

PORT AUGUSTA CITY COUNCIL
**REGIONAL PUBLIC
HEALTH PLAN**
2020/2025



PortAugusta
CITY COUNCIL



Message from the Mayor

Being part of a community can have a positive effect on mental health and emotional wellbeing. Community involvement provides a sense of belonging and social connectedness. It can also offer extra meaning and purpose to everyday life.

Communities can exist or be created from a shared location, hobbies, lived experiences and backgrounds, or a common cause. For many people, communicating with others – through online forums, workshops, community and sporting groups and social groups, can help them to have a healthier mindset and enjoy life.

The following Regional Public Health Plan will help guide Port Augusta City Council's decision making over the next five years and will aim to build relationships with key stakeholders in the region. Council along with stakeholders aim to promote conditions, which allow healthy living and increase wellbeing.

A handwritten signature in black ink that reads "Brett Benbow". The script is cursive and fluid, with the first name "Brett" and last name "Benbow" clearly distinguishable.

Mayor Brett Benbow
Port Augusta City Council



Table of Contents

1	About the plan	5
1.1	Introduction	5
1.2	Legislative context	6
1.3	What is public health?	7
1.4	Factors affecting public health	8
1.5	Council's role in public health	9
2	A Snapshot of our region	11
3	Assessment of Public Health	13
3.1	Port Augusta Region Health	13
3.2	Priority Populations	15
4	Priority Areas	17
4.1	Healthy lifestyle choices	17
4.2	Community, culture and support networks	20
4.3	Maintaining and improving public health programs	23
4.4	Economic growth and prosperity	25
5	Review and Reporting Requirements	27
6	References	29

The background of the slide features silhouettes of two runners against a sunset sky. The runner on the left is in mid-stride, with their right leg forward and arms pumping. The runner on the right is partially visible, wearing a cap and holding a water bottle. The sky transitions from a deep blue at the top to a bright orange near the horizon, where a body of water is visible. A decorative graphic of three white concentric arcs is positioned on the left side, partially overlapping the orange text box.

The plan will help guide council's decision making over the next five years and aims to build relationships with key stakeholders in the region.

About the Plan

1.1 Introduction

Port Augusta City Council is committed to the continued support of the community's health and wellbeing through new and existing public health measures as the public health authority for the region.

This plan aims to improve the wellbeing and health of all members of the Port Augusta community regardless of gender, race, age, culture or faith. Everyone deserves the chance to live in a healthy and vibrant community.

The plan will help guide council's decision making over the next five years and aims to build relationships with key stakeholders in the region. Council along with stakeholder assistance aims to promote conditions, which allow healthy living and increase wellbeing. Councils have traditionally made contributions to the public health of communities through immunisation programs, food premise inspections, environmental health regulations, wastewater regulations and building and planning standards.

1.2 Legislative Context

The South Australian Public Health Act 2011 (the Act) aims 'to promote health and well-being of individuals and communities and to prevent disease, medical conditions, injury and disability through a public health approach'. The Act requires public health plans to be formed across all level of government including local and state governments. Local governments are required to formulate Regional Public Health Plans (RPHP) for their individual areas as they are recognised as the public health authority for their area. This reflects the view that councils are best placed to recognise the needs and issues facing their local community.

The State Public Health Plan (SPHP) provides a framework and strategic direction for public health planning and action within South Australia. This acts as a framework for local government public health planning to address key public health issues.

The four public Health priority areas for 2019-2024 as identified in the SPHP are:

- **Promote:** Build stronger communities and healthier environments.
- **Protect:** Protect against public and environmental health risks and respond to climate change.
- **Prevent:** Prevent chronic disease and communicable disease and injury.
- **Progress:** Strengthen the systems that support public health and well-being.

The Port Augusta RPHP aims to build upon these priority areas, however a more detailed set of strategies will be formulated to accurately reflect the needs of the local community.

1.3 What is Public Health?

The act defines public health as “the health of individuals in the context of the wider health of the community”. Public health planning aims to:

- (a) Protect, maintain or promote the health of the community at large, including where 1 or more persons may be the focus of any safeguards, action or response; or

- (b) Prevent or reduce the incidence of disease, injury or disability within the community.
- Public health has an impact on people’s lives every day, helping to improve the health and wellbeing of the community. Public health is designed to minimize and prevent issues before they cause harm, promoting healthy choices and prolonging life. Examples of major public health achievements include vaccines, addition of chlorine and fluoride to drinking water, tobacco control, motor-vehicle safety, control of infectious diseases, maternal health and family planning and the management of wastewater. Figure 1 shows examples of public health that affect our everyday lives.



