groups presented their insights and ideas, and other members discussed and contributed to them. The Reference Group presented the following talking points:

- Public health and wellbeing is about individual choices and also, equally importantly, how we choose to interact as a community.
- Everyone is different and each have their own individual and personal lifestyles there are often specific things in an individual's lifestyle that contribute more to overall health and wellbeing than the general socio-economic, cultural and environmental conditions.

- It is very important to question what in our environment is making us unhealthy. Ther needs to be a holistic approach to public health and wellbeing, just like the approach we should take with our bodies.
- The City could amend their policies around permitting new liquor stores and liquor licences.
- It is quite difficult to determine what the largest or most central role of local government is in public health and wellbeing, as there are so many factors that the City can impact.
- General public health issues include:
  - Lack of accessible general practice and outpatient health care services and long wait times to schedule appointments in the Joondalup area, resulting in delays in people receiving treatment.
  - · Inadequately resourced hospital-based and inpatient health care services with particularly long waits times at the Joondalup Hospital Emergency Department, often the worst in all of Perth.
  - Poor water quality at Mullaloo beach is a huge issue because swimming in or consuming polluted water can cause severe illness. The poor water quality also generates fear, anxiety and mental and emotional stress, especially for people who use the beach every day and rely on accessing the ocean as part of their health care regime.
- After members raised and discussed the general public health issues above, the facilitator commented
  that these issues are the WA State Government's responsibility and not within the scope of local
  government's role in public health. However, local governments can advocate for policy change at the
  State Government level, noting that there is a City of Joondalup Advocacy Framework to guide this.
- A member then questioned whether the Advocacy Framework is best-suited to guide advocating for policy change, as the majority of the City's advocacy activities seem to be aimed at acquiring grant and general funding. City Officers advised that the framework covers all advocacy activities, including for funding to implement priority projects and initiatives, investment in local businesses and organisations, and changes to government policy. Participants were then encouraged to contact City Officers if they needed clarification or had any further queries regarding the Advocacy Framework or the City's advocacy activities.

The raw notes from this discussion can be found in Appendix 3.

## Activity 1 — Exploring priorities

The purpose of this activity was to identify priorities for a local public health plan and develop rationales to support these priorities. Each table group was provided with an activity template and a set of twelve small palm cards. Eight of the palm cards listed public health focus areas partly derived from the 'City of Joondalup health and wellbeing snapshot', and four were 'other' cards with space for members to write in an alternative focus area.

Below are the eight focus areas provided:

Diet
 Mental health
 Physical activity
 Food-borne disease
 Access to public open

· Alcohol and other drugs · Vaccination rates space

In table groups, the participants were asked to consider the information from the previous discussion, including the 'health and wellbeing snapshot', 'determinants of health', and local government's role and responsibilities in public health, and identify a maximum of six priority focus areas for a local public health plan. After each group ranked their focus areas and provided rationales, the groups shuffled, with one member remaining at the original table, and the new groups explored each other's ranking and rationales. Participants then reconvened with their original table groups, with the opportunity to rearrange the ranking of their priorities and amend the rationales.

The templates from Activity 1 are below:

**Group 1** 

	Priority area	Rationale	Approach
1	Diet (/food environment) *	Foundation for health	прргодоп
2	Mental health	Foundation for health	
3	Physical activity	Foundation for health	
4	Access to public open space	Enables [priorities] 1–3	
5	Alcohol and other drugs	Increases impact of [priorities] 1–3	
6	Environmental pollutants (/factors) *	Affects [priorities] 1–4	

