CITY OF ROCKINGHAM

Public Health Plan

2026-2031

August 2026

rockingham.wa.gov.au

city of Rockingham

where the coast comes to life

Acknowledgment of Country

Rockingham, ngala kaaditj moondang-ak kaaradjiny nidja boodja, Binjareb wer Whadjuk Nyoongar moort, wer baalabang kalyogool dandjoo boodja, kep wer moort.

The City of Rockingham acknowledges the Traditional Owners and Custodians of this land, the Binjareb and Whadjuk Nyoongar peoples and their continuing connection to the land, waters and community. We pay our respects to all members of Aboriginal communities and their cultures, and to Elders past and present.

The City acknowledges that it sits on the boundary of the Whadjuk and Binjareb Nyoongar peoples territories. Given the many plentiful resources in the area particularly around the lakes system, the land and water has sustained many people over many thousands of years

Contents

Background and Health Profile 4
Introduction 4
Vision 4
Integrated Planning and Reporting: Plan Alignment 5
Social and Commercial Determinants of Health 6
Our Community 7
Socio-Economic Indexes for Areas 8
Our Health 9
Nutrition 10
Physical inactivity and sedentary behaviour 11
Overweight and obesity 12
Smoking related harm 13
Alcohol related harm 14
Illicit drug related harm 15
Mental health 15
Injury related harm 16
Strategic Objectives 18
State Context 18
City of Rockingham Context 18
Community Engagement and Support 21
Priorities 22
Risk Management 23
The Way Forward 24
Key Element 1: Healthy People and Community 24
Key Element 2: Healthy Places and Spaces 26
Key Element 3: Healthy Partnerships 28
Cost Implications 28
Measuring Success 29
Implementation Plan: Actions 30
- Key Element 1: Healthy People and Community 30
- Key Element 2: Healthy Places and Spaces 32
- Key Element 3: Healthy Partnerships 34

References 36

Background and Health Profile

Introduction

The City of Rockingham actively facilitates integrated public health planning to improve resident health and wellbeing. The City of Rockingham proactively designs community infrastructure, delivers accessible community programs, and supports social initiatives to ensure residents have equitable opportunities to enjoy optimal physical and mental health.

Public health planning has been a strong focus of the City of Rockingham, being the first local government in Western Australia to launch a Health and Wellbeing Strategy in 2007, with its current framework spanning 2024-2029.

The Public Health Plan 2026-2031 sits alongside the Health and Wellbeing Strategy, consolidating existing strategies in alignment with the requirements of the *Public Health Act 2016* and the State Public Health Plan 2025-2030.

Vision

The strategic objective and vision of the Public Health Plan 2026-2031 is:

To support the development of a healthy community through active lifestyles, mental wellbeing and social engagement.

Integrated Planning and Reporting: Plan Alignment

The Public Health Plan 2026-2031 aims to assist in the delivery of the following aspirations of the City's Strategic Community Plan (2023-2033):

Aspiration 1: Social - A family-friendly, safe and connected community

- Connected community: Provide opportunities for community engagement and participation
- Community Health and Wellbeing: Strengthen community health and wellbeing
- Community Health and Wellbeing: Provide healthy lifestyle opportunities
- Inclusive community: Build connectivity with our diverse community

Aspiration 2: Natural Environment - A place of natural beauty where the environment is respected

- Sustainable natural green spaces: Improve community open spaces

Aspiration 3: Built Environment - A built environment carefully planned for today and tomorrow

- Built infrastructure meets current and future community needs: Plan, build and maintain current and future assets
- Plan for sustainable growth: Create safe community places to live, recreate and work
- Accessible and connected: Plan and advocate for transport solutions

Aspiration 5: Leadership - Transparent and accountable leadership and governance

- Quality leadership: Active advocacy for the community

The Public Health Plan 2026-2031 operates in conjunction with other aligned City strategies, including the Health and Wellbeing Strategy 2024-2029. The Public Health Plan consolidates the existing public health actions across the various City strategies, ensuring a cohesive approach to public health outcomes.

Social and Commercial Determinants of Health

Public health is about ensuring communities have fair access to the resources that support good health. These resources are referred to as the social determinants of health – like education, employment, housing, and healthcare. They are resources shaped by broader social and commercial factors. Local government plays a key role in addressing these factors through strategic planning and advocacy.

Source: Healthy People 2030

The commercial determinants of health are the ways businesses impact public health – positively or negatively. For example, harmful industries like tobacco, alcohol, and unhealthy food and drink negatively contribute to health risks. Commercial activity can also improve health, such as the development of affordable vaccines and medicines, as well as the reduction in burning fossil fuels with a shift to renewable energy.