Figure 1: Examples of Public Health

Source: SA Health

1.4 Factors Affecting Public Health

Numerous factors work together to affect the health of individuals and communities. Individual lifestyle choices have a considerable impact on a person's health; however socio-economic, cultural and environmental conditions all have a significant effect as shown by figure 2. Factors influencing a person's health reach far beyond their access and use of healthcare services. Where we live, the state of our environment, genetics, income levels, education and relationships with friends and family all impact a person's level of health¹⁰.

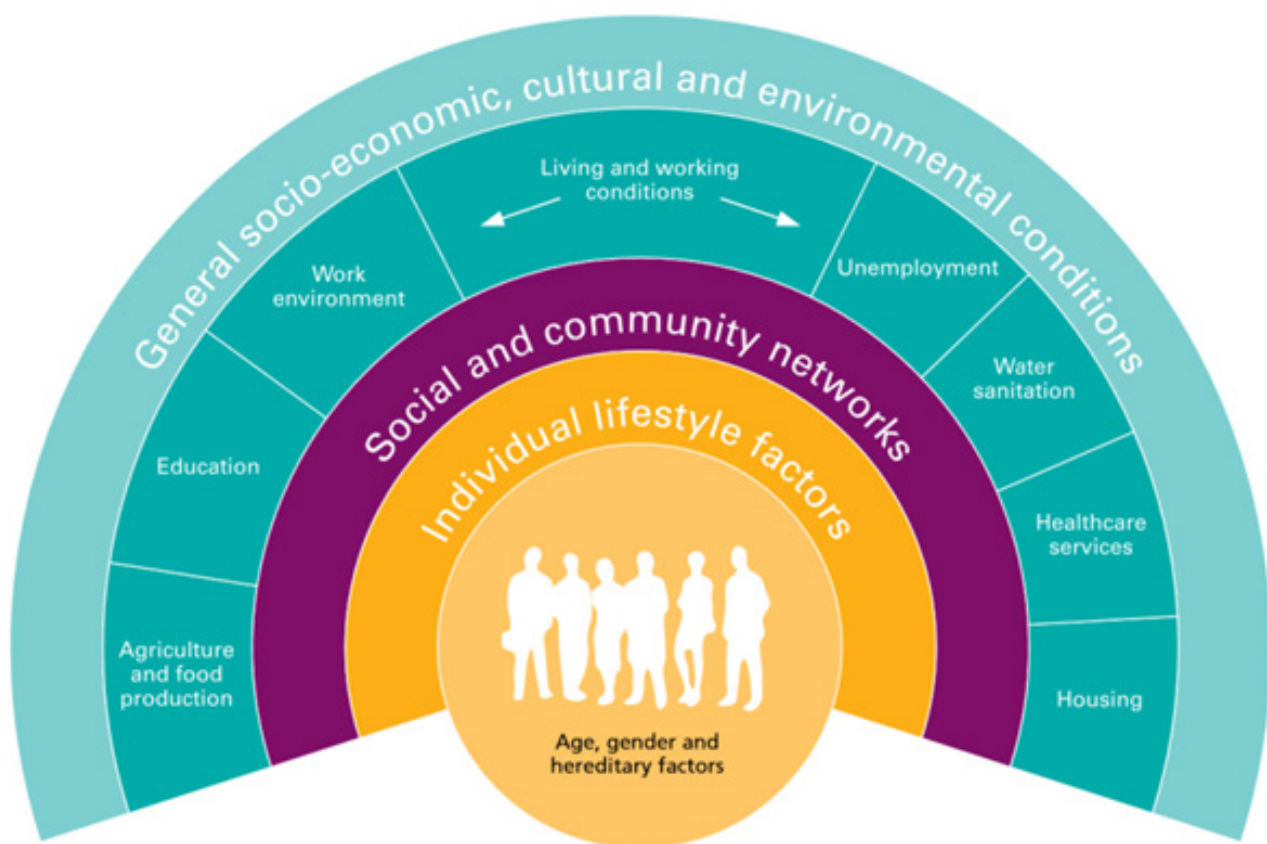


Figure 2: Determinants of Health Source: SA Health

1.5 Council's Role in Public Health

The council plays a key role in helping to improve the health of the Port Augusta community. The Council, State and Federal governments and key stakeholders work together to improve health outcomes within the community. Examples of public health initiatives undertaken by the Port Augusta City Council include:

- Community groups
- Food business inspections
- Library
- Public pool inspections
- Wastewater management
- Immunisation services
- Parks and gardens
- Playgrounds and skate parks
- Recreational facilities
- Sports grounds
- City planning
- Footpaths
- Walking / cycling trails
- Hairdressing and beauty clinic inspections
- Volunteering programs
- Community events
- Climate planning
- Childcare Services
- Mobile Assistance Patrols (MAPS)
- Substance Misuse Services
- Community buildings



14,102
population
(ABS 2018)

6.7%

population born overseas
(ABS 2016)

38.9
years
median
age



18.3%
Indigenous
population

+50

programs/
services
run by
Council

623
local
businesses

3.1%

of residents have
attended university

0.15

persons
per hectare

190

council
staff
(headcount)



+32km of
stormwater
pipework



+125km
of paths

\$737.45
million

Gross Regional
Product (GRP)

3.7%

mortgage
stress

2,291

small scale
solar system
installations

+410km
of roads



7,802
rateable
properties

A Snapshot of our Region

Port Augusta is situated at the northern extremity of the Spencer Gulf with the iconic Flinders Ranges to the east of town. The Port Augusta City Council area includes the coastal settlements of Miranda, Blanche Harbor and Commissariat Point, Stirling North and Port Augusta. The region covers an area of 1153km². The Port Augusta region maintains its connection to the outback and is the major service center for numerous smaller settlements north and east of Port Augusta. The majority of commercial premises in the area are located within Port Augusta, particularly in the CBD and along the highway. Port Augusta Local Government Area has a population of 14,275 ¹⁷. The region's population includes a significant indigenous population, which makes up 22.6% of the area's population¹⁷. Many tourists visit the region each year, attracted to the town's proximity to the iconic Flinders Ranges, the Pichi Richi Railway, Australian Arid Lands Botanic Gardens, the Wadlata Outback Centre and the Spencer Gulf.

Workforce and Economy

Occupation	Percentage of workforce
Community and Personal Service Workers	17.1
Professionals	14.7
Technicians and Trades Workers	13.6
Clerical and Administrative Workers	12.3
Labourers	11.9
Sales Workers	10.4
Machinery Operators and Drivers	9.4
Managers	8.6

Table 1: Port Augusta Workforce

Source: Public Health Information Development Unit

Population Profile

The majority of Port Augusta's residents were born in Australia or other English speaking countries with just 3.7% of the region's population born in predominately non-English speaking countries¹⁷. The largest sources of migrants from non-English speaking countries in South Australia were China, India and Italy. In Port Augusta the biggest source countries for people born in non-English speaking countries were India (0.7%), Germany (0.4%) and Italy (0.3%). Only 0.3% of Port Augusta's residents reported poor proficiency in English, which is half the level of regional SA (0.6%). Migrants living in the Port Augusta region typically arrive via skill stream visas and family stream visas. Migrants arriving under the skill stream make up 1.1% of the region's population and family stream migrants make up 0.5% of the region's population.

The age structure of Port Augusta is considerably different compared to the regional SA average. The major differences include a higher proportion of children, people aged 20-39 and fewer people aged over 55 as shown in figure 3.

The age structure between indigenous and non-indigenous residents varied significantly. The indigenous population has a higher percentage of children, youths and young adults, when compared to the non-indigenous population (figure 3). Non-indigenous populations had greater percentage of people aged over 45 with the most noticeable difference occurring in the 65+ age group (figure 3).