<sup>\*</sup>Additions to focus areas provided by members

**Group 2** 

	Group 2			
	Priority area	Rationale	Approach	
1	Environmental pollutants	<ul> <li>Water — Beaches/drinking.</li> <li>Air pollutants</li> <li>Radiation EMF [electromagnetic fields].</li> <li>Chemicals</li> <li>Tip and sewerage</li> </ul>		
2	Other: Access to fresh, non- GMO [not genetically- modified-organisms] food provisions	<ul> <li>Support access to food choices that are healthy and fresh produce</li> <li>Community gardens</li> <li>Local produce markets</li> </ul>		
3	Access to public open space / Physical activity	<ul><li>Provide and maintain public parks</li><li>Recreational centres</li></ul>		
4	Mental health / Other: Community and social engagement	<ul><li>Provide and maintain public parks</li><li>Recreational centres</li></ul>		
5	Food-borne disease			
6				

Group 3

	Priority area	Rationale	Approach
1	Mental health	If people are happy and satisfied with life (Anxiety disorder – 11% of population in City of Joondalup)	
2	Physical activity	Mental health and physical health (45% of City of Joondalup)	
3	Access to public open space	Allows people access to areas to be mentally and physically well	
4	Alcohol and other drugs	Alcohol and Smoking incidence higher in Joondalup than WA average	
5	Food-borne disease	<ul> <li>GI disease 262 [in COJ] –</li> <li>214 [in WA]</li> <li>Public? or Private?</li> <li>Direct intervention from safety team or education to private homes</li> </ul>	
6	Environmental pollutants	For physical well-being and health	

The activity moved to a plenary open-floor discussion where each table group explained their priority focus areas and rationales. Members presented the following talking points:

- The focus areas all have a flow-on effect and interrelationship with each other there is a logical sequence depending on which way you look at it.
- Vaccination rates did not feature in any group's priority areas.
- Mental health is difficult to support there are a lot of mental health issues that people do not necessarily know they have or know how to manage or control.
- What could the City do about mental health at a local level? How much can local governments really impact that? Should local governments really tell people what to do with their mental health?
- Can the local government increase health care services in their area? Not with ratepayers' money!
- 'Dignity of risk' and 'Duty of care' are vital in health services.
- Local governments have a duty of care to provide the right services to their community.
- Choice is vital in public health we do not want to live in a dictatorship where we are told what to do.
- Does the community have access to appropriate health services, especially mental health? Do people know the services are there?
- The City of Joondalup already has lots of services that support individuals and communities' mental health — the City currently does these things really well.
- The City of Joondalup community is more privileged than a lot of other local government areas (in a socio-economic sense).
- There are lots of services and community support systems that are accessible in and around the City of Joondalup, eg Spiers Centre.

The template and outputs from Activity 1 were used and expanded upon in Activity 2 — Approaches to public health priorities. The combined raw outputs from Activity 1 and 2 can be found in Appendix 4.

## Activity 2 — Approaches to public health priorities

The purpose of this activity was for members to consider possible approaches to deliver the priorities they identified in the previous activity. In their original table groups, members came up with ideas for how the City could deliver their priority areas. After they discussed their ideas, the groups built on their original activity templates, adding the Activity 2 content to the 'Approach' column.

Below are the groups completed activity templates, with the outputs from both Activity 1 and 2.

**Group 1** 

GI	Group 1				
	Priority area	Rationale	Approach		
1	Diet (/food environment) *	Foundation for health	<ul> <li>Community gardens — create spaces.</li> <li>Farmers markets — less red tape.</li> <li>Allow public/verge fruit and veg.</li> <li>Restrict fast food developments.</li> </ul>		
2	Mental health	Foundation for health	<ul> <li>Education program.</li> <li>Rate reduction for businesses providing services.</li> <li>Counselling options at libraries (COJ provide space — service funded by State Government)</li> </ul>		
3	Physical activity	Foundation for health	Active transport/bike plan.		
4	Access to public open space	Enables [priorities] 1–3	Walkable routes/maps.		
5	Alcohol and other drugs	Increases impact of [priorities] 1–3	Education and youth programmes.		
6	Environmental pollutants (/factors) *	Affects [priorities] 1–4	<ul><li>Reciprocal rights for Balcatta tip.</li><li>Review weed control options.</li></ul>		