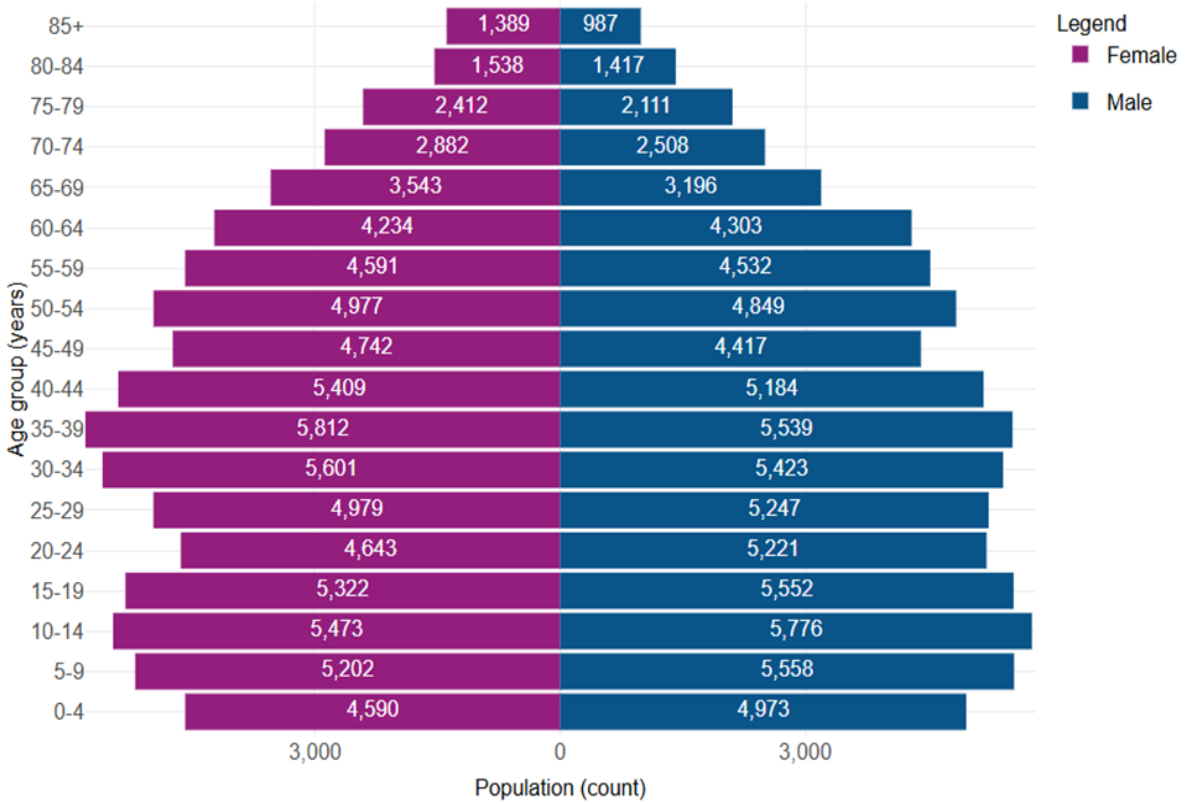
Local governments are focussed on good governance for the wellbeing of the municipality. Local governments can help manage commercial determinants of health through policies, regulations and advocacy to create healthier communities.

Local governments play a crucial role in providing accessible facilities and programs to the community, including sports and recreation facilities, community centres and libraries, arts and cultural programs as well as public events.

Through leveraging their unique role and function, there are many opportunities for local governments to address harmful commercial influences on the wellbeing of their community. Local governments can implement policies and services that promote health equity by improving access across the whole community.

Our Community

As of 30 June 2025, an estimated 159,934 people lived in the City of Rockingham. Around 49.8% were male and 50.2% were female.



Source: Epidemiology Directorate (2026). Health and wellbeing profile: City of Rockingham. WA Department of Health: Perth

Other key community population measures based on the 2021 Census of Population and Housing data are provided below:

Population measure	Count in the City of Rockingham	Percentage (%) in the City of Rockingham	Percentage (%) in Western Australia
Aboriginal	4,879	3.5	3.3
Persons born overseas	53,865	38.3	27.6
Persons who do not speak English at home	23,847	17.6	18.4
Persons who are unemployed	4,321	5.8	5.1
Families with an annual income <$64,999	8,756	23.8	16.6

Source: Epidemiology Directorate (2026). Health and wellbeing profile: City of Rockingham. WA Department of Health: Perth

Socio-Economic Indexes for Areas

The Socio-Economic Indexes for Areas (**SEIFA**) score combine data from the 2021 Census of Population and Housing such as income, education, employment, occupation, housing and family structure to summarise the socio-economic characteristics of an area.

SEIFA scores are based on a national average of 1,000. Areas with lower SEIFA scores are considered to be more disadvantaged.

The overall SEIFA score for the City of Rockingham is 989. SEIFA scores for local governments within the South Metropolitan Health Services area ranged from 936 to 1,082.

Each suburb receives a SEIFA score indicating how relatively advantaged or disadvantaged that area is compared with other areas, and the national average.

Suburb	SEIFA Score
Baldivis	1025
Cooloongup	900
East Rockingham	819
Golden Bay	1001
Hillman	914
Karnup	1027
Port Kennedy	981
Rockingham	937
Safety Bay	997
Secret Harbour	1051
Shoalwater	964
Singleton	1038
Waikiki	970
Warnbro	945

Source: Australian Bureau of Statistics (2021). Socio-Economic Indexes for Australia (SEIFA) 2021

Our Health

The City of Rockingham Health and Wellbeing Profile 2015-2024, prepared by the Department of Health (WA), provides an overview of the health status of people in the City of Rockingham, using the latest available data from multiple sources.

The Health and Wellbeing Profile compares the City of Rockingham to the State average in the following key areas:

- lifestyle-related risk factors (nutrition, physical inactivity, tobacco use and alcohol use)
- physiological risk factors (overweight and obesity)
- alcohol, tobacco and illicit drug–attributable hospitalisations and deaths
- mental health
- injury-related prevalence, hospitalisations and deaths.

Nutrition

Diet has an important effect on health and can influence the risk of diseases such as coronary heart disease, type 2 diabetes, stroke and some cancers.

The Australian Dietary Guidelines state that diet is arguably the single most important behavioural risk factor that can be improved to have a significant impact on health. The Australian Dietary Guidelines outline the recommended daily serves of fruit and vegetables for children and adults (NHMRC, 2013).

The minimum recommended serves of fruit per day by age are:

- two to three years, one serve
- four to eight years, one serve
- nine to 15 years, two serves
- 16 years and over, two serves

The minimum recommended serves of vegetables per day by age are:

- two to three years, two serves
- four to eight years, four serves
- nine to 15 years, five serves
- 16 years and over, five serves

The Australian Dietary Guidelines also recommend limiting the intake of discretionary foods such as fast food and ultra-processed foods as well as sugar-sweetened drinks.

The following tables outline the prevalence of nutrition indicators for both children and adults, based on data obtained in 2024, from the City of Rockingham's Health and Wellbeing Profile.

Children aged two to 15 years

	City of Rockingham	Western Australia	City of Rockingham comparison to WA
Eats the recommended serves of daily fruit	72.5%	75.4%	Lower
Eats the recommended serves of daily vegetables	9.2%	10.9%	Lower
Eats fast food more than twice a week	5.3%	6.2%	Lower
Drinks sugar-sweetened soft drinks or energy drinks more than twice a week	9.3%	8.5%	Higher

Data source: Epidemiology Directorate (2026). Health and wellbeing profile: City of Rockingham. WA Department of Health: Perth

Adults aged 16 years and over

	City of Rockingham	Western Australia	City of Rockingham comparison to WA
Eats the recommended serves of daily fruit	32.9%	33.4%	Similar
Eats the recommended serves of daily vegetables	4.5%	4.7%	Similar
Eats fast food more than twice a week	7.8%	6.0%	Higher
Drinks sugar-sweetened soft drinks or energy drinks more than twice a week	18.6%	16.8%	Higher

Data source: Epidemiology Directorate (2026). Health and wellbeing profile: City of Rockingham. WA Department of Health: Perth

The Health and Wellbeing Profile indicates that residents within the City of Rockingham have reduced their consumption of fruit and vegetables and increased their consumption of fast food and sugar-sweetened drinks over the last decade.