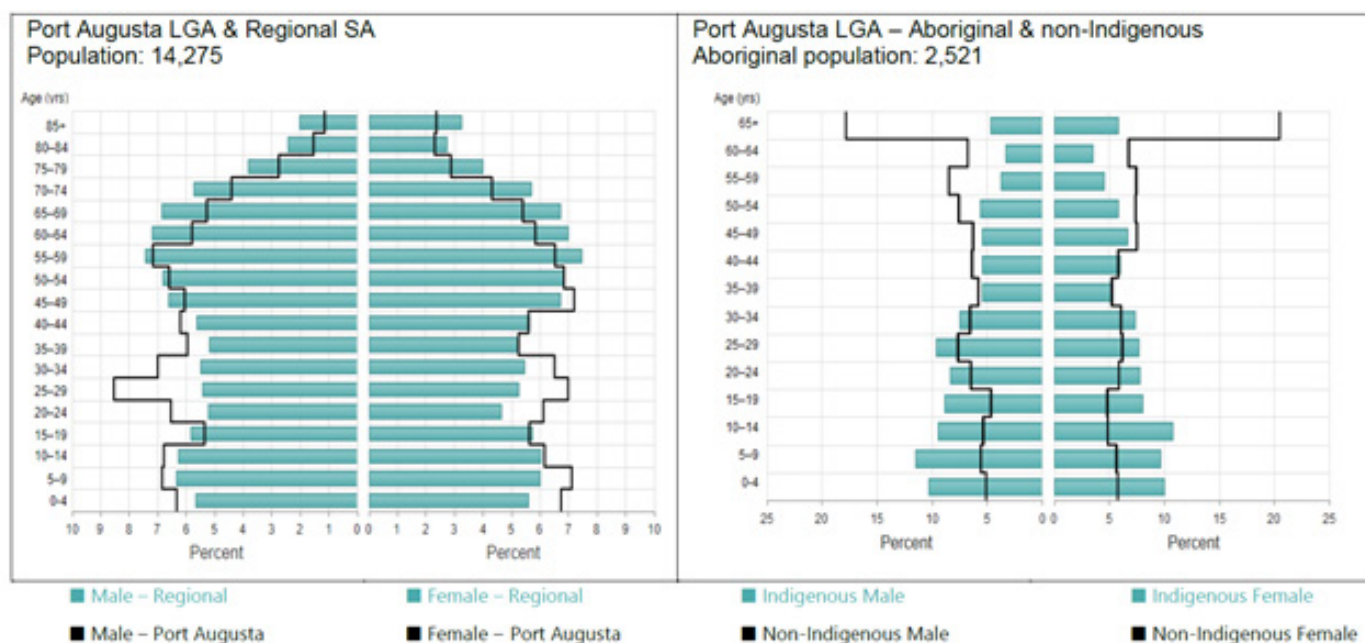


Figure 3: Age Profile of Port Augusta Local Government Region

Source: Public Health Information Development Unit

Natural and Built Environment

The Port Augusta City Council area contains 13 hectares of green space, over 40 recreational spaces and 125km of paths. These act as important recreational spaces for the community and allow residents to undertake fitness, sports and other activities.

Port Augusta's climate is arid, with hot summers and mild winters. Annual rainfall for Port Augusta is only 209.7mm⁶. Extreme heat and raised dust are common in the region and present a public health risk, particularly to those with inadequate shelter and limited access to air-conditioning.

Assessment of Public Health

3.1 Port Augusta Region Health

Compared to regional South Australia, the Port Augusta region is faring poorly in numerous key health statistics. This plan will be broken up into four key priority areas that aim to improve the health and wellbeing of the Port Augusta community.

Port Augusta RPHP Priority Areas:

1. Healthy Lifestyle Choices
2. Community, Culture and Support Networks
3. Maintaining and Improving Public Health Programs
4. Economic Growth and Prosperity

Table 1, below shows how the Regional Public Health Plan priority areas relate to other key strategies including the Port Augusta City Council Strategic Directions Plan and the South Australian Public Health Plan.

PACC RPHP Priority Area	PACC Strategic Directions 2019 - 2029 Theme	South Australia Public Health Plan Priority Area
Healthy Lifestyle Choices	Community	Prevent, Progress
Community, Culture and Support Networks	Community	Promote, Progress
Maintaining and Improving Public Health Programs	Environment, Community, Infrastructure	Protect, Prevent, Progress
Economic Growth and Prosperity	Economy, Infrastructure, Governance & Financial Sustainability.	Progress, Promote

Table 1: How the Regional Public Health Plan relates to other key strategies.

The background image shows a wide-angle shot of a sports field. In the foreground, several players in dark jerseys with red diagonal stripes are scattered across the green grass. A player in a bright green jersey is also visible. In the middle ground, a large, modern building with a dark facade and a large glass section on the right is visible. A sign on the building reads "CENTRAL". A group of people is standing near the entrance of the building. The sky is blue with scattered white clouds. On the left side of the image, there are three concentric white circles of increasing size, partially overlapping the orange text box.