Group 2

	Group 2				
	Priority area	Rationale Approach			
1	Environmental pollutants	<ul> <li>Water — Beaches/drinking</li> <li>Air pollutants</li> <li>Radiation EMF [electromagnetic fields]</li> <li>Chemicals</li> <li>Tip and sewerage</li> </ul>	<ul> <li>Water — routine testing.</li> <li>Air — monitoring / testing.</li> <li>EMF — monitoring / testing.</li> <li>Wastewater Treatment — monitoring / testing.</li> <li>Tamala Park — monitoring / testing.</li> <li>Advocate to extend the outfall pipe that runs adjacent to Ocean Reef Marina to help with water issues at Mullaloo Beach.</li> <li>Holding regulatory bodies to account.</li> <li>Promote ecofriendly practices (e.g. steam weeding).</li> </ul>		
2	Other: Access to fresh, non-GMO [not genetically-modified-organisms] food provisions	<ul> <li>Support access to food choices that are healthy and fresh produce.</li> <li>Community gardens.</li> <li>Local produce markets.</li> </ul>	<ul> <li>Encourage community gardens, organic and sustainable</li> <li>Farmers markets on a weekend to encourage healthy eating and community engagement</li> <li>Limit junk food outlets near schools</li> <li>Encourage home grown vegetables and chicken coops</li> <li>Support food security</li> <li>Local produce</li> <li>Less red tape at City approval</li> </ul>		
3	Access to public open space / Physical activity	<ul><li>Provide and maintain public parks.</li><li>Recreational centres.</li></ul>	<ul> <li>Keep up with programs and activities at leisure and community centres.</li> <li>Support "friends" groups</li> </ul>		
5	Mental health / Other: Community and social engagement  Food-borne	<ul> <li>Provide and maintain public parks.</li> <li>Recreational centres.</li> </ul>	<ul> <li>Keep up with providing community and social activities and services via City website and service at centres.</li> <li>Advocating to State for funding programs and better services at Mental Health Hospital.</li> <li>Support services such as the Spiers Centre, food banks, etc.</li> <li>Food inspectors of premises.</li> </ul>		
	disease		Food inspectors of premises.		
6					

**Group 3** 

Gi	oup 3		
	Priority area	Rationale	Approach
1	Mental health	If people are happy and satisfied with life (Anxiety disorder – 11% of population in City of Joondalup).	<ul><li>Youth focused groups.</li><li>Youth bus.</li><li>Whitford Senior Citizen Group Craigie.</li></ul>
2	Physical activity	Mental health and physical health (45% of City of Joondalup).	<ul> <li>Whitford Nodes Wellness Park.</li> <li>BMX Track.</li> <li>Bike facility.</li> <li>Walking groups.</li> <li>Community activities.</li> </ul>
3	Access to public open space	Allows people access to areas to be mentally and physically well.	<ul> <li>Provide exercise facilities at open spaces.</li> <li>Frisbee open space.</li> <li>Facilities open space — water/toilets.</li> </ul>
4	Alcohol and other drugs	Alcohol and Smoking incidence higher in Joondalup than WA average.	Make areas of the City smoke free.
5	Food-borne disease	<ul> <li>GI disease 262 [in COJ] – 214 [in WA]</li> <li>Public? or Private?</li> <li>Direct intervention from safety team or education to private homes.</li> </ul>	<ul> <li>Pest/insect maintenance.</li> <li>Rodent management.</li> </ul>
6	Environmental pollutants	For physical well-being and health.	