Physical inactivity and sedentary behaviour

Physical activity reduces the risk of cardiovascular disease, some cancers and type 2 diabetes, as well as helping to improve musculoskeletal health, maintain body weight and reduce symptoms of depression (WHO, 2009).

The 2019 Australian 24-Hour Movement Guidelines for Children and Young People recommend that children aged five-15 years complete at least 60 minutes of moderate to vigorous physical activity each day (DHAC, 2019).

The Australian Physical Activity and Sedentary Behaviour Guidelines for Adults aged 18–64 years state that adults should accumulate 150 to 300 minutes of moderate-intensity physical activity, or 75 to 150 minutes of vigorous-intensity physical activity, or an equivalent combination of both moderate and vigorous activities each week (DHAC, 2014).

Physical activity guidelines for older Australians (aged 65 years and over) recommend that older people accumulate at least 30 minutes of moderate-intensity physical activity on most or preferably all days (DAHC, 2021).

The following tables outline the physical activity indicators for both children and adults, based on data obtained in 2024, from the City of Rockingham's Health and Wellbeing Profile.

Children aged two to 15 years

	City of Rockingham	Western Australia	City of Rockingham comparison to WA
Insufficient weekly physical activity	63.2%	62.3%	Similar
Spends more than recommended time in screen-based sedentary leisure activities	49.5%	43.9%	Higher

Data source: Epidemiology Directorate (2026). Health and wellbeing profile: City of Rockingham. WA Department of Health: Perth

Adults aged 16 years and over

	City of Rockingham	Western Australia	City of Rockingham comparison to WA
Insufficient weekly physical activity	38.7%	39.1%	Similar
Spends more than recommended time in screen-based sedentary leisure activities	39.8%	37.4%	Higher

Data source: Epidemiology Directorate (2026). Health and wellbeing profile: City of Rockingham. WA Department of Health: Perth

The Health and Wellbeing Profile indicates that residents within the City of Rockingham have maintained their physical activity at a steady level but increased their screen-based sedentary levels over the last decade.

Overweight and obesity

Overweight and obesity in adults are associated with cardiovascular disease, type 2 diabetes, some cancers, musculoskeletal disorders (in particular, osteoarthritis), dementia and a range of other conditions (AIHW, 2017a).

Body Mass Index (BMI) is the measure used to determine weight ranges. BMI is calculated by dividing weight in kilograms by height in meters squared.

For adults, weight ranges are as follows:

- not overweight or obese (BMI less than 25)
- overweight (BMI from 25.0 to 29.9)
- obese (BMI of 30.0 and above).

For children, these classifications were derived using age and sex percentile curves as developed by Cole et al (2000).

The following tables outline the prevalence of overweight and obesity for both children and adults, based on data obtained in 2024, from the City of Rockingham's Health and Wellbeing Profile.

Children aged two to 15 years

	City of Rockingham	Western Australia	City of Rockingham comparison to WA
Overweight	16.3%	15.0%	Higher
Obese	14.0%	10.2%	Higher

Data source: Epidemiology Directorate (2026). Health and wellbeing profile: City of Rockingham. WA Department of Health: Perth

Adults aged 16 years and over

	City of Rockingham	Western Australia	City of Rockingham comparison to WA
Overweight	36.9%	37.4%	Similar
Obese	45.4%	37.3%	Higher

Data source: Epidemiology Directorate (2026). Health and wellbeing profile: City of Rockingham. WA Department of Health: Perth

The Health and Wellbeing Profile indicates a reduction in overweight residents but an increase in obese residents in the City of Rockingham over the last decade.

Smoking related harm

Tobacco use, including past and current use and exposure to second-hand smoke, increases the risk of a number of health conditions, including cancer, respiratory diseases and cardiovascular disease (AIHW, 2018).

The following table outlines the prevalence of smoking indicators, based on data obtained in 2024, from the City of Rockingham's Health and Wellbeing Profile.

Adults aged 16 years and over

	City of Rockingham	Western Australia	City of Rockingham comparison to WA
Current smoking	14.6%	13.5%	Higher
Current vaping	9.1%	7.1%	Higher
Tobacco-attributable hospitalisations (2024)	412 per 100,000	366 per 100,000	Higher
Tobacco-attributable deaths (2024)	65 per 100,000	48 per 100,000	Higher

Data source: Epidemiology Directorate (2026). Health and wellbeing profile: City of Rockingham. WA Department of Health: Perth

The Health and Wellbeing Profile indicates that the proportion of residents within the City of Rockingham that smoke is steady and increased their use of vapes over the last decade. Tobacco related hospitalisations and tobacco related deaths within the City of Rockingham have decreased over the last decade.

Alcohol related harm

Alcohol use increases the risk of some health conditions, including coronary heart disease, stroke, high blood pressure, and liver and pancreatic disease. It also increases the risk of violence and anti-social behaviour, accidents and mental illness (AIHW, 2017c).

It is recommended that healthy adults aged 18 years and above should drink no more than two standard drinks on any one day to reduce the risk of long-term harm and no more than four standard drinks on a single occasion to reduce the risk of short-term harm from alcohol-related disease or injury (NHMRC, 2009).

For children and young people under 18 years, the guidelines recommend not drinking alcohol as the safest option.

The following table outlines the prevalence of alcohol use for adults (including children aged 16 years and older), based on data obtained in 2024, from the City of Rockingham's Health and Wellbeing Profile.

