

Living Well Wheathelt

Towards 2035 and Beyond

Boodjar Maladjiny-ak moorditj nyininy

2035 wer moonboorli koorliny

A long-term strategy of the Wheatbelt District Leadership Group to improve outcomes for the Wheatbelt community.



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Acknowledgement of Country

The Wheatbelt District Leadership Group acknowledges the traditional Aboriginal custodians of the Wheatbelt – the Ballardong, Wilman, Njaki-Njaki, Yued and Kalaamaya Gubrun peoples and their continuing connection to the lands, water and sky. We pay our respect to all members of our Aboriginal communities, their cultures and to Elders past and present.

Acknowledgement of lived experience

The Wheatbelt District Leadership Group acknowledges those who have lived experiences of mental health, alcohol and other drug recovery, suicide, living with trauma, chronic conditions, family and domestic violence, or multiple complex issues. Their personal experiences inform us all to improve our systems and service delivery. We also acknowledge those that we have lost through these issues.

Acknowledgement of language translations

The Wheatbelt District Leadership Group acknowledges the contributions of the Noongar Boodjar Language Cultural Aboriginal Corporation, Aunty Deborah Moody, Noongar Language Specialist and Sharon Gregory, Noongar Language Consultant.

Acknowledgement of financial support

The Wheatbelt District Leadership Group acknowledges the support of the Wheatbelt Development Commission for funding the graphic design and copywriting of this document.

Additionally, the Wheatbelt District Leadership Group extends its gratitude to WA Country Health Service – Wheatbelt and the Department of Communities for their valuable resources in developing this Strategy and the underpinning Community Needs Assessment.



Acknowledgement of artist and artwork

The Wheatbelt District Leadership Group would like to acknowledge Rod Garlett for his artwork Noongar Boodja Wangkiny ('Our Land Is Talking') which has been featured throughout this publication.

Rod Garlett is a Noongar artist currently living between Broome (Rubibi) on Yawuru Country and Whadjuk Noongar Country in Perth. His hometown is Northam, in the Wheatbelt area of Western Australia, where he was born and raised. His grandfather, Joobaitch, called Northam 'Nardjook,' meaning 'a place of bubbling springs.' Rod was taught by his Elders that two rivers flow through the area: the river the whitefellas see and an underground river where the Snake travels. Rod is known as the 'River Sand Artist,' as he uses the silt from the Katrine Pool as the base for his artworks, with permission and blessings from his Elders and ancestors through ceremonies by the river.

Scan the QR code to hear the story behind the artwork. Discover the inspiration and meaning that brought this piece to life, directly from the artist's perspective.



Foreword

From the Wheatbelt District Leadership Group



The Wheatbelt District Leadership Group's 'Living Well in the Wheatbelt' strategy is a collaborative initiative to deliver sustainable, culturally informed solutions that improve outcomes across all life stages in our region.

As the formal collective of regional human services leaders in the Wheatbelt, the Wheatbelt District Leadership Group (DLG) delivers culturally informed innovative, sustainable and place-based solutions to priority regional issues and challenges¹.

Our work is guided by key community and health strategies, as well as the four Closing the Gap priority reform areas, ensuring alignment with both local and national goals for improved outcomes.

Living Well in the Wheatbelt is the first unified, longterm strategy by human services organisations across the region, aimed at significantly improving outcomes. This landmark initiative reflects a commitment to shared responsibility and collective action for the wellbeing of all residents. The Wheatbelt is a region of great potential, shaped by its Aboriginal and multicultural heritage, natural assets and strong economy. Despite strengths such as a Gross Regional Product of \$8.9 billion in 2023, low unemployment, and 3.5% population growth since 2018, the region faces significant challenges. These include irregular school attendance, rising rates of chronic health conditions, mental health issues, homelessness and social isolation, all of which contribute to community disadvantage and vulnerability.

By coordinating resources and efforts, we have identified shared priorities for preventative, positive action. We are committed to measuring progress, with a focus on the four National Closing the Gap priority reforms.

The Wheatbelt of 2035 and beyond will differ from the region we experience in 2024. The actions we take today will shape the future wellbeing, health, social and economic development of the region.

By working together with local communities, Elders, human services agencies and economic partners, we can address complex social challenges and foster a more equitable and prosperous Wheatbelt, where everyone can **Start Well**, **Grow Well**, **Live and Work Well**, and **Age Well**.

Our shared principles form the foundation of our goals, vision, and mission, shaping our actions.

Our Vision

Individuals and families in the Wheatbelt region are empowered to thrive and participate in their communities, education, work and life.

Our Mission

To achieve better outcomes for all Wheatbelt communities by collaboratively leading and delivering culturally informed, innovative, sustainable and place-based solutions to priority regional issues and challenges.

Our Principles

- Equity
- Inclusion
- Access
- Cultural Safety and Governance
- Collective Impact



Start Well

Families are strong, and children are healthy, safe and ready for school.

Grow Well

Children and young people thrive in education and training.

Live and Work Well

Adults have good health, wellbeing and can access work and local services.

Age Well

Senior citizens and Elders live and age in-place in supportive, connected communities.









Figure 1: Focus areas of Living Well in the Wheatbelt

Introduction



Purpose of this strategy

The Living Well in the Wheatbelt - Towards 2035 and Beyond strategy is designed as a high-level framework uniting a broad range of stakeholders, including state agencies, local governments and service providers, to ensure diverse community needs and aspirations are reflected. Its general scope and flexible, non-prescriptive approach foster wide-ranging collaboration and broad buy-in essential for success.

Acting as a guiding roadmap for State Government, local governments and service providers, it encourages stakeholders to align specific projects and initiatives with its core principles, without applying a one-size-fits-all approach. Local initiatives should reference the strategy's pillars - **Starting Well**, **Growing Well**, **Living and Working Well**, and **Ageing Well** - to contribute to the overarching vision of a healthier, more vibrant Wheatbelt.

By outlining strategic objectives and long-term actions to improve health and wellbeing across life stages, the strategy allows communities to address unique local challenges while working toward shared goals. It is a flexible guide, empowering communities to shape responses to local needs within a collective vision for the Wheatbelt.

Methodology

A Community Needs Assessment (CNA) was conducted in 2023-24, using Wheatbelt data, statistics and community feedback.

The CNA informed the focus areas and priority actions to address identified service gaps and wellbeing challenges. The CNA is available upon request at: wbhealthpromotion@health.wa.gov.au

Aspirations, objectives, strategies and priority actions across the life course

DLG endorses the Strategy and priority actions

Develop first two year action plan 2025 - 2027

Review and prepare new action plans every 2 years

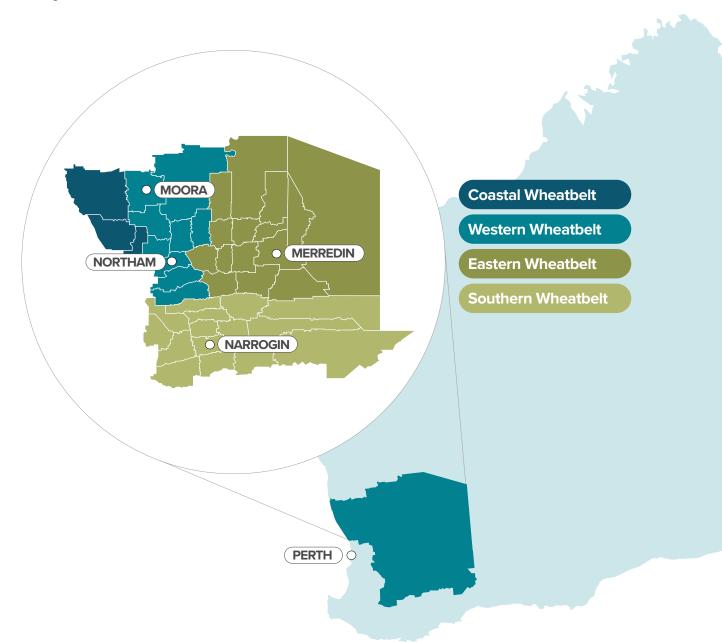
Review and update the Strategy in 10 years

Our Wheatbelt

The Wheatbelt is a region in Western Australia, covering approximately 158,615km². It partially surrounds the Perth metropolitan area, borders four other regions and includes up to 43 local governments, as shown below (with differences in boundaries between agencies). The four sub-regional centres are Northam, Narrogin, Merredin and Moora, with Northam being the largest.