The activity moved to a plenary open-floor discussion where each group explained their approaches to delivering their priority focus areas. Members presented the following talking points about approaches that local governments can take to advance their public health priority focus areas:

- There are all sorts of public health priorities, but there are not enough health services for everyone.
- The City could institute health services in the libraries or community buildings eg Child Health Nurses.
- The City should push the State and Federal Governments for more health services in Joondalup, eg
  improvements to waiting periods and access to health services,
  - [Counter point from another member]: There are already great efforts being made by the City to support and increase health services in the local government area. The City tries to provide for their community and does quite well there is only so much they can do.
- Vicious cycle of everything being too expensive and difficult everywhere so health outcomes decrease.
- The City can have a big impact on public health outcomes by creating more space in existing community gardens, permitting more community gardens, and allowing verge/public fruit and veg stalls.
- Encourage residents to have their own fruit and vegetable gardens and chickens by making it easier for people to set up and reducing red tape.
- Education programs are a good way for a local government to benefit public health outcomes.
- No fast food near kids!
- The City already supports public health and wellbeing community in so many ways, such as the Whitfords Seniors and the Youth services. All City supported community groups, events etc are great for promoting a sense of belonging and benefit mental health outcomes for everyone.
- New development (Duncraig Adventure Hub) inspired by Act Belong Commit mental services.
- Craigie Leisure Centre is good, but free walking groups could be initiated and/or supported by the City.
- Friends of groups must be supported and protected.
- The City should monitor/test air and water quality, and radiation levels as precautionary approaches.
- Promote the City's great work in access to open space and providing for physical activity.
- Priorities are based on what the City needs to improve on, but the City does a great job at other things.

The combined raw outputs from Activity 1 and 2 can be found in Appendix 4.

## Appendix 1 — Additional notes from members

#### Member 1

- I appreciate that Public Health is a super broad topic and covers a lot of areas, however I do have some concern that trying to address all of these things under one Plan would be very difficult.
- Unsure what discussions went on in the meeting about prioritisation, however looking at the Department
  of Health statistics for categories where CoJ is 'worse' than average in WA would make sense to focus
  on e.g. intentional self-harm, vaccine-preventable diseases, drinking etc. These things seem like they
  could be addressed through well thought-out engagements and communications strategies along with
  other tangible supports.

#### Member 2

- Over the past few months I've been talking to friends and neighbours in my area and one of the things that keeps coming up is social connectedness very relevant to this discussion, I think. Personally, I think it's something the City does well in fostering through its support of recreation and cultural facilities and activities. What was often expressed to me by those I talked to, was the value that they placed on things like team sports, workshops and other learning opportunities especially those offered through the City's libraries. Also, the prevalence of green spaces for recreation. There is a recognition that the City's libraries are very much valued and trusted for the information they provide access to as well as the programs they offer to all age groups at very minimal cost.
- There appears to be a need for more support for those community organisations that assist the more vulnerable in our community. Organisations like the Joondalup Family Centre, Spiers Centre and Meerliniga are often talked about for the work they do in supporting individuals and families and many people I spoke to noted that they did a great deal on very little.

## Appendix 2 — City Officer presentation slides



## What is a Public Health Plan?



## Purpose of a public health plan



The City of Joondalup Public Health Plan 2026 —2031 will be a new plan to respond to local health risks and establish objectives and policy priorities for the promotion and protection of public health in the City.

- The Public Health Act 2016 (WA) requires each local government to create a local public health plan that applies to its district.
- Local public health plans must be consistent with the WA State Public Health Plan, with a
  focus on the specific public health needs of the local community.
- Through informed and responsible public health planning, the draft City of Joondalup Public Health Plan 2026 –2031 will aim for long -term resilience with a focus on measures that promote positive health outcomes for the City's community.



## What is public health?



The Public Health Act 2016 (WA) defines public health broadly as:

- The wider health and wellbeing of the community
   and
- The combination of safeguards, policies and programs designed to protect, maintain, promote and improve the health of individuals and their communities to prevent and reduce the incidence of illness and disability.







Many factors combine to affect the health of individuals and communities, including:

- where we live
- · the state of our environment
- our genetics
- · our income and education level,
- · our relationships with friends and family.