Adults aged 16 years and over

	City of Rockingham	Western Australia	City of Rockingham comparison to WA
High risk alcohol use for short-term harm	11.2%	11.9%	Similar
High risk alcohol use for long-term harm	29.0%	29.1%	Similar
Alcohol-attributed hospitalisations (2024)	636 per 100,000	665 per 100,000	Lower
Alcohol-attributed deaths (2024)	29 per 100,000	26 per 100,000	Higher

Data source: Epidemiology Directorate (2026). Health and wellbeing profile: City of Rockingham. WA Department of Health: Perth

The Health and Wellbeing Profile indicates that resident consumption of alcohol within the City of Rockingham have remained steady over the last decade. There has been a decline in alcohol-attributed hospitalisations over the last decade, however alcohol-attributed deaths have remained steady over this period.

Illicit drug related harm

According to the Australian Burden of Disease Study 2024, illicit drug use contributed to 2.9% of the total burden of disease and injury in 2024 (AIHW, 2024a).

The following table outlines the prevalence of illicit drug-attributable hospitalisations and deaths, based on data obtained in 2024, from the City of Rockingham's Health and Wellbeing Profile.

Ten drug groups contribute to the illicit drug-attributable hospitalisations and deaths data, and include opioids, sedatives (sedatives and barbiturates and benzodiazepines), anti-depressants, psychostimulants and cocaine, hallucinogens, cannabis, volatile substances, analgesics/antipyretics/antirheumatics, combination/ unspecified drugs and other adverse effects of drugs.

All ages

	City of Rockingham	Western Australia	City of Rockingham comparison to WA
Illicit drug-attributable hospitalisations (2024)	121 per 100,000	181 per 100,000	Lower
Illicit drug-attributable deaths (2024)	16 per 100,000	9 per 100,000	Higher

Data source: Epidemiology Directorate (2026). Health and wellbeing profile: City of Rockingham. WA Department of Health: Perth

The Health and Wellbeing Profile indicates a decline in illicit drug-attributable hospitalisations but an increase in illicit drug-attributable deaths of residents within the City of Rockingham over the last decade.

Mental health

People with a mental health condition are at an increased risk of experiencing other disorders including physical disorders and diabetes (AIHW, 2017b).

According to WHO's World Mental Health Report (2022), mental health is the world's leading cause of disability and the stigma around mental health remains high.

The following table outlines the prevalence of various mental health conditions for adults (including children aged 16 years and older), based on data obtained in 2024, from the City of Rockingham's Health and Wellbeing Profile.

Adults aged 16 years and over

	City of Rockingham	Western Australia	City of Rockingham comparison to WA
Any mental health condition	26.3%	25.0%	Higher
Stress-related condition	13.2%	13.5%	Similar
Anxiety	18.7%	16.3%	Higher
Depression	15.1%	13.7%	Higher
High or very high psychological distress	24.5%	21.7%	Higher

Data source: Epidemiology Directorate (2026). Health and wellbeing profile: City of Rockingham. WA Department of Health: Perth

The Health and Wellbeing Profile indicates that City of Rockingham residents have had an increase in mental health conditions since 2020. Prior to that, the rate of mental health conditions was steady.

Injury related harm

The following tables outline the prevalence and types of injuries indicators for both children and adults, based on data obtained in 2024, from the City of Rockingham's Health and Wellbeing Profile.

Children aged two to 15 years

	City of Rockingham	Western Australia	City of Rockingham comparison to WA
Injured in the past 12 months requiring treatment from a health professional	25.5%	29.6%	Lower

Data source: Epidemiology Directorate (2026). Health and wellbeing profile: City of Rockingham. WA Department of Health: Perth

Adults aged 16 years and over

	City of Rockingham	Western Australia	City of Rockingham comparison to WA
Injured in the past 12 months requiring treatment from a health professional	24.4%	26.0%	Lower

Data source: Epidemiology Directorate (2026). Health and wellbeing profile: City of Rockingham. WA Department of Health: Perth

All ages - injury related hospitalisations

	City of Rockingham	Western Australia	City of Rockingham comparison to WA
Accidental falls (2024)	1,015 per 100,000	1,031 per 100,000	Lower
Assault and neglect (2024)	60 per 100,000	106 per 100,000	Lower
Transport accidents (2024)	233 per 100,000	236 per 100,000	Similar
Intentional self-harm (2024)	88 per 100,000	106 per 100,000	Lower
Accidental poisoning (2024)	52 per 100,000	52 per 100,000	Similar
Accidental drowning, submersion, threats to breathing (2024)	12 per 100,000	21 per 100,000	Lower

Data source: Epidemiology Directorate (2026). Health and wellbeing profile: City of Rockingham. WA Department of Health: Perth

All ages - injury related deaths

	City of Rockingham	Western Australia	City of Rockingham comparison to WA
Accidental falls (2024)	16 per 100,000	15 per 100,000	Higher
Assault and neglect (2024)	0.6 per 100,000	0.8 per 100,000	Lower
Transport accidents (2024)	6 per 100,000	7 per 100,000	Lower
Intentional self-harm (2024)	17 per 100,000	13 per 100,000	Higher
Accidental poisoning (2024)	7 per 100,000	7 per 100,000	Similar
Accidental drowning, submersion, threats to breathing (2024)	1 per 100,000	1 per 100,000	Similar

Data source: Epidemiology Directorate (2026). Health and wellbeing profile: City of Rockingham. WA Department of Health: Perth

The Health and Wellbeing Profile indicates that rates of accidental falls within the City of Rockingham have increased over the last decade, accidental poisoning and drownings have reduced over the last decade, and all other injury rates have remained steady.

Strategic Objectives

State Context

The State Public Health Plan 2025-2030, developed by the Department of Health, provides a strategic framework for improving the health and wellbeing of all Western Australians.

There are two overarching objectives under the State Public Health Plan 2025-2030, being Aboriginal Health and Wellbeing, and Equity and Inclusion.

These two overarching objectives are integrated across the following four objectives:

- Promote: Foster strong, connected 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, reduce impacts of disaster, and lessen the health impacts of climate change
- Enable: Bolster public health systems and workforce, and leverage partnerships to support health and wellbeing.

The State Public Health Plan 2025-2030 provides a strategic framework to guide the development of the City's Public Health Plan.

State government agencies are primarily responsible for the health and wellbeing of Western Australians. The Department of Health leads the coordination and delivery of public health and wellbeing policies, programs, and services in Western Australia.