There is a common perception that the Wheatbelt is close to Perth, often described as "just up the hill." While it borders Perth, only 4% of the Wheatbelt is considered inner regional. In reality, according to the Accessibility/Remoteness Index of Australia, 57% is classified as remote, 8% as very remote, and 31% as outer regional.

Travel times from the Wheatbelt to Perth range between one and four hours by road, presenting significant challenges for individuals with health, ageing or disability issues, as well as those facing financial hardship or lacking access to transport.



Our People

The Wheatbelt health region's estimated population has increased by 3.5% in the last 5 years, from 76,156 in 2018 to 78,852 in 2023¹.

The Shires of the Coastal Wheatbelt and the Avon Valley have seen population growth, with many young families, tree and sea changers, and retirees moving in. The Western, Eastern and Southern Wheatbelt have also experienced growth in their regional centers, with consolidation in many smaller towns.

Children and young people (0-14 years) make up about 17% of the Wheatbelt's population (13,668 children)^{1,2}, while senior citizens aged 65+ years make up around 23% (18,476 people)¹. Additionally, around 6% (4,822 people) of the Wheatbelt population identified as Aboriginal in the 2022 census.

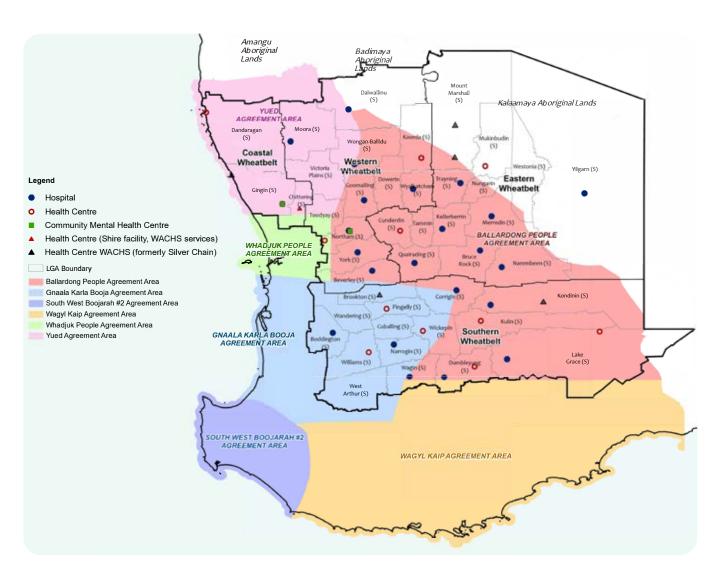


Figure 2: Wheatbelt region with South West Settlement Agreements and Local Government boundaries

¹ WA Country Health Service, 2024

² Department of Health WA, 2024

What do stakeholders say they love about the Wheatbelt?

- Local hospitals and services are highly regarded and are one of the main reasons to stay in town.
- Family, friends and social groups keep us connected.
- We are lucky to have many agencies working in the Wheatbelt.
- Houses and rents are cheaper than in Perth and up North.
- There is a great community spirit in the region, people help each other here.
- Telehealth services like emergency telehealth are brilliant.

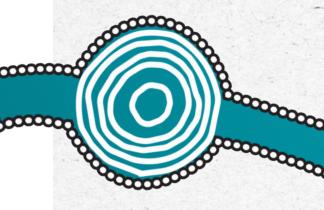
lephi What do stakeholders say are the biggest challenges?

- Poor access to the internet is a real problem - even in Northam! 4G drops out regularly when you're travelling around the region.
- Lack of public transport and other transport options is a real barrier for people who can't drive and for disadvantaged groups.
- · Need more services for people living with mental illness, harmful alcohol and drug use, suicide and self-harm to address demand and long wait lists.
- · Some services are not inclusive of disabilities.
- More understanding of available services for culturally and linguistically diverse community including those on temporary work or protection visas.
- · Lack of housing for people experiencing family and domestic violence.

- Need support for access to NDIS, carer support/respite and disability therapy support.
- · Having to travel to Perth for specialist appointments and hospital care – Perth isn't just down the hill for many Wheatbelt people!
- · Limited access to seniors housing and aged care providers mean people often have to leave the region to go to Perth when they've lived here all their lives.
- More support and services for those who identify as LGBTQIA+SB, especially young people.



Wheatbelt Human Services Sector





- · Amity Health
- Avon Community Services
- Central Regional TAFE
- Department of Health and Ageing (Federal)
- Headspace
- Holyoake
- KEEDAC Aboriginal Corporation
- Moorditj Koort
 Aboriginal Corporation
- Moorditj Youth
 Foundation Aboriginal
 Corporation
- Share and Care Community Services Group
- · Skill Hire

- · Standby (Anglicare)
- State Government Departments
- Stephen Michael Foundation
- WA Council of Social Services
- WA Primary Health Alliance Wheatbelt
- Wanslea

Wheatbelt District Leadership Group

- Ballardong, Yued and Gnaala Kaala Booja Aboriginal Corporations
- Chair of the Wheatbelt Human Services Managers Forum
- Department of Communities
- Department of Education
- · Department of Justice

- Department of Local Government, Sport and Cultural Industries
- Local Government Zone representatives
- WA Country Health Service
- WA Police
- Wheatbelt Development Commission

Government agencies, community organisations and private entities collaborate to strengthen the region's socioeconomic fabric. Their efforts focus on promoting wellbeing, fostering economic development, supporting healthy communities, enhancing environmental health, and sustaining livelihoods across the Wheatbelt.

A range of local services support social connectedness and promote the wellbeing and health of individuals, families, and communities, forming an integral part of the human services continuum. A diagram of the continuum is available in Appendix 2.



- APM Communities
- · Conservation Organisations
- Clontarf
- Communicare
- Country Women's Association
- Department of Fire andEmergency Services
- Directions
- Essential Personnel
- Foodbank WA
- Fresh Start
- General Practices and Medical Centres
- · Lions Club Inc
- · Men's Sheds
- Natural Resource Management
- Parenting Connection WA
- · Police and Community Youth

Centres

- · Private allied health services
- Regional Development Australia
- Regional Early Education & Development Inc
- Regional Men's Health Initiative
- Rotary Club
- Salvation Army
- · Silver Chain
- · St John Ambulance Australia
- Waalitj Foundation
- Wheatbelt Agcare Family Counselling
- Wheatbelt Health Network
- Women's refuges
- Yorgum Healing Services

3 Local Government Zones covering 42 Shires

- · Avon-Midland
- Great Eastern
- Central Country



Factors contributing to our Health and Wellbeing

What are socio-economic health determinants and why do they matter?

Health determinants are socio-economic and cultural factors that influence a person's wellbeing over time. While some are beyond our control, such as family or home environment, others, like participation in sport, education, or healthy activities, are within our control.

At times, individuals may need extra help and guidance to make positive choices and access necessary care and services. These factors highlight the importance of targeted support to empower individuals to make healthier life choices.