The number of people receiving unemployment benefits is 42% higher in Port Augusta compared to the regional SA average.

3.2 Priority Populations

Within the Port Augusta community certain groups of the population face differing health outcomes compared to the community average. The plan aims to help reduce the inequalities faced by these groups. The groups selected are consistent with priority populations highlighted in the State Wellbeing Plan and the State Public Health Plan^{22,19}. The following priority populations have been identified as being at risk within the Port Augusta area:

People of Aboriginal and Torres Strait Islander background

Health outcomes between indigenous and non-indigenous Australian's are subject to a wide disparity⁴. Indigenous Australian's have lower life expectancy, higher levels of chronic disease and a lower age of chronic disease onset compared to non-indigenous Australians¹⁴.

Long term Unemployed

The number of people receiving unemployment benefits is 42% higher in Port Augusta compared to the regional SA average¹⁷. Unemployment is directly linked to poorer health outcomes in both mental and physical health¹⁶.

Youth Mental Health

Between 2011 and 2015 the death rate for people aged between 15 and 24 in Port Augusta was 36% higher than the average for regional SA¹⁷. The majority of deaths were potentially avoidable with the leading causes of death including suicide and land transport accidents. The percentage of young people earning or learning in Port Augusta in 2016 was 68.9%, significantly lower than the regional SA average of 80.3%¹⁷.

People with a Disability

People living with disabilities have lower levels of participation rates in various aspects of life⁷. Council plays an important role in ensuring people with disabilities can engage in the community by ensuring facilities and recreational activities have disability access.

Elderly Population

Elderly populations suffer from more health issues including chronic conditions, degenerative diseases and physical disabilities compared to younger people. The elderly are at a higher risk of social exclusion in our community²¹. It is essential to support the independence and wellness of the elderly population through key Council run community programs.

People who identify as LGBTIQ

The LGBTIQ community is at higher risk of substance abuse, sexually transmitted diseases, cancers, cardiovascular disease and obesity compared to the general population¹². LGBTIQ individuals also face higher levels of mental health issues including anxiety, depression and isolation often stemming from discrimination and harassment¹⁸.



Participating in physical activity can help to improve social connectedness and community networks.

Priority Areas

4.1 Healthy Lifestyle Choices

Healthy eating and regular physical activity is fundamental to a person's health and reduces the likelihood of obesity, improves mental health and reduces the instances of chronic disease. Promotion and education is essential to ensuring the public understand the benefits of a healthy lifestyle and understand the risks of cigarettes, alcohol and illegal substances.

Poor lifestyle choices including smoking, excessive alcohol consumption, lack of physical exercise and poor dietary habits are key contributors to preventable chronic conditions such as type two diabetes, hypertension, cardiovascular disease and several types of cancers⁸. Excess weight and obesity accounted for 7.0% of disease and injury burden in Australia in 2011³. 38% of cardiovascular disease and 53% of all diabetes diagnoses can be attributed to individuals being overweight and obese³.

Increasing physical activity has numerous benefits including decreased likelihood of chronic disease, increased energy and a reduction in stress, anxiety and depression. Participating in physical activity can help to improve social connectedness and community networks⁵. Physical activity can lead to safer communities, reduce the level of isolation in the community and leads to a better quality of life for individuals in the community⁵.

Council plays a key role in ensuring that the community has access to safe open spaces, footpaths and walking trails. This encourages community participation in exercise, sports and other recreational activities.

Objective

Promote healthy lifestyle options for all members of the community through education, community programs and physical environments that support healthy lifestyle activities.

Our Vision

Reduced levels of chronic disease and obesity in the community and increased healthy behaviors.

Key statistics:

- 69.6% of adults were physically inactive, slightly lower than the regional SA average of 73.2%.
- 20.1% of residents self-assessed their health as fair or poor compared to the regional SA average of 17.0%.
- 19.5% of residents smoke cigarettes compared to 18% in regional SA.
- 34.8% of males are obese compared to the regional SA average of 34.2%.
- 40.1% of females are obese compared to the regional SA average of 38.1%.
- 7.9% of male children are obese, higher than the regional SA average of 7.0%.
- 8.0% of female children are obese, higher than the regional SA average of 7.2%.
- 4.9% of the region's population has type 2 diabetes compared to the regional SA average of 4.7%.