City of Rockingham Context

The City of Rockingham influences many aspects of community life which contribute to health and wellbeing, such as parks and facilities, transport, social support and community participation along with implementation of its planning framework.

The City has a key role in shaping the physical environment to facilitate a range of public health outcomes. Strategic planning includes public health assessments to ensure public health is considered in the decision-making on proposed developments. Recreation facilities, public open spaces and reserves are planned and designed to maximise usage and accessibility to all residents.

The City also has a key role in building community capacity to support health and wellbeing. Through partnerships, grants, training, volunteering opportunities, and a range of community development initiatives and events, the City works alongside local clubs, community groups and service providers to strengthen and encourage community participation, connection and inclusion. This includes targeted health and wellbeing initiatives delivered through the Health and Wellbeing Strategy 2024–2029, as well as broader opportunities for engagement through arts and cultural activities, seniors programs, youth development activities, children and families programs, and community events. By creating opportunities, supporting local organisations and

fostering social connection, the City empowers residents to lead healthy, active and connected lives.

The City also has a number of strategies which encompass programs and initiatives that support public health. Rather than duplicating services, the City embraces a holistic approach, recognising that community priorities and strategies naturally intersect.

Together, the strategies provide a coordinated and costed framework of actions that collectively deliver the objectives of this plan, ensuring a cohesive approach to public health outcomes.

Complimentary strategies include:

- The Health and Wellbeing Strategy 2024-2029 includes key actions around sport recreation and physical activity, mental wellbeing, healthy lifestyles and volunteering.
- The Community Safety and Support Services Strategy 2022-2027 includes actions and focus areas which relate to supporting mental health and community awareness.
- The Strategy for Early Years, Children and Young People 2024-2030 contains actions and key elements relating to mental health and inclusion.
- The Cultural Development and Arts Strategy 2024-2030 acknowledges the importance of arts and culture on a person's mental health.
- The Seniors Strategy 2024-2029, includes actions relating to active and healthy ageing.
- The Disability Access and Inclusion Plan 2026-2013.

The City also plays a statutory health role under the *Public Health Act 2016* in relation to various public health requirements and compliance. The City has responsibility for managing environmental health risks to protect public health, such as monitoring for safe food, air and water. The City actively participates in a mosquito control program to protect against the public health risk presented by mosquitoes, endemic to the Peel region.

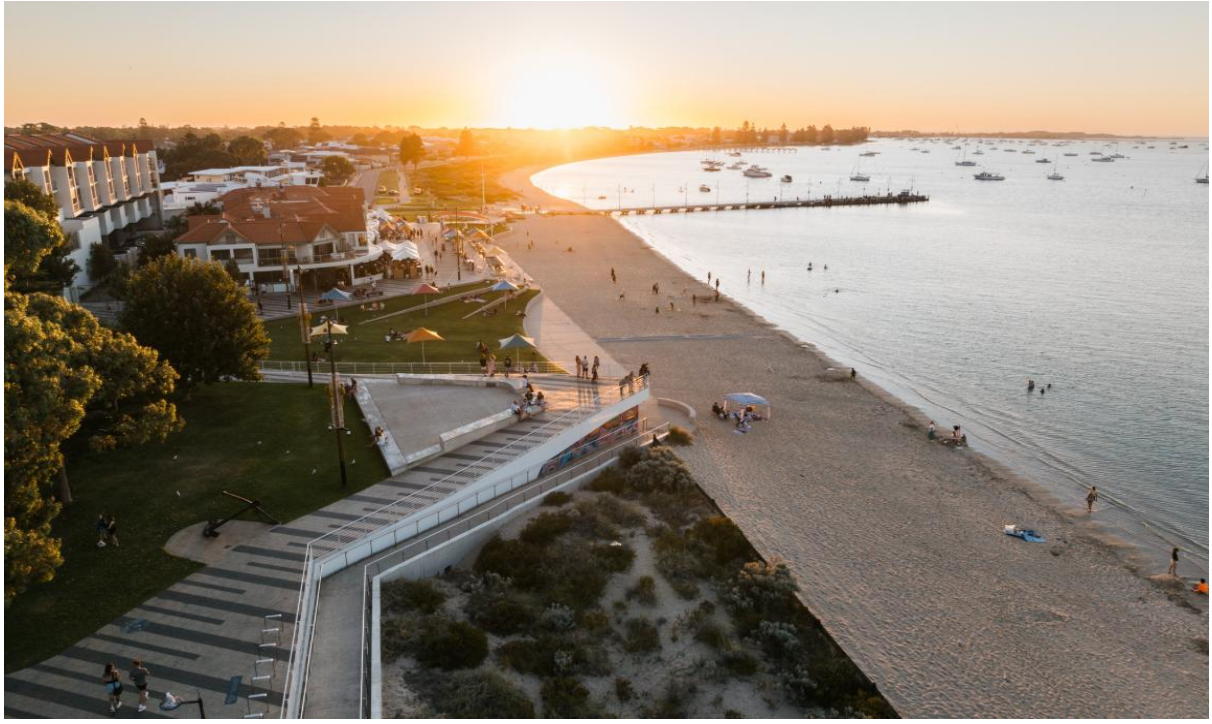
Operating under the *Public Health Act 2016*, the City safeguards the community from environmental health risks through proactive inspections, routine sampling, and responsive public health complaint investigations.

Over the 2025/2026 financial year, the City undertook:

- 1,314 inspections of food premises to ensure the minimum standard of food safety and hygiene was achieved
- 114 inspections of public buildings for emergency egress and fire safety
- 328 approvals of outdoor events for public safety and risk mitigation
- 737 water samples to ensure the water quality at recreational water bodies, popular ocean swimming sites and public swimming pools were within safe swimming parameters
- 1,226 public health complaint response investigations.

Whilst the City of Rockingham plays a significant role in creating an environment for communities to prosper and enjoy good health, there are limitations on the role that local government undertakes in public health.

Local government does not provide medical services, facilities such as hospitals or medical centres, or other specialised services relating to mental health, drug and alcohol support. Where possible, the City supports the delivery of these services through partnerships and advocacy.