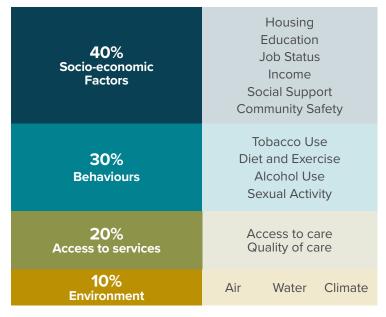
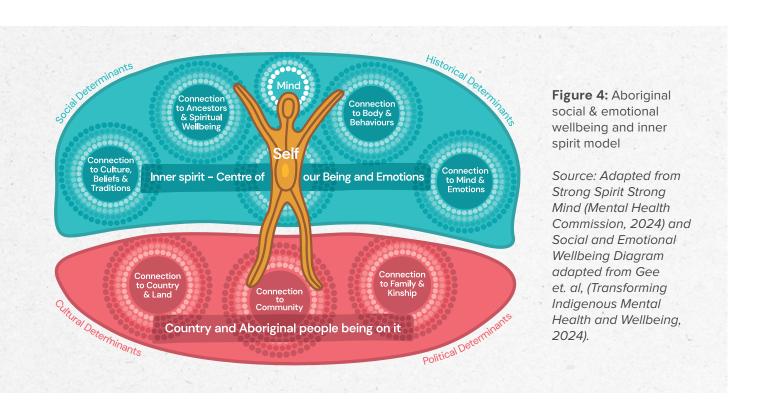
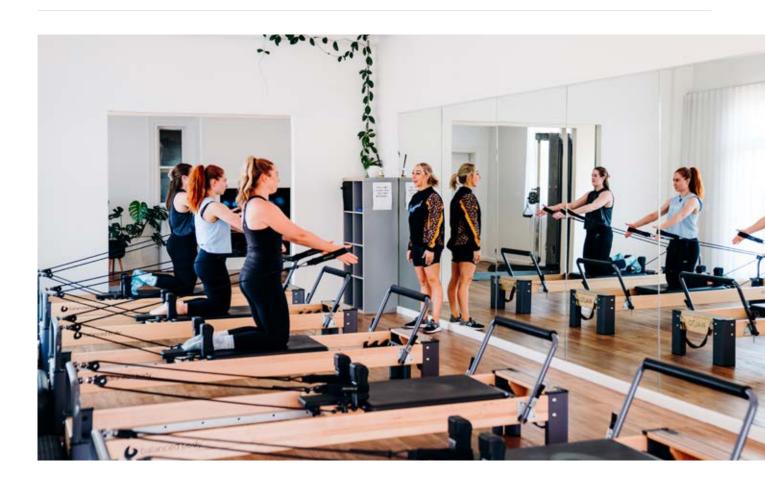


Figure 3: Health and Wellbeing Determinants *Source: Population Health Institute, 2023*





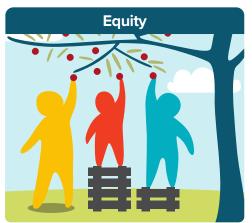
By recognising socio-economic differences in starting points and throughout life, we can focus our efforts and resources on supporting the more disadvantaged, aiming for more equal outcomes for all.

Inequities can include cultural and language barriers, poverty, limited access to education and training, and challenges in accessing welfare and health services. Other factors include difficulties acquiring identification or a driver's license, inadequate digital access, overcrowded housing, and additional pressures from ill health or disabilities. Some families may also lack a safe and loving environment, compounding these challenges.

The Wheatbelt faces inequities, with lower levels of income, education, health, and wellbeing in the region compared to metropolitan areas, the State average and most other regional areas¹.

This Strategy and action plans aim to address socioeconomic factors and inequities in the Wheatbelt, enabling greater participation in life and work.





Starting Well Kwoba Moolyakiny

Aspiration: Families are strong, and children are healthy, safe and ready for school.

Key data and information

5%



9%



82 years

of the Wheatbelt population is aged 0-4 years, totaling 4,138 children in 2023¹.

of Wheatbelt Aboriginal people are aged 0-4 years totaling 431 children in 2022¹. Life expectancy for those born between 2018 and 2020, compared to 84.3 years for the State².

54%



92%



were developmentally on track in the first year of formal school in 2021 in Wheatbelt North and 55.5% in Wheatbelt South³. of one-year-olds were fully immunised in 2023, along with 92.7% of two-year-olds and 93.6% of five-year olds⁴ (Target 95%).

- 1. WA Country Health Service, 2024. Estimated Resident Population
- 2. Australian Bureau of Statistics, 2022
- 3. Australian Early Development Census, 2024
- 4. Department of Health WA, 2024



What services are provided in the Wheatbelt

Healthcare and Support Services

- · Child and school health services
- · Child development services
- 25 Hospitals for emergency care
- Maternity services
 - Antenatal and postnatal care services are provided at all hospitals, with some mothers able to give birth in Narrogin and Northam

Family and Parenting Support

- Child protection and family support services
- Foster carer support
- Grandcare and family care support services
- · Intensive family support services
- · Parenting Connection WA
- Parenting groups

Childcare and Early Education

- Childcare centres
 - Home daycare, early learning centers, early education and care programs, and after-school care services (with 43 locations across 31 shires)
- · Early childhood services
- · Inclusion support service
- KinderGym
- Playgroups

Community and Early Years Networks

- Aquatic centres
- · Early Years Networks
- Strong Women Strong Families program
 - Aboriginal mothers and families

What Wheatbelt people told us they need

More birthing in the region, safely and on country. More services supporting new parents and families including mental health and disability services.

More childcare services/places and playgroups.



How we will address the service gaps and challenges

STRATEGIC LONG TERM ACTIONS SUCCESS OBJECTIVE (Next 5-10+ years) **INDICATORS** Increase social. More childcare places, playgroups Advocate for increased access financial and cultural to early childhood education and and early childhood education protective factors child care services and reduce socio-• Strengthen Early Years Networks Increased percentage of children economic risk factors developmentally on track in all 5 Secure funding for Parenting to positively impact **AEDC** domains Support WA programs the wellbeing of · Progress towards Closing the · Establish intergenerational babies and young Gap (CTG) targets for Aboriginal activities for families with young children. children (early childhood education, children developmentally on track, out-of- Increase food security initiatives home-care) for children and families • Decreased rates of vaping, smoking **Promote behaviours** · Deliver consistent health which positively promotion messages on healthy and drinking alcohol in pregnancy impact the physical lifestyles, dental health, and the · Increased fruit and vegetable intake and mental health, effects of alcohol and drug use • Child immunisation coverage at least language skills and Support parents to immunise their 95% for 0-5 years development of young children on time Increased percentage of children children. • Promote storytelling, yarning, developmentally on track in all five reading with kids, and improve **AEDC** domains access to books and toys Increase access to culturally safe Reduced pre-term births (<37 weeks) Increase access to child development maternity and newborn services. • Meet the CTG targets for Aboriginal services, early years • Secure funding for mental health babies (healthy birth weight) programs, and young services for new parents • Increased proportion of Wheatbelt children's services. · Secure funding for services to atbabies born locally risk families before crisis or child · Increased funding secured for protection referral additional services • Secure funding for paediatrician and child development services Advocate for increased public dental services for young children • Establish 'one-stop-shop' family and children's hubs for comprehensive service access Improve our built and • Improve parks and playgrounds · Increase in healthy-active-by design natural environments where young families can meet, measures to be healthy-and play and keep active active-by-design.



Growing Well Kwoba Maladjiny

Aspiration: Children and young people thrive in education and training.