This diagram shows how a person's physical and psychological make up interacts with their societal, environmental and socioeconomic





## WA State Public Health Plan



Vision: The best possible health, wellbeing and quality of life for all Western Australians— now and into the future

Promote	Foster strong communities and healthier environments.	
Prevent	Reduce the burden of chronic disease, communicable disease, and injury.	
Protect	Protect against public and environmental health risks, effectively manage emergencies and lessen the health impacts of climate change.	
Enable	Bolster public health systems and workforce, and leverage partnerships to support health and wellbeing.	

The draft State Public Health Plan is also guided by two overarching objectives:

- Aboriginal health and wellbeing: Address racism and strengthen the cultural determinants of health for Aboriginal people in WA.
- Equity and inclusion:Ensure public health programs and services are accessible, equitable and culturally secure.



## Local public health plans



A local public health plan must address the following criteria as it relates to the local government district:

- · Identify the public health needs.
- Examine data relating to health status and health determinants.
- Establish objectives and policy priorities for the promotion and protection of public health.
- Establish the development and delivery of public health services.
- Include a report on the local government's performance of its functions under the Public Health Act 2016 (WA).







As the level of government closest to the community, the City plays a vital role in public health.

Local governments can directly influence many determinants of health through the provision of a broad range of services, including:

- · Infrastructure and property services
- Recreational facilities
- · Health services
- · Community services
- · Building services

- · Planning and development
- · Facility administration
- · Cultural services
- · Utility services (some areas)
- · Additional services (some areas)