Community Engagement and Support

As part of the development of the City's Health and Wellbeing Strategy 2024-2029, the City undertook extensive community consultation and engagement with a range of external stakeholders including service providers, local clubs, community groups, state government agencies and community members.

The community consultation included 10 community workshops, individual interviews and an online survey attracting 300 responses.

The community consultation was focussed on health and wellbeing opportunities within the City of Rockingham, and as such, the consultation findings can assist in the development of the Public Health Plan 2026-2031.

The City has also utilised relevant feedback from the community consultation process for the City's Strategic Community Plan 2023–2033 to assist with the development of the Public Health Plan 2026-2031.

Informed by the community consultation and research, the City identified the following main lifestyle risk factors and focus areas for Rockingham residents:

- mental health issues
- poor nutrition
- sedentary lifestyles
- obesity
- smoking
- excessive alcohol consumption.

- loneliness and/or isolation
- opportunities to volunteer/participate
- provision of, and access to, quality facilities.

Priorities

The City of Rockingham's public health focus areas are based on the public health trends identified in the City's Health and Wellbeing Profile, the community consultation feedback, the preventative health projects already being undertaken, and the overarching principles of the State Public Health Plan 2025-2030.

The key areas identified through the community consultation correlate to the trends identified in the City's Health and Wellbeing Profile. The City has the opportunity to improve these key areas through the planning and development of quality natural and recreation spaces, as well as through the development of partnerships with external agencies to deliver programs that will improve public health outcomes.

The State Public Health Plan 2025-2030 objectives of Promote, Prevent and Enable also reflect the key areas identified by the community. The other State Public Health Plan 2025-2030 objective of Protect, which is already incorporated across various City functions, but will be addressed in the Implementation Plan of the Public Health Plan 2026 - 2031.
Addressing these focus areas, the Public Health Plan 2026-2031 comprises three key elements:

1. Healthy People and Community: Promote healthier lifestyles and connected communities

2. Healthy Places and Spaces: Promote healthy living through better environments

3. Healthy Partnerships: Collaborate with government, non-government and community-based organisations to deliver public health initiatives

The Public Health Plan 2026-2031 will guide the City's delivery and facilitation of public health initiatives across various City departments.

The Implementation Plan section lists the ongoing and new actions in alignment with these key elements, which will be implemented in the 2026-2031 period.

Risk Management

A review of strategy planning and implementation risks has been conducted in line with the City's Risk Management Framework. The project management and customer service program/event risks are either at a low or medium level and will be managed by City staff as part of the planning and implementation of the Public Health Plan 2026 - 2031.

This is in line with the City's Risk Management requirements.

The Way Forward

Key Element 1: Healthy People and Community

Promote healthier lifestyles and connected communities

What the research told us

- Regular physical activity can help people manage chronic conditions, improve mental and musculoskeletal health, and improve quality of life.
- Physical activity is important across all ages and contributes to health, growth and development in children and adolescents.
- High levels of mental health and wellbeing enable individuals to actively participate in community and family life, contribute socially and economically, and experience meaningful lives.
- Low levels of mental health and wellbeing are linked to mental and physical ill-health, harmful alcohol and other drug use, and a lower quality of life.
- Dietary risk factors are a leading cause of the burden of disease in Australia. Research heavily linked dietary shortfalls to obesity, cardiovascular disease, type 2 diabetes and bowel cancer (AIHW 2017a).
- Research highlights a direct link between alcohol consumption and various types of cancer. The National Health and Medical Research Council recommend adults consume no more than 10 standard drinks per week and no more than 4 standard drinks on any single day.
- Illicit drug use can affect individuals, families and the broader community.

What the local community and stakeholders told us

- There is a strong need for suicide prevention, drug rehabilitation, family support and youth services, as mental health facilities/services are limited and often have long waitlists. Baldivis was highlighted as a priority area.
- Concern with the reduction in federal funding for Rockingham based mental health services.
- Rockingham Youth Centre was noted as a safe space for many young people and of critical importance to young people who may be experiencing difficulties.
- Concern about loneliness and social isolation.
- Carers were noted as a specific group which requires consideration and support.
- Art, music and nature were widely identified as enhancing good mental health and physical wellbeing.
- Older people highlighted a need for upskilling and employment opportunities.
- Workshops/education relating to the impact of bullying on young people and their mental health were outlined as being important - particularly for parents.

What the City will do

- Promote physical activity and active living.
- Promote mental health and wellbeing through the delivery of programs and events.
- Support key agencies in reducing alcohol harm.

- Reduce drug related harm and tobacco and e-cigarette related exposure through the enforcement of State legislation.
- Support key agencies in reducing preventable diseases by raising awareness.
- Promote healthy eating, nutrition and food safety.
- Promote inclusivity and cultural awareness.

Key Element 2: Healthy Places and Spaces

Promote healthy living through better environments

What the research told us

- Providing access to high-quality public open space encourages people to be physically active and supports good mental and physical health.
- Public open space is important for recreation and social connection purposes, as well as enhancing the environmental quality of neighbourhoods and providing a cooling effect.
- The provision of public open space, leisure and aquatic facilities, sportsgrounds and playing fields, clubrooms and community facilities by local government play a substantial role in mitigating chronic disease and enhancing community perceptions of their general health and quality of life (Department of Sport and Recreation 2016).
- The Australian Institute of Health and Welfare estimates that Australians saved the health system more than $320 million in a single year by participating in sport and other forms of physical activity.
- The World Health Organisation estimates that as much as 24% of global deaths are attributed to environmental health risks which are largely preventable. Undertaking a proactive environmental health monitoring program is essential to managing and protecting public health.

What the local community and stakeholders told us

- Most respondents were complimentary of the City's vast array of parks, sporting grounds, indoor facilities and sporting complexes.
- Some older sport and recreation facilities were identified as needing refurbishment or upgrade, with new facilities close to capacity.
- The provision of outdoor exercise equipment and free exercise programs (yoga, tai-chi, dance, fitness) were well received. Free access to these programs was also noted as important.
- Improved cycle path facilities (including regular cleaning and safety checks, lighting and connectivity) and separating paths for different user groups were identified as ways to encourage cycling uptake.
- The review and development of infrastructure, such as shade and seating, were seen as important, especially to older people or less confident walkers.
- The Rockingham community enjoys walking their dogs, and for many, walking their dogs to the local park provides not only physical activity, but also social and mental wellbeing opportunities.
- Community gardens were identified as having physical and mental health benefits, as well as contributing to a healthy lifestyle – especially for those who have downsized and no longer have access to a garden.
- Safety was an important consideration in encouraging people to be active outdoors and in the community.