Key data and information

17%



34.5% 👸 83%





of the Wheatbelt population is aged 5-14 years, totaling 9,530 children in 20231.

of the Wheatbelt Aboriginal population is aged 5-14 years old, totaling 1,665 children in 2023¹.

School attendance in 2023, with Aboriginal school attendance at 66.7%².

396



72%



76%



Child at Risk Alerts were issued by WACHS in 2022-23, an increase from 111 in 2021-221.

of students achieved the Western Australian Certificate of Education, compared to 82.5% across Western Australia².

of students achieved a Vocational Education and Training Certificate, compared to 56.4% across Western Australia².



young offenders in 2021-22, of which 103 were Aboriginal youth3.

1. WA Country Health Service 2024

2. Department of Education WA, 2024

3. WA Police Wheatbelt District, 2023



What services are provided in the Wheatbelt

Healthcare and Support Services

- 25 Hospitals
- · Children's health and mental health services
- Headspace
- Youth counselling, drop-in centres and support services
- NDIS community connector program

Education and Training

- 69 Public, primary and high schools
- Central regional TAFE
- LUMEN Wheatbelt Regional University Study Hubs
- Employment services, career counselling and work experience programs

Community and Youth Programs

- Avon Community Services
- · Clontarf Academy and Deadly Sista Girlz program
- Deadly Minds Matter and Shooting Stars program
- · Diversion and therapeutic programs
- Merredin kid's hub and Narrogin parenting support program
- Noongar Boodja Rangers program
- · Police and community youth centre
- Stephen Michaels Foundation

Sports and Recreation

· Sport and recreation clubs, aquatic centres

What Wheatbelt people told us they need

Concern for suicide risks for young people – particularly young Aboriginal people, and non-suicidal self-injury / self-harming.

Cyberbullying and bullying is an increasing issue.

Vaping in teens is a large and growing concern.

Need more mental health services for young people aged 8-12 and 12-18 years, including online or video conference.







How we will address the service gaps and challenges

STRATEGIC LONG TERM ACTIONS **SUCCESS INDICATORS OBJECTIVE** (Next 5-10+ years) Increase socio- Develop sustainable training Improvement in school attendance economic protective opportunities for young people rates and achievement of a WACE or factors and reduce VET certificate or ATAR • Seek funding for more services risk factors relating and supports for young people Reduced number of children at risk to school or training experiencing family and domestic alerts and child safety investigations avoidance. violence perpetrated by adults/ with management plans in place parents Progress towards meeting the CTG · Address homelessness and targets for Aboriginal youth and overcrowding in housing young adults Develop interagency support and education for students with mental health issues and harmful alcohol or drug use **Promote behaviours** Consistently promote the • Increase to 80% immunisation importance of adolescent which positively coverage for years 7 and 10 impact the physical immunisations. Increased engagement with the and mental health, Develop physical wellbeing youth justice program language skills and programs for children and youth in Decreased number and rates development of school school and community settings of suicide and of self-harm aged children and · Seek additional funding for hospitalisations in 15 to 24 year olds young people. information and services for people at risk of suicide and non suicidal self-injury • Provide inter-agency education in schools on vaping, drug use and mental health Increase access to · Provide culturally safe health and · Increase in established youth wellbeing services for youth with a counselling, health and mental health services for children and young people. disability, chronic illness, who are services neurodivergent and/or who are LGBTQIA+SB Advocate for increased mental health, alcohol and drug support services for children and young people 8-12 years. • Develop alternative, culturally safe education for Aboriginal young people Improve our built and · Improve and increase parks and Increase in healthy-active-by design natural environments recreational areas where school measures to be healthy-and children and young people can active-by-design. meet, play and keep active

Success Stories

Wheatbelt and Beyond Youth Mentoring

This program connects disadvantaged young people attending district high schools in the Wheatbelt region with university students or professionals based in Perth.

Students have the opportunity to meet their mentors face-to-face and participate in an annual camp with peers from other participating schools. Currently, the program boasts 120 mentors supporting approximately 150 students.

Within Your Wallet

In response to rising alcohol and cannabis use, mental health distress, and disengagement, Holyoake and the Pingelly Brookton Local Drug Action Team collaborated to create a solution that enhances protective factors for young people.

A co-designed wallet card provides free access to positive diversionary activities, such as swimming pools and art classes, while also including information about mental health and alcohol and other drug services.

Waalitj Foundation's Deadly Sista Girlz

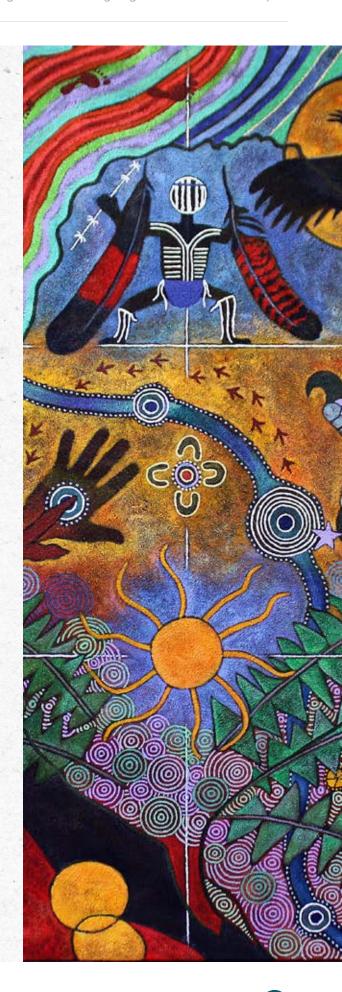
The Deadly Sista Girlz program at Northam Senior High School has significantly improved school attendance and educational attainment among First Nations girls by utilizing local mentors.

Since its inception, the program has reached over 6,000 girls across Australia and is delivered nationally at 18 schools, with 45 girls currently enrolled at Northam Senior High School.

Northam Clontarf Academy

Through this program local Clontarf staff mentor and counsel male Aboriginal students on a range of behavioural and lifestyle issues, with activities focusing on education, leadership, employment, wellbeing, life skills and sport.

The program has been very successful, with approximately 78% of Northam Senior High School alumni employed and participants living more disciplined, purposeful and healthy lives.



Living and Working Well Kwoba Nyininy wer Yakany

Aspiration: Adults have good health, wellbeing and can access work and local services.

Snapshot of the region

59%





**** 26%**



of the Wheatbelt population was aged 15-64 years (46,708 people in 2023)1.

of Wheatbelt Aboriginal people are aged 15-64 years (2,850 people)1.

The Wheatbelt has the highest participation in volunteering in the State, compared to 16% for WA in 2021².



of Wheatbelt adults work, compared to 66% for Perth in June 20212.



of Wheatbelt patients accessed inpatient hospital care within the region in 2022-233 compared to Great Southern (83%) and Kimberley (88%).

- 1. WA Country Health Service 2024. Estimated Resident Population
- 2. Australian Bureau of Statistics, 2022
- 3. Department of Health WA, 2024



Services currently provided in the Wheatbelt

Health and Medical Services

- · 25 Hospitals, 14 health centres, 79 GPs
- NDIS services, public and private outpatient health services, public dental clinic and 21 private dentists
- Primary and specialist mental health, alcohol, and drug services
- · Regional palliative care, cancer and kidney services

Support and Care Programs

- Care Coordination Health Navigator programs
- Counselling services including Medicare Mental Health Centre
- Maternity services (including two midwifery group practices), antenatal and postnatal care, obstetric services

- Foster carer support, family and domestic violence support
- Diversion and therapeutic programs as alternatives to prosecution or incarceration
- Access to new ranger programs for Aboriginal adults

Community and Recreational Resources

- Community Resource Centres, TAFE and Lumen University Hubs
- Noongar Elders Group and Advisory Councils
- Aquatic Centres, Regional Men's Health Initiatives and Men's Sheds, sport and recreation clubs

What Wheatbelt people told us they need

More access to hospital inpatient and outpatient care in the region including by telehealth to avoid the need to travel to Perth or elsewhere. Need more ways to keep safe, healthy and connected in our communities. Increased cultural safety of human services for all Aboriginal people

There's not enough GPs and other services that help people in their homes and communities.