Investigate further community open space opportunities to improve community participation in physical activity and sports.

Strategy	New, Existing, Redesigned	Performance Measures
1.1 Promote health resources and messaging through council platforms to a wide audience. Include information in relation to: <ul style="list-style-type: none"> • Healthy eating • Physical activity • Alcohol • Smoking • Chronic diseases 	New	Number of people in the community receiving communications
1.2 Continue to actively monitor Council imposed total dry zone and 'hot spots' to reduce the incidence of anti-social behavior and public drunkenness.	Redesigned	Reduction in public drunkenness and anti-social behavior.
1.3 Investigate further community open space opportunities to improve community participation in physical activity and sports.	New	Number of open space areas available for public utilisation.
1.4 Deliver and promote services and programs to at risk sectors of the community with a health focus.	Redesigned	Number of community programs accessible to priority population groups.
1.5 Continue use of a healthy eating policy to promote healthy food and drink choices at council owned and operated facilities.	Existing	Number of healthy options available at Council owned and operated facilities.
1.6 Plan and identify additional locations for walking and cycling paths around the region.	New	Number and length of walking and cycling paths in the region.
1.7 Promote healthy lifestyle information through council's social media channels.	New	Number of posts promoting healthy lifestyle information on council ran social media pages.
1.8 Continued participation in the Port Augusta Alcohol Management Group and provide ongoing support to achieve the strategies outlined in the Port Augusta Community Alcohol & Other Drugs Management Plan.	Redesigned	Number of strategies successfully implemented.

4.2 Community, Culture & Support Networks

Port Augusta is home to people from many diverse backgrounds and cultures. It is essential all members of the community feel connected and valued within their local community. The communities that we are a part of, have a major impact on our wellbeing and mental health.

Council supports community and culture by providing opportunities for people to connect to others within the community. Examples of this are the LG Riches Centre, volunteering programs, the library, Ryan Mitchell Swimming Pool, Yarta Purtli Cultural Centre and the Men's Shed. These spaces create a safe, welcoming environment and allow residents to create new social connections. Communities that have high levels of social cohesion and participate in programs run by community organisations, typically have better health outcomes than those with low levels of participation. Social cohesion has been recognised and is commonly used as a key strategy in better caring for the elderly⁹. It is essential that Council targets social programs at groups who may face higher levels of social isolation such as immigrants, people from different cultural backgrounds, the elderly and youths.

Port Augusta has a wide variety of open spaces, walking paths and green spaces for people to utilise and connect with nature. Green spaces including parks and reserves have been shown to have benefits for residents including decreased mental health issues, increased opportunities for social interaction and allow people to be more physically active¹³. Green spaces with shade can also provide some relief for community members without access to air conditioning during summer.

Objective

Create opportunities that promote and support social relations and support networks within the community.

Our Vision

A community where all members feel welcome and included regardless of their race, gender, sexuality or age.

Key statistics:

- Approximately 13.7% of the region's population had high levels of physiological distress, slightly higher than the regional SA average of 13.0%.
- An estimated 6.8% of the region's population disagreed / strongly disagreed with the acceptance of other cultures.
- The overwhelming majority (94.3%) of adults in the region were able to get support in times of crisis.
- 68.9% of dwellings in the region had someone who accessed the internet from home in some way, below the average level for regional SA (75.0%).
- Community mental health services usage was 49% higher in Port Augusta when compared to the regional SA average.