What the City will do

- Promote physical activity through active transport.
- Promote, maintain and deliver a variety of sport and recreation spaces.
- Promote the retention and protection of natural spaces for physical and mental wellbeing.
- Protect public health through environmental health programs.
- Respond to the effects of climate change on public health.

Key Element 3: Healthy Partnerships

Collaborate with government, non-government and community-based organisations to deliver public health initiatives

What the research told us

- Local governments are positioned to manage the social factors of health (housing, transport, and urban planning). When health agencies partner with local government, health equity is more effectively integrated into overall city planning (ANZ Journal of Public Health).

What the local community and stakeholders told us

- The City was identified as a 'one-stop-shop' for information about what is available in the community.
- Advocacy is required at state and federal government for the provision of medical and mental health services and facilities.
- The City has an advocacy role in relation to external stakeholders on behalf of the community.
- Partnering with external organisations and delivery of programs tailored to non-sporty people, older people and/or people with disability, were suggested for consideration.

What the City will do

- Promote partnerships with government agencies and other groups.
- Provide assistance to groups to improve public health.
- Support sustainable disaster and emergency management response.

Cost Implications

All costings for the Actions listed under the Public Health Plan 2026 – 2031 have been accounted for through existing strategies. There will be no additional cost implications resulting from the adoption of the Public Health Plan.

Measuring Success

The implementation of the actions will be measured utilising a range of evaluation techniques such as:

- City of Rockingham Health and Wellbeing Profile
- Annual Resident Perception Survey
- Annual Department of Health Public Health Act Reporting
- Community Development Measurement Model
- Uptake of programs, services and events
- Feedback
- Organisational partnerships.

To ensure suitability of proposed actions, in addition to an annual review through the City's team plan process, a minor internal review of the Public Health Plan will be undertaken following the completion of year three of the strategy, being the 2028/2029 financial year.

Annual reporting will also be provided to the Department of Health under the *Public Health Act 2016* reporting requirements.

Implementation Plan: Actions

Key Element 1: Healthy People and Community

Promote healthier lifestyles and connected communities

No	Strategy	Actions
1.1	Promote physical activity and active living	Deliver and support programs and initiatives that encourage and facilitate access to physical activity
		Build capacity of local sport and recreation clubs to plan and implement their own wellbeing initiatives and practices
		Recognise local sport and recreation achievements and contributions at the annual Sports Star Awards event
1.2	Promote mental health and wellbeing	Facilitate programs and initiatives that encourage resilience and mental wellbeing
		Imbed and promote the Act Belong Commit campaign in City of Rockingham programs and the wider community
		Deliver a range of events and initiatives that facilitate community connections
		Develop and implement awareness raising initiatives focussing on the value of volunteering
		Continue to provide a range of support programs and activities for young people and their families
1.3	Reduce alcohol related harm	Implement the City's Alcohol Management Plan
		Participate in the Rockingham Liquor Accord
		Develop and implement educational and awareness raising initiatives focussing on reducing harm from alcohol use
1.4	Reduce drug related harm and tobacco and e-cigarette related exposure	Develop and implement educational and awareness raising initiatives focussing on reducing harm from drug use, smoking and vaping
		Investigate and enforce smoking regulations while educating proprietors and patrons to eliminate exposure to second hand smoke in public places
1.5	Reduce preventable diseases	Promote awareness raising campaigns focussing on beach / water safety and being sun smart

		Investigate and implement preparedness actions to support individuals and groups that are at higher risks to the impacts of heatwaves to increase resilience within the community
		Support State-drive initiatives via the City's Local Emergency Management Arrangements (LEMA) to promote awareness and reduce the spread and impact of preventable diseases and health conditions within the community
1.6	Promote healthy eating, nutrition and food safety	Facilitate provision of programs and initiatives that encourage healthy eating
		Promote healthy eating by supporting access to healthier food options at City facilities
		Continue to contribute to the Australian Food Atlas and WA Food Access and Cost Survey
1.7	Promote inclusivity and cultural awareness	Ensure all programs and initiatives are inclusive, welcoming and culturally appropriate to all members of the community including people with a disability, First Nations people, young people, people from culturally and linguistically diverse backgrounds and those from LGBQITA+ communities

Key Element 2: Healthy Places and Spaces
Promote healthy living through better environments

No	Strategy	Actions
2.1	Promote physical activity through active transport	Deliver and support programs and initiatives that encourage the use of active travel
		Deliver the City's Long Term Based Cycle Network Plan based on priority funding and availability
		Develop a Walking and Cycle Plan
		Prepare and implement the Sustainable Transport Strategy
2.2	Promote sport and recreation spaces	Continue to implement and review the provision of indoor and outdoor recreation facilities to meet community needs
		Develop, implement and support programs and initiatives that activate and encourage ongoing use of the City's leisure facilities
		Regularly liaise with sport and recreation clubs to ensure their needs are considered as part of refurbishment or development or sport and recreation facilities
		Continue to implement and review the provision of outdoor equipment to meet community needs
		Activate and promote the use of outdoor exercise equipment
2.3	Promote natural spaces for physical and mental wellbeing	Promote the positive impact of natural environment and sustainable living on the community's wellbeing
		Promote, enhance and maintain local walking trails to encourage low impact physical activity
		Support service provision at, and promotion of, community gardens
		Ensure adequate provision of dog exercise areas throughout the community
2.4	Protect public health through environmental health programs	Undertake an ongoing monitoring program at recreational water bodies, ocean sampling and public pools
		Inspect and provide food safety education to food businesses
		Conduct mosquito surveillance and larval habitat treatment in high-risk areas
		Deliver public education and conduct investigations on environmental health risks,

		including noise, pests and vectors of disease, asbestos and mould
		Assess development applications and on-site effluent systems for compliance with public health legislation
2.5	Enhance public health through development proposals	Undertake public health risk assessment in planning proposals, as required
2.6	Manage the effects of climate change on public health	Review and implement the City of Rockingham Coastal Hazard Risk Management and Adaption Plan
		Implement the City of Rockingham Urban Forest Strategy
		Review the City of Rockingham Sustainability Strategy