How we will address the service gaps and challenges

STRATEGIC LONG TERM ACTIONS SUCCESS **OBJECTIVE INDICATORS** (Next 5-10+ years) Promote and establish • Increase in employment rate, Leverage economic opportunities a 'wellbeing economy' to create more work and training participation rate and decrease in the region for the opportunities in unemployment rate, long term mutual benefit of unemployed, underutilised Advocate for affordable social and community health and key worker housing • Decrease in low income population community wealth. and homelessness Support sustainable Noongar economic, social and cultural Increased life expectancy at birth development • Ensure disability support needs are met for under 64s Promote volunteering and civic engagement Reduce adults with high or very high Increase food security initiatives psychological distress including foodbanks Increase in number and percent • Secure funding for men's behaviour participation in volunteering change programs Meet the CTG targets for Aboriginal Support community reintegration for at-risk adults to reduce justice Reduce towns with high food stress system entry **Promote positive** Promote positive behaviours that Increase in cancer screening behaviours which improve the mental and physical Reduced farm /occupational injuries improve social, health and wellbeing of adults (number and rate) emotional, mental and Continue promoting Workforce • Reduced road trauma (number and physical health and Safety and Health on farms, work rate) wellbeing. places and safe country driving Reduced number of suicide and self-harm hospitalisations, and for Aboriginal adults Increase access to Promote the Wheatbelt to human Increase in primary care services for services for adults. service providers the region Advocate for hospital service Increased rates of hospital inpatient expansions at Northam and Narrogin and outpatient care closer to home (self sufficiency) Advocate for increased adult public Reduction in did not attend and did dental services not wait rates at Wheatbelt hospitals Develop community/public transport models and advocate for a regional · Reduction in numbers and rates of Wheatbelt dental issues requiring transport strategy surgery Promote available services to the CALD community and provide Increase in community transport culturally safe services options Secure funding for additional Investment in strengthened community mental health services community mental health, alcohol, and develop alcohol and other drug and other drug services detoxification services Progress towards achieving CTG

targets for adults and community

STRATEGIC OBJECTIVE

Improve our built and natural environments to be healthy-and active-by-design for adults.

LONG TERM ACTIONS (Next 5-10+ years)

- Create and maintain healthier and more socially connected places to live and work
- Increase connection to country as part of Aboriginal health, social, family and community programs
- Ensure human services engage with District and Local Emergency Management Committees for preparedness for heatwaves, severe weather events, bushfires and other emergency incidents

SUCCESS INDICATORS

- Increase in healthy active by design measures (walkability and healthy active ageing checklists)
- Progress towards meeting the CTG targets related to environment and culture
- Decrease in heat vulnerability composite measure

Success Stories

Telehealth

Wheatbelt residents were able to avoid the cost, time and inconvenience associated with travelling to Perth for health appointments by participating in 6,854 telehealth consults in 2022/23 saving an estimated 1.6 million kilometres in travel.



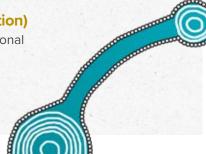


Healthy Eating and Active Lifestyle Program

This hugely successful program delivered 20 healthy eating and exercise programs across the Wheatbelt in 2020 and resulted in statistically significant health improvements for participants across all behavioural and physical variables. Participants on average increased walking by 40 minutes a week and lost one centimetre from their waist circumference.

Noongar Rangers Program (by the Ballardong Aboriginal Corporation)

Funding has recently been secured for approximately 11 rangers, with an additional application submitted to train 30 more. These rangers will focus on caring for Ballardong country, encompassing areas around Northam, York, and beyond.



Ageing Well Kwoba Koorakoriny

Aspiration: Senior citizens and Elders live and age inplace in supportive, connected communities.

Snapshot of the region

23%



8%



46%



of the Wheatbelt population is aged 65+years (46,708 people in 2023)¹.

of Wheatbelt Aboriginal people are aged 65+ years (384 people)¹.

of the Wheatbelt population is aged 50+ years (36,363 people in 2023) compared to 25% Aboriginal people (1,217 people in 2022)¹.

60%



29%



of all inpatient admissions to Wheatbelt hospitals were by people aged 65+ years².

of all presentations to Wheatbelt emergency departments were by Wheatbelt residents aged 65+ years².

- 1. WA Country Health Service 2024. Estimated Resident Population
- 2. Department of Health WA, 2024



Services currently provided in the Wheatbelt

Aged Care and Palliative Services

- · Home and community aged care
- · Public and private residential aged care
- · Regional palliative care services

Care Coordination and Health Programs

- Care Coordination Health Navigator programs
- Care finder programs
- Carer respite services
- Chronic conditions programs
- Older Patient Initiative

Community and Social Support Groups

- Aquatic centres
- Community Resource Centres
- Country Women's Association
- Men's Sheds
- · Noongar Boodja Elders Group

- · Rotary and Lions Clubs
- Social groups and activities
- · Sport and recreation clubs

Hospitals and Health Services

- 25 Hospitals, 14 health centres
- Public dental clinic and 21 private dentists
- 79 GPs and 35 GP practices
- · Public and private allied health services
- Public and private outpatient health services

Mental Health and Substance Abuse Services

- Counselling, primary health care, and vocational support services
- Primary and specialist mental health, alcohol, and drug services

What Wheatbelt people told us they need

More services for older people, people living in outlying towns, and support for volunteers. Access to community transport to get to appointments.

Support for people who are lonely and isolated.

We want to age in place more aged-appropriate accommodation is needed.



How we will address the service gaps and challenges

STRATEGIC OBJECTIVE

LONG TERM ACTIONS (Next 5-10+ years)

SUCCESS INDICATORS

Increase socioeconomic protective factors for seniors relating to cost of living, community transport, loneliness and community safety.

- Enable Aboriginal Elders to age in place on country by facilitating access to the community aged care system
- Develop community transport options for seniors
- Promote and deliver social connection and intergenerational activities in communities
- Deliver financial and digital literacy education for seniors
- Percent of seniors receiving community aged care services in home (needs met)
- Participation rates of seniors in volunteering
- Increased community transport services across the region
- Increase in age friendly accommodation options

Promote positive behaviours that improve the mental and physical health and wellbeing of seniors.