Strategy	New, Existing, Redesigned	Performance Measures
<p>2.1.1 Increase aboriginal heritage recognition in public spaces such as parks and reserves.</p> <p>2.1.2 Continue to acknowledge the traditional custodians of these lands and waters and fly the Aboriginal, Torres Strait Islander and Australian Flags in Gladstone Square.</p> <p>2.1.3 Incorporate Indigenous artworks into the bridge duplication site.</p>	<p>Redesigned</p> <p>Existing</p> <p>New</p>	<p>Number of parks / open spaces with Indigenous heritage incorporated.</p> <p>Flags flying in Gladstone Square.</p> <p>Project completed.</p>
2.2 Investigate further transport opportunities to the region, particularly increased commercial flights.	Redesigned	Number of commercial flights to the region.
2.3 Increased biodiversity in green spaces around the city to facilitate community wellbeing.	New	Number of species planted in green and open spaces in the region.
<p>2.4.1 Maintain or increase volunteering opportunities within council's functions.</p> <p>2.4.2 Promote and recognise volunteer contributions through council's communication channels.</p> <p>2.4.3 Acknowledge the contributions made by community members through their individual areas of excellence, through appropriate avenues such as Australia Day Awards, NAIDOC Awards, Hall of Fame, Anzac Day celebrations and other events.</p>	<p>New</p> <p>Existing</p> <p>Existing</p>	<p>Number of volunteering positions filled.</p> <p>Number of communications referring to volunteer contributions.</p> <p>Nominations for all awards received.</p>
2.5 Increase opportunities for community participation and engagement within all functions of council.	Redesigned	Number of ways the community can participate in council.
2.6 Continue operating and expand programs that support social connection for community members.	Existing	Number of community programs operated.
2.7 Encourage and support people of varying cultural backgrounds to strengthen workplace diversity.	Existing	Inclusive and supportive work environment.
2.8 Continue to promote and expand council's online presence to reach and engage with more of the community.	Redesigned	Number of people reached by social media presence.
2.9 Continue to develop the library as a key focus for learning, information provision and social connection to support self-development and access to services and support.	Existing	Number of people using the library.

2.10.1 Explore opportunities and programs aimed at youths to increase social opportunities.	New	Number of council programs catering for youths.
2.10.2 Provide services for young children, their parents and carers to support their self-development.	Existing	All programs used to capacity and meet accreditation standards.
2.11 Continue to support and promote festivals and events that contribute to a vibrant community.	Existing	Number of events supported and promoted by council per year.
2.12 Partnership with the State government to continue 'shared use agreements' for community access to school ovals and playgrounds during 'out of hours' periods.	Existing	Number of shared use agreements operating.
2.13 Continue footpath upgrade program to ensure access to safe and suitable walking paths around the city.	Existing	Length of footpaths upgraded.
2.14 Continue active involvement with the Aboriginal Community Engagement Group (ACEG) to ensure Council initiatives are having a positive impact on Aboriginal and Torres Strait Islander people living in the region.	Existing	Attendance at ACEG meetings.



4.3 Maintaining & Improving Public Health Programs

Council plays a major role in public health programs in the region. This is shared across numerous Council roles including environmental health, emergency management, planning and development, waste management, parks management and infrastructure. This is a multifaceted approach and includes regulatory enforcement, planning and education.

Council undertakes routine and complaint based regulatory health inspections of food businesses, hair and beauty premises and public swimming pools. Council oversees the maintenance and record keeping of cooling towers and warm water systems, which can be associated with legionella and other harmful bacteria. On-site wastewater system applications and the Community Wastewater Management System (CWMS) are also managed by Council.

Port Augusta City Council provides high school based immunisation services to adolescents in the region. This service is subcontracted and immunisations are performed as per the National Immunisation Program Schedule. The current rate of immunisation in the region at age 1 is 91.6% and 96.4% at age 5. The national immunisation target set by the Department of Health is 95%¹.

Waste management is overseen by Council to ensure sanitation and litter free environments are maintained, which are essential to public health. Council's waste management program aims to reduce landfill by using a three bin system to separate recyclables and green household matter. This ensures that as much waste as possible can be diverted from landfill and reused for other purposes.

Climate change will bring about new challenges for public health in the region. Port Augusta already faces numerous days of extreme heat each year, however this is expected to increase in number and severity in the future. By 2070 temperature increases of between 1°C and 4°C are predicted for southern Australia²⁰. This is also predicted to increase the number and intensity of bushfires²⁰. Rainfall across southern Australia is expected to decrease, however when it does rain the intensity is expected to increase. By 2070 rainfall is predicted to decrease between 10% and 40% in Southern Australia, with the biggest decreases occurring during the winter months²⁰. Council is committed to forward planning to mitigate the potential impacts of climate change on the region.

Objective

Deliver effective public health programs to the community to prevent illness and injury and prepare the community for the effects of climate change.

Our Vision

The region is protected from environmental health risks and is well prepared for climate change impacts.

Key statistics:

- Council conducted 96 routine and complaint based food business inspections in the 2019/20 financial year.
- Council processed 20 on-site wastewater applications in 2019/20.
- A total of 9 hair and beauty salons were inspected in 2019/20.
- Six public swimming pools were inspected to ensure safe and suitable water quality in 2019/20.