## Public health in CoJ



















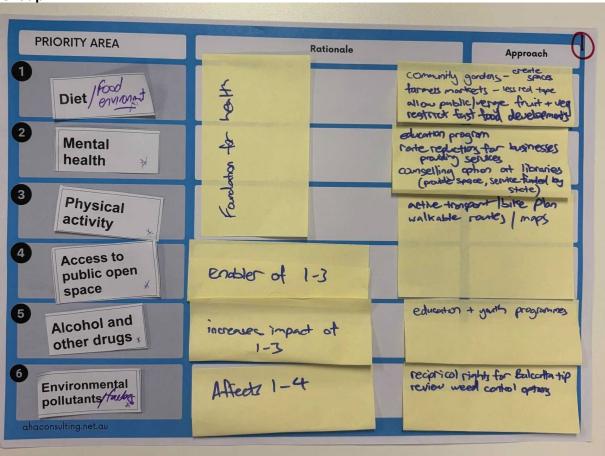


## Appendix 3 — Discussion notes

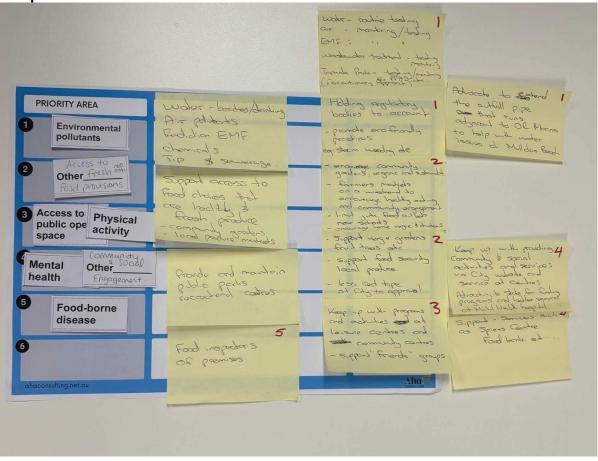


## Appendix 4 — Activity 1 and 2 raw outputs

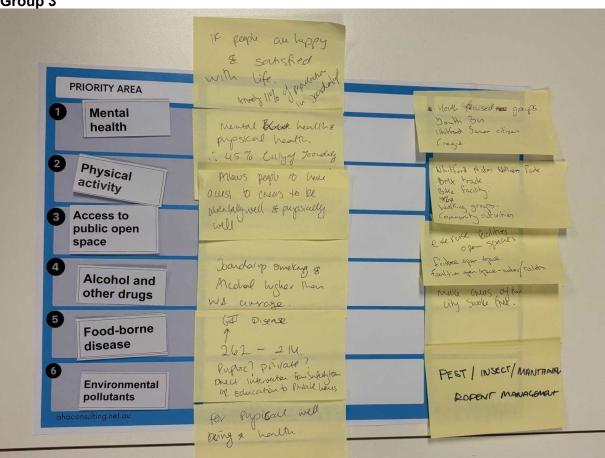
**Group 1** 



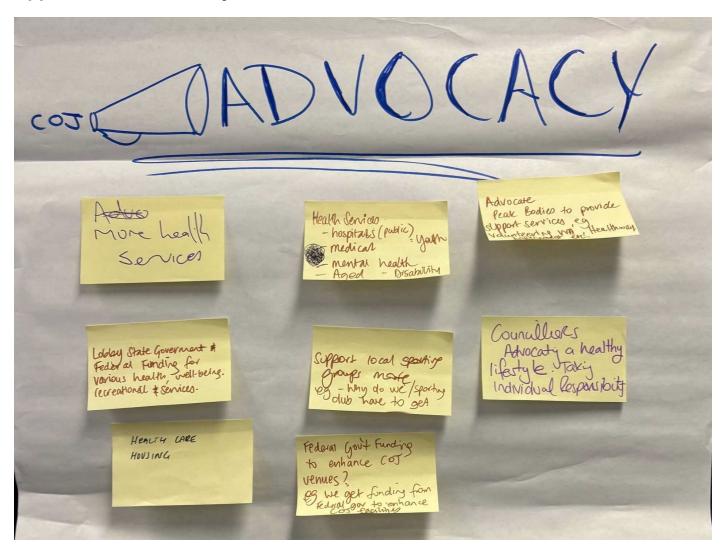
**Group 2** 



**Group 3** 



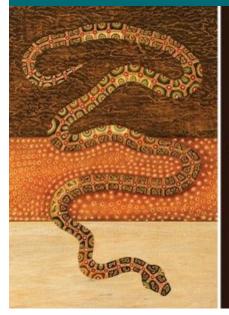
## Appendix 5 — Advocacy notes



## Appendix 6 — Presentation slides



# Strategic Community Reference Group Public health



The City of Joondalup acknowledges the Traditional Custodians of this land, the Whadjuk people of the Noongar nation. We recognise the culture of the Noongar people and the unique contribution they make to the Joondalup region and Australia. We pay our respects to Elders past and present and all Aboriginal and Torres Strait Islander peoples.

Import: Sandra Hill. Wautt Paedalaininy (Moving Camp Together), 2008 (defail)



## Purpose and objectives



- To profile the City's role and current activities in public health
- To review the State government public health priorities and the City of Joondalup community profile
- · To identify priorities for local public health plan





#### Respect



Be mindful of people's time.

Agree to disagree.

Listen to quieter voices and do not dominate the conversation.

## Active listening



Prioritise consent, not consensus.

Listen to all and endeavour to understand the views of others.

## Open mindedness



Remain open-minded to all opinions.

Be community-minded.

Do not judge others' opinions or experiences.

## Participation



Promote a safe space for all.

Share your views with others and do not keep your thoughts to yourself.



## The picture of public health in the City



## Diet and physical activity

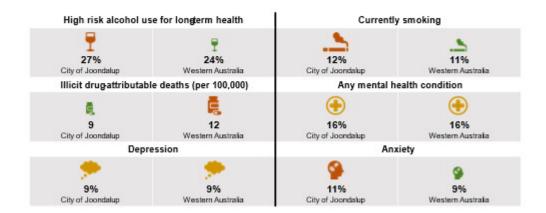






## 🛖 Alcohol, drugs and mental health 🤎

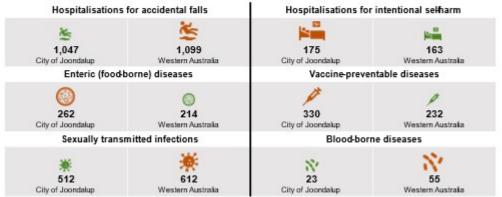






## Hospitalisations and disease











Which factor plays the biggest role in the health of people around you?