- Promote and deliver seniors' health and movement programs
- Instigate celebratory activities in communities in Seniors and NAIDOC weeks
- Percent prevalence of long term health conditions

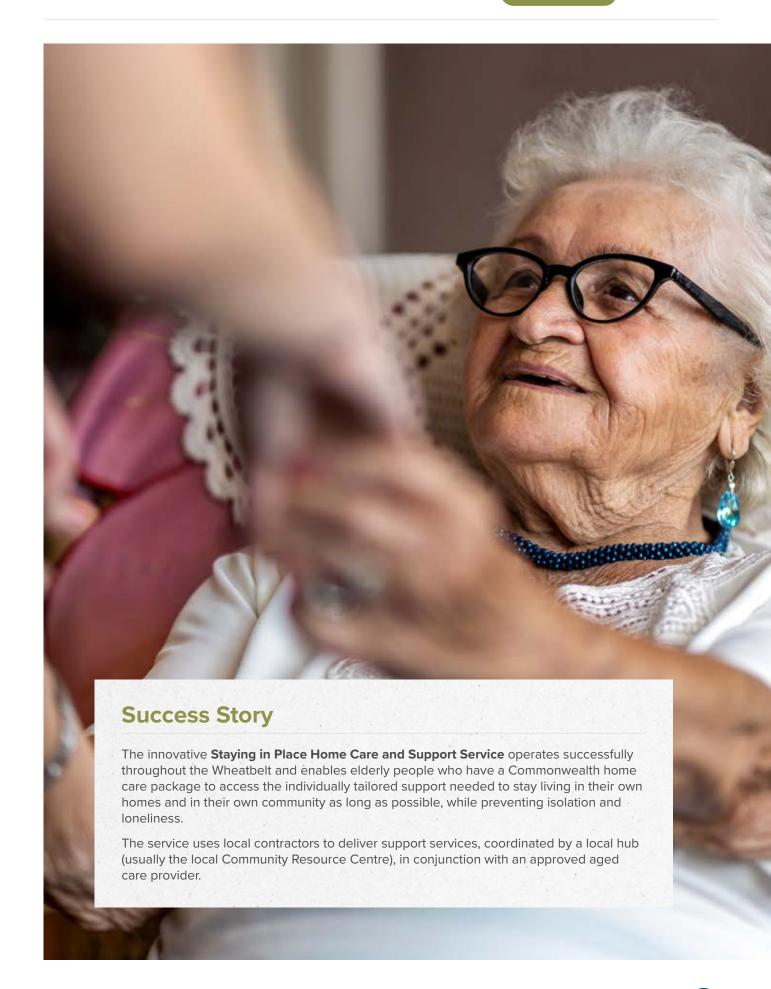
Increase access to early intervention and treatment, and engagement with health services, aged care and healthy ageing services.

- Develop local health and wellness service directories for communities
- Explore alternative models of access to GPs (e.g. virtual)
- Secure funding for expanded geriatrician, psycho-geriatrician and seniors' mental health services
- Provide compassionate end of life care for people living with lifelimiting illness
- Promote and advocate for innovative ageing in place models and greater access to aged care providers

- Increase in GP and primary care services for the region
- Reduced Aged Care Assessment Team waitlist
- Increase in carer respite options
- Number of palliative care patients supported
- Increase in local service providers to deliver local community aged care services

Improve our built and natural environments to be healthy-and active-by-design for seniors.

- Promote and further develop age friendly communities
- Develop more independent living and supported aged accommodation
- Promote use of age-friendly measures within Shires (Age Friendly Environment Assessment Tool, Age-Friendly Survey, or Age-Friendly Cities and Communities Questionnaire)
- Increase in healthy active by design measures (walkability checklist and healthy active ageing checklist)
- Increase in purpose built independent and supported living units for seniors





The Wheatbelt DLG has overarching responsibility for leading, actioning and monitoring this Strategy.

Two yearly implementation action planning

The DLG will develop two-year action plans for this Strategy, outlining timeframes, lead agencies, partner agencies, and the roles of lead agencies and/or the Wheatbelt Human Services Managers Forum (WHSMF) Priority Area Working Groups.

The WHSMF has established five Priority Area Working Groups to tackle existing DLG socio-economic priorities, which will be reviewed as new Strategy priorities emerge.

Local Government Public Health Plans

Local governments must develop Public Health (Health and Wellbeing) Plans by June 2026. This Strategy can guide the development of these plans particularly for actions related to social connectedness, promoting healthy behaviours, enhancing the local environment (healthy-active-by-design, aged-friendly), and seniors housing.



Wheatbelt Collaborative **Networks**

There are several interagency collaborative networks in the Wheatbelt to enhance interagency networking and tackle priority issues. These groups will continue to meet, and their work priorities can be informed by this Strategy.

These groups include:

Wheatbelt Regional Coordinating Committee (training and education)

Wheatbelt **Public Health** and Local Government Collaborative Wheatbelt Child at Risk

Wheatbelt Early Years network

Community

Safety

Committees

Local and

Wheatbelt Alcohol & Other Drug Prevention Advisory Committee

> Wheatbelt Advisory Forum

WAPHA Wheatbelt **Regional Primary Care Collaborative**

Wheatbelt Regional **Aboriginal Health Forum**

groups

Local

Planning orking groups

Collaborative Networks

Wheatbelt

Wheatbelt Health **Professionals** Network

Wheatbelt Suicide

Postvention

Committee

Aged Care

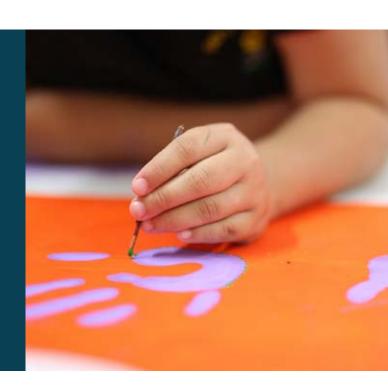
District **Emergency** Management Committee

How will we track our progress?

We will track our progress, achievements and success indicators through a monitoring dashboard and yearly report card.

The key success indicators will be derived from:

- National Closing the Gap four reform areas and 19 targets as related to the Wheatbelt
- Evidence of collective impact, partnerships, and collaborative approaches
- Securing additional investment in the region
- Measuring What Matters Australia's First Wellbeing Framework (only if measures are collectable)
- Key agency performance indicators



Appendices



Appendix 1: Priority Actions 2025-27

Starting Well (Kwoba Moolyakiny) **STRATEGIC PRIORITY ACTIONS OBJECTIVE** 2025-2027 Increase social. Advocate for more childcare places - Commonwealth government financial and cultural • Implement key findings from the WA Early Years Partnership Project and First protective factors and Thousand Days Project reduce socio-economic • Explore funding to establish a regular playgroup in Northam and Narrogin risk factors to positively • Maintain and expand Wheatbelt Early Years Networks and activities impact the wellbeing • Develop a business case for establishing a Parenting Support Program in the of babies and young Wheatbelt children. • Local Government Plans continue to incorporate family-friendly community • Engage with Foodbank WA to establish Foodbanks in Northam, Merredin, Narrogin and Moora **Promote behaviours** • Provide localised, consistent messages to parents/carers and children on: which positively impact - Quitting alcohol, tobacco, vaping, cannabis and illicit substance during the physical and mental pregnancy health, language skills - No smoking around children and development of - Eating well and staying active young children. - Dental health promotion • Increase public and child health resources to increase child immunisation coverage · Local governments to continue to work with early years focused groups to establish more storytelling sessions in communities Increase access to child • Develop more collaborative models through the Wheatbelt Early Years development services, Networks early years programs, Increase access to Obstetrician, caesarean and midwifery services and young children's • Advocate to the Mental Health Commission for increased access to mental services. health services for parents with young families Advocate for funding to access programs to divert families from the Child Protection system including Aboriginal in-home Support Services and Intensive Case Management • Progress a business case for increased Paediatrician resources • Develop a Child and Family Hubs model - a single place for parents to access support and information locally Improve our built and • Local government Public Health Plans and Strategic Community Plans identify natural environments park and playground improvements to be healthy-and active-by-design.

Growing Well (Kwoba Maladjiny)

STRATEGIC OBJECTIVE

PRIORITY ACTIONS 2025-2027

Increase socioeconomic protective factors and reduce risk factors relating to schools or training avoidance.

- Deliver more Back-to-School events across the Wheatbelt region
- Develop on-country cultural immersion programs for Aboriginal young people including those in the justice system
- Mental health services to collaborate with schools to deliver increased mental health education sessions for students

Promote behaviours which positively impact the physical and mental health, language skills and development of school aged children and young people.