Key Element 3: Healthy Partnerships

Collaborate with government, non-government and community-based organisations to deliver public health initiatives

No	Strategy	Actions
3.1	Promote partnerships with government agencies and other groups	Participate in state and regional public health networks
		Partner with external stakeholders to utilise existing marketing campaigns that are relevant to active transport, physical activity and mental health and wellbeing
		Partner with local community groups and service providers to raise community awareness of mental health and wellbeing
		Partner with relevant state government departments and groups to deliver programs, should funding be available
		Collaborate with the Department of Health for notifiable disease investigations
		Advocate and provide input into health and wellbeing policies and practices relevant to Local Government Authorities
3.2	Provide assistance to groups to improve public health	Promote internal and external funding opportunities to local sport and recreation clubs
		Facilitate opportunities for local health and wellbeing services and providers to connect with each other and the community
		Provide professional development and capacity building opportunities to local sport and recreation clubs to assist with developing governance practices
		Implement an online City of Rockingham Community Directory to provide a centralised resource for local community members, groups, clubs and service providers
3.3	Provide sustainable disaster and emergency management	Ensure disaster recovery includes coordinated debris and waste management to minimise public health risks
		Collaborate with the Department of Health on pandemic and outbreak response
		Develop and maintain Local Emergency Management Arrangements (LEMA) to coordinate responses to emergencies and protect community health
		Provide accessible communication channels to emergency preparedness and disease

		prevention information and promote relevant websites (i.e., EmergencyWA)
		Enhance community resilience through preparedness workshops, awareness events, and access to emergency planning and disease prevention resources

References

Australian and New Zealand Journal of Public Health (February 2019). Collaborative population health planning between Australian primary health care organisations and local government: lost opportunity. Available from: Collaborative population health planning between Australian primary health care organisations and local government: lost opportunity - ScienceDirect

Australian Bureau of Statistics (2021). Socio-Economic Indexes for Australia (SEIFA) 2021. Available from: Socio-Economic Indexes for Areas (SEIFA), Australia, 2021 | Australian Bureau of Statistics

Australian Government Department of Health and Aged Care (2021). Physical activity and exercise guidelines for all Australians – for older Australians (65 years and over). Available from: https://www.health.gov.au/topics/physical-activity-and-exercise/physical-activity-and-exercise-guidelines-for-all-australians/for-older-australians-65-years-and-over

Australian Institute of Health and Welfare (2017a). Impact of overweight and obesity as a risk factor for chronic conditions: Australian Burden of Disease Study. Australian Burden of Disease Study series no.11, cat. no. BOD 12. BOD, AIHW, Canberra. Available from: https://www.aihw.gov.au/reports/burden-of-disease/impact-of-overweight-and-obesity-as-a-risk-factor/summary

Australian Institute of Health and Welfare (2017b). Mental health services – in brief 2017, cat. no. HSE 192, AIHW, Canberra. Accessed: 9 September 2019. Available at: https://www.aihw.gov.au/reports/mental-health-services/mental-health-services-in-brief-2017/contents/table-of-contents

Australian Institute of Health and Welfare (2017c). National Drug Strategy Household Survey 2016: detailed findings. Drug statistics series no. 31, cat. no. PHE 214, AIHW, Canberra. Available from: https://www.aihw.gov.au/getmedia/15db8c15-7062-4cde-bfa4-3c2079f30af3/21028a.pdf.aspx?inline=true

Australian Institute of Health and Welfare (2018). Australia's Health 2018, cat. no. AUS 221, AIHW, Canberra. Available from: https://www.aihw.gov.au/reports/australias-health/australias-health-2018/contents/table-of-contents

Australian Institute of Health and Welfare (2024). Built Environment and Health. Available from: Built environment and health - Australian Institute of Health and Welfare

Australian Institute of Health and Welfare (2024a). Australian Burden of Disease Study 2024. Available from: https://www.aihw.gov.au/reports/burden-of-disease/australian-burden-of-disease-study-2024

City of Rockingham Health and Wellbeing Strategy 2024-2029 [August 2024]

Cole TJ, Bellizzi MC, Flegal KM, Dietz HW (2000). Establishing a standard definition for child overweight and obesity worldwide: international survey. BMJ 320(7244): 1240–43. Available from: https://doi.org/10.1136/bmj.320.7244.1240

Department of Health and Aged Care Australian Government (2014). Physical activity and sedentary behaviour guidelines – adults (18–64 years) – fact sheet. Available from: https://www.health.gov.au/resources/publications/physical-activity-and-sedentary-behaviour-guidelines-adults-18-to-64-years-fact-sheet

Department of Health and Aged Care Australian Government (2019). Australian 24-Hour Movement Guidelines for Children (5 to 12 years) and Young People (13 to 17 years): an integration of physical activity, sedentary behaviour, and sleep. Available from: https://www.health.gov.au/resources/publications/24-hour-movement-guidelines-children-and-young-people-5-to-17-years-brochure

Department of Sport and Recreation (2016). Sport and Recreation and Public Health. Available from: sport-and-recreation-and-public-health.pdf

Epidemiology Directorate. Health and Wellbeing Profile: City of Rockingham. WA Department of Health: Perth [January 2026]

Healthy People 2030. Officer of the Assistant Secretary for Health. Available from: https://www.odphp.health.au

National Health and Medical Research Council (2009). Australian guidelines to reduce health risks from drinking alcohol. NHMRC, Canberra. Available from: https://aci.health.nsw.gov.au/__data/assets/pdf_file/0014/212153/NHMRC-Alcohol-guidelines.pdf

National Health and Medical Research Council: Australian Dietary Guidelines 2013. Available from: https://www.nhmrc.gov.au/guidelines-publications/n55

World Health Organisation (2009). Global health risks: mortality and burden of disease attributable to selected major risks. WHO, Geneva, Switzerland. Available from: https://www.who.int/publications/i/item/9789241563871

World Health Organization. World Mental Health Report: Transforming Mental Health for all. 16 June 2022. Available from: World mental health report: Transforming mental health for all