## CoJ responsibilities



The City has responsibilities under more than 40 different Western Australian Acts, including land use planning, building control, public health services, food, domestic animal control, litter control, parking, and roads and traffic.

The City's responsibilities for health and wellbeing fall under the following three areas:

#### Health protection and compliance

Regulation of tobacco, alcohol, food safety, control of insects and vectors, pollution/waste, noise

#### Public health emergency management

Disaster planning, response and recovery, pandemic planning.

#### **Health promotion**

Promoting healthy lifestyles, opportunities for social connection, arts, culture and recreation participation.

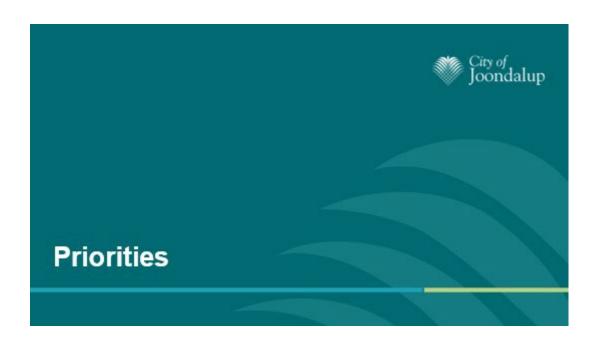
## CoJ influence



The City can have the largest influence public health and wellbeing through strong, self -reliant and resilient communities whose current and future needs are met. This can be achieved by conducting the following activities:

- Safe and nutritious food
- Safe drinking and aquatic facility water
- Safe housing
- Mosquito and vermin control
- Sustainable waste management
- Safe communities

- Walking and cycling paths and trails
- Smoke and alcohol-free environments
- Parks, reserves and public open spaces
- Events, spaces and places that celebrate community cohesion
- Health information and education activities and programs
- The way communities are designed





## **Exploring priorities**



Considering the health snapshot data and the role that a local government can play...

Which areas of public health should the City focus on?

Why?

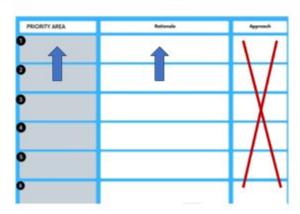
- Diet
- · Physical activity
- · Alcohol and other drugs
- Mental health
- · Environmental pollutants
- · Access to public open space
- Food-borne disease
- Vaccination rates
- Other \_\_\_\_\_

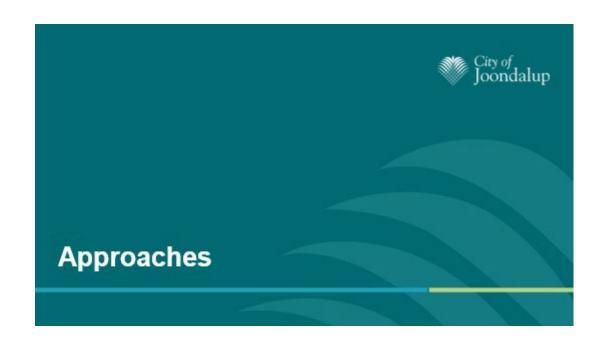


## **Exploring priorities**



- Diet
- Physical activity
- · Alcohol and other drugs
- Mental health
- · Environmental pollutants
- · Access to public open space
- Food-borne disease
- Vaccination rates
- Other \_\_\_\_\_







## **Exploring approaches**



Approaches could be in the form of:

- · Policy and planning
- · Service provision
- Information, engagement and awareness

PRIORITY AREA	Rationale	Approach
		•
-		



## Questions











Item	Date
Public health	19 March 2025
Local Planning Strategy	12 May 2025
Communications and customer experience	6 August 2025