- Promote fundamental movement skills programs e.g. footy fundamentals, building active bodies and brains
- Establish and extend the Head 2 Health primary mental health service across the Wheatbelt
- Collaboration between schools, alcohol and drug and health promotion services to address student vaping and cannabis use
- Continue developing Community Wellbeing Plans supporting local children and youth
- Participate in the 16 Days in WA elimination of violence against women campaign activities

Increase access to services for children and young people.

- Develop culturally safe local support services and integrated systems for disadvantaged families and children
- Promote and deliver across agency collaboration for at risk children and young people
- Integrate with the existing Department of Training & Workforce Development Regional Coordinating Committee
- Develop innovative partnerships and models for alternative education and training pathways for at-risk students in Years 7-9 (12-15 year olds)
- Collaborate with Northam and Narrogin Clontarf Academy, Deadly Sista Girlz program, Waalitj Foundation, Shooting Stars, Stephen Michaels Foundation, Wirrpunda Foundation and Andrew McGovern Foundation

Improve our built and natural environments to be healthy-and active-by-design.

- Local governments continue to invest in safe, accessible and attractive public recreation areas and include in their Public Health Plans
- Promote and provide access to informal, all ability sport opportunities

Living and Working Well (Kwoba Nyininy wer Yakany)

STRATEGIC OBJECTIVE

PRIORITY ACTIONS 2025-2027

Promote and establish a 'wellbeing economy' in the region for the mutual benefit of community health and community wealth.

- Increase access to childcare services to improve workforce and life-long learning participation
- Implement and expand Aboriginal Ranger programs to include those at risk of entering the justice system
- Develop across agency apprenticeships and traineeships for young adults including those at risk of entering or re-entering the Justice system
- Local governments to consider social connectedness, cultural celebration and volunteering activities in their planning
- Finalise business case for Family Domestic Violence Perpetrator housing and services in Northam
- Map food and emergency relief services across the Wheatbelt and develop a discussion paper
- Develop and seek proof of concept funding for a new innovative model of local bail options between Departments of Justice, Communities and Ballardong/ Yued/GKB Aboriginal Corporations

Improve social, emotional, mental and physical health and wellbeing.

- Health promotion, maternity and Aboriginal services collectively provide education and support to address vaping and smoking in pregnant women
- Collaboration between GPs, health providers and health promotion to increase cancer screening uptake, early intervention for chronic conditions risk factors, and psychosocial mental health interventions

Increase access to services for adults.

- Advocate and plan for increased access to core health services locally including by telehealth, prioritising surgical, maternity, paediatrics, rehabilitation, mental health 'step up step down', and hospital in the home
- Map existing community transport models in the region and elsewhere and develop a community transport options paper
- Advocate for increased local services for individuals with harmful alcohol and drug use, particularly for detox programs
- Progress collaboration between mental health, Holyoake suicide prevention, 'Thirrili' and 'Standby' to increase access to suicide prevention and postvention services
- Continue to support and provide services for LGBTQIA+SB mental health / alcohol and drug clients

Improve our built and natural environments to be healthy-and active-by-design for adults.

- Implement wellbeing activities within agencies to improve the psychological safety of our human services workforce
- Implement connection to Boodjar activities with Elders and communities
- Continue to address environmental health risks in local government public health plans in collaboration with WA Health and Public Health
- Identify people in our communities most susceptible to climate change and prepare supportive environments and assistance

Ageing Well (Kwoba Koorakoriny)

STRATEGIC OBJECTIVE

PRIORITY ACTIONS 2025-2027

Increase socioeconomic protective factors for seniors relating to cost of living, community transport, loneliness and community safety.

- Collectively support and promote awareness of Elder abuse activities
- Collectively organise and promote events for WA Seniors Week and access grants available
- Local governments continue to work with other agencies to promote and deliver social connection opportunities for seniors
- Continue to progress and facilitate financial and digital literacy education in local libraries for seniors

Promote positive behaviours that improve the mental and physical health and wellbeing of seniors. Continue to deliver and grow falls prevention education programs including Move Improve Remove and Stay Active programs and new programs for seniors

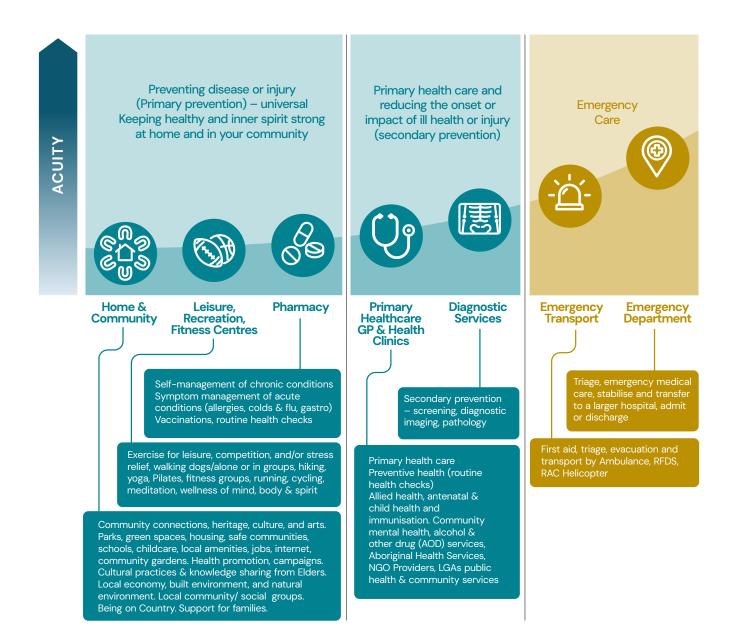
Increase access to early intervention and treatment, and engagement with health services, aged care and healthy ageing services.

- Explore training and other opportunities for local Aboriginal people to become Aged Care Support Workers
- With WAPHA, develop innovative co-designed models to increase access to GPs and primary care
- Facilitate and promote seniors' outpatient services including by digital platforms including within the home
- Explore enhance geriatrician services in acute, community and aged care services
- Grow ideas such as 'Palliative Care Passport' for patients entering end of life care
- Actively engage with Staying in Place and Care Cooperative models across the Wheatbelt
- Re-establish the Wheatbelt Aged Care Service Provider Network
- Develop an older adults care and support services flow chart

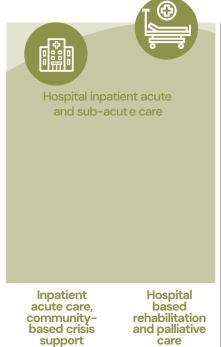
Improve our built and natural environments to be healthy-and activeby-design for seniors.

- Local governments to continue to plan for and enable aged friendly communities in their public health plans including local seniors' accommodation options
- Implement connection to Boodjar activities for and with Elders through Regional Aboriginal Corporations

Appendix 2: Continuum of human services impacting wellbeing and health











disability care,

Allied health, wound care, Specialist care, mental health, alcohol & other drug (AOD), Aboriginal Health Service, NGO Providers, LGA

Community

rehabilitation

& Community

cxtended Community
Care Subacute &
Palliative Care
and Hospice

End of life palliative care at home or hospice Reducing long-term effects of disease or mental ill health by managing symptoms (tertiary prevention)



Home & Community

Improve quality of life and reduce complications Recovery, return to activities of daily living, ongoing behavior modification and lifestyle changes Self-management Keeping well at home, community connections/healthy community factors

Appendix 3: List of agencies and people consulted

Consultation and prioritisation sessions with our Strategy project governance groups

Wheatbelt District Leadership Group

- · Department of Communities
- Wheatbelt Development Commission
- Ballardong, Yued and Gnaala Kaala Booja Aboriginal Corporations
- WA Country Health Service
- Department of Education
- WA Police
- Department of Justice
- Department of Local Government, Sport and Cultural Industries
- Local Government zone representatives x 3

The Project Advisory Group, including Rural Health West, 3 Local Government zone representatives (Avon-Midland, Central Country and Great Eastern), WACHS Planning & Evaluation team, WACHS-Wheatbelt Regional Aboriginal Health Consultant and Operations Manager, WA Primary Health Alliance, Holyoake, Amity Health.

Consultation sessions with WACHS-Wheatbelt internal stakeholders

- WACHS Wheatbelt Regional Executive team
- WACHS Wheatbelt Staff Survey 2023 (181 responses)
- Wheatbelt Health Promotion Network
- Wheatbelt Population Health Managers Forum
- · Wheatbelt Nursing and Midwifery Network
- Wheatbelt District Management Teams (Western, **Eastern and Southern Wheatbelt)**
- Wheatbelt Regional Noongar Staff Forum (14
- Wheatbelt Regional Aboriginal Health Consultant
- Wheatbelt Public Health Unit

Presentations and discussions sessions with external stakeholders

- APM and its Disability Community of Practice members

- District Health Advisory Committees (Eastern, Western and Southern Wheatbelt)
- Human Services Managers Forum (25+ Wheatbelt agencies including Aboriginal Corporations)

- Local Government Zone Meetings (Avon-Midland, Eastern Wheatbelt, and Central Country (42 Shires)

- WA Police Wheatbelt
- · Wheatbelt Chronic Conditions Collaborative
- · Wheatbelt Public Health and Local Government Collaborative
- Wheatbelt Regional Aboriginal Health Forum member agencies
- · York Local Health Advisory Group

Consultation sessions or surveys with Wheatbelt residents and community

- Aboriginal Elders Cultural Consultancy Committee
- Dally Forward Progress Association
- Exhibits at the Dowerin Agricultural Field Days in
- survey (500+ responses)
- WACHS Wheatbelt Patient Experience and Community Engagement (PEACE) committee

Appendix 4: Key data and health indicators

Starting Well (Kwoba Moolyakiny)								
Indicator:	Data:		Source/citation:					
Births to Wheatbelt women in 2022/23 in the Wheatbelt	91 (16%) of 527	total (compared t	Department of Health WA, 2024					
Births at term (39-41 weeks) in 2022/23	55% (39-41 wee	eks)	44% pre-term (< 38 weeks)	Department of Health WA, 2024			
Low birth weight in 2022/23	11% of babies we	eighed <2,500g a	Department of Health WA, 2024					
Children fully immunised in 2023	92.2% of 1-year olds			95% WA Target	Department of Health WA, 2024			
Teen births in 2019	3% (higher than	State rate 2%)	(WACHS) Planning & Evaluation Team, 2023					
Children developmentally on track in 2021	53.7% (307) Wh	eatbelt North	55.5% (136) Wheatbelt South		Australian Early Development Census, 2024			
Life expectancy for those born 2018–2020	82.1 years (Whe	atbelt)	84.3 years (WA)		Australian Bureau of Statistics, 2022			

Growing Well (Kwoba Maladjiny)										
Indicator:	Data:			Source/citation:						
School attendance rates – Wheatbelt Education region:	2021: 71.2% ATSI 86.1% AII		2022: 62.1% ATSI 80.4% AII	2023: 66.7% ATSI 82.9% AII			Department of Education WA, 2024			
Severe attendance risk (attend <60% of the time) in 2023:	820 students	s total		57.4% (471)	were Aborig	inal students	Department of Education WA, 2024			
Students attending school regularly (90% or more of the time) in 2023:	Wheatbelt: 19.6% Aborigi 51.3% non-Ab				Aboriginal non-Aborig	inal	Department of Education WA, 2024			
Child at Risk Alerts (new, updated or extended) 0-17 years:	2022-23: 396 total (179 Aboriginal v 216 non- Aboriginal)			2021–22: 111 total (59 Aboriginal v 52 non– Aboriginal)			WA Country Health Service, 2024			
Child Safety Investigations (child protection):	2021–22: 243			2020-21: 202			Department of Communities, 2023			
Student achievement in Wheatbelt public schools in 2023:	Achieved WA Certificate of Education (WACE): 71.8% Wheatbelt (44.5% WA) 42.9% Aboriginal students (Wheatbelt)			Achieved Vocational Education and Training (VET) Certificate: 71.5% Wheatbelt (56.4% WA) 57.1% Aboriginal students (52.4% WA)			Department of Education WA, 2024			
Young offenders in 2021-22:	179 total (103 were Aboriginal)						WA Police Wheatbelt District, 2023			
Top 5 potentially preventable hospitalisations (0-15 year olds) in 2015-2019:	Dental conditions 5.4% (658)	Ear, Nose Throat infection 2.8% (339	& epi s 1% (12	ulsions lepsy 24)	Asthma 0.9% (112)	Urinary Tract Infections 0.9% (110)	Epidemiology Branch - Department of Health WA, 2024			

Appendix 4: Key data and health indicators

Living and Working Well (Kwoba Nyininy wer Yakany)								
Indicator:	Data:		Source/citation:					
Participation in volunteering in 2021:	25.5% Whea	tbelt		15.9% WA			(PHIDU Public Health information Development Unit, 2023)	
Labour force participation (adults in work) in June 2021:	54.8% Whea	tbelt		66% Perth			(PHIDU Public Health information Development Unit, 2023)	
Top 5 potentially preventable hospitalisations (16-64 year olds) 2015-2019:	Cellulitis 4.6% (564 cases)	Dental conditions 4.5% (548 cases)	Diabe comp ons 4 (523 cases	licati .3%	Chronic obstructive pulmonary disease (respirator y disease) 4% (489 cases)	Urinary tract infections 3.9% (475 cases)	Epidemiology Branch - Department of Health WA, 2024	
Hospital inpatient self- sufficiency (2022-23):	43% Wheatbelt 83% Great Southern 88% Kimberley						Department of Health WA, 2024	
Hospital outpatient self- sufficiency (2022-23):	72% Wheatb	elt	Department of Health WA, 2024					
Chronic conditions 16+ years old (2015–2019):	Obesity 39%	Arthritis 23%	Asthr	na 9%	Diabetes 8%	Mental illness 13.5%	Epidemiology Branch - Department of Health WA, 2024	
Homelessness (2021):	0.3% (227) li	kely under-rep	WACHS Planning and Evaluation Team, 2022					
Lone person households (2023):	29% (approx households)	imately 8,000)	State: 25.4%			Australian Bureau of Statistics, 2023	
Australian Digital Inclusion Index (2022):	All shires are State averag		_	est in Wheatbelt: Chittering 72.4 est in Wheatbelt: Traying 61.0			McCosker, et al., 2023	

Ageing Well (Kwoba Koorakoriny)

Indicator:	Data:		Source/citation:			
Emergency Department presentations 65+ years in 2022-23:	29% (10,52	9) of all ED pre	Department of Health WA, 2024			
Hospital admission 65+ years in 2022-23	60% (4,965	5) of all hospit	Department of Health WA, 2024			
Top 5 potentially preventable hospitalisations (65+ years) 2015–2019	COPD 8.9% (1,083)	Congestive cardiac failure 8.1% (989)	Urinary tract infections 5.4% (664)	Diabetes complications 4.7% (579)	Cellulitis 4.2% (509) cases)	Epidemiology Branch – Department of Health WA, 2024

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