Strategy	New, Existing, Redesigned	Performance Measures
3.1 Promote awareness within the community through council communication channels on environmental health topics including: <ul style="list-style-type: none"> • Food Safety • Immunisations • Animal management • On-site wastewater requirements • Extreme heat events • Dust 	New	Number of people in the community receiving communications
3.2 Deliver environmental health regulatory services in accordance with frameworks for risk assessment, enforcement and inspection frequency. 3.2.1 Promote and maintain immunisation services offered to high school students in the region through a continued partnership with SA Health. 3.2.2 Continue to inspect all public swimming pools on a routine basis to ensure safe operating practices. 3.2.3 Continue role of education, enforcement and regulations of skin penetration, hairdressing and beauty businesses to reduce the incidents of infectious disease transmission. 3.2.4 Continue to undertake the requirements of the Legionella Regulations to reduce the risk of legionellosis. 3.2.5 Continue to undertake routine food safety inspections on local food businesses as per required frequencies. 3.2.6 Aim to improve food safety standards in the region through a multifaceted approach incorporating education, encouragement and enforcement.	Existing	Inspection frequencies met Percentage of high school students immunised. Pools inspected as per regulation guidelines. Number of business inspected per financial year. All warm water systems and cooling towers are inspected as per regulatory guidelines. Number of businesses inspected per financial year. Number of non-compliances observed.
3.3 Explore opportunities to implement a mosquito trapping program to gather further understanding of the threat posed by mosquito borne diseases in the region.	New	Implementation of a mosquito trapping program.
3.4 Investigate further training opportunities for food, skin penetration, and beauty businesses operating in the region. Consider a partnership with TAFE SA.	New	Number of easily accessible training providers in the local region.

4.4 Economic Growth & Prosperity

Economic conditions play a major role in a regions health and wellbeing. Although working can be associated with stress and mental health issues, in general it is better for your health than being unemployed. Employment, work conditions and social support are all highlighted as key determinants of health²³.

Long term unemployment has been linked to lower health outcomes particularly related to high levels of anxiety and higher incidence of depression¹⁵. Unemployed individuals have a higher risk of death and higher levels of disability and illness compared to employed individuals at a similar age². Being able to participate in quality work can provide an opportunity for social interaction and personal development instills a sense of identity and improves self-esteem². Levels of chronic disease are significantly higher among adults in the lowest socioeconomic group compared to those in the highest socioeconomic group. For example, people in the lowest economic group are 2.6 times more likely to have diabetes and 2.2 times more likely to suffer from coronary heart disease or stroke compared to the highest socioeconomic group².

Job security and stability typically increases health, wellbeing and job satisfaction¹¹. Economic outcomes in regional areas often go through cycles of boom and bust, particularly if the region is heavily dependent on a small number of key resources. For this reason it is essential to create a diverse workforce in the region.

Objective

Support health and wellbeing through a diverse workforce, strong industry sectors and increased numbers of local jobs to reduce unemployment in the community.

Our Vision

A prosperous community with a diverse workforce and a high number of jobs in the region.

Key Statistics:

- 12.2% of the region's population is receiving unemployment benefits compared to the regional SA average of 8.6%.
- 10.2% of young people in the region are receiving unemployment benefits compared to the regional SA average of 5.9%.
- The number of children in low income, welfare dependent families is 45.3% compared the regional SA average of 27.6%.
- 10.5% of the population are long term unemployed and have been receiving benefits for 6 months or more compared to a rate of 7.5% in regional SA.
- Rental stress is affecting 22.8% of residents compared to 26.7% in regional SA.
- 13.8% of residents are renting social housing compared to 6.1% of regional SA.
- The Index of Socio-economic Disadvantage (IRSD) score for Port Augusta is 889, which is below that of Regional SA (945). Scores below 1000 indicate relatively greater disadvantage.

Strategy	New, Existing, Redesigned	Performance Measures
4.1 Our region is widely recognised as a regional hub with increasing investment and strong industry sectors, a skilled workforce and local jobs.	Existing	Employment rate and workforce statistics.
4.2 Our City is known as a destination of choice where people come to stay awhile to experience our lifestyle and environment.	Existing	Number of tourists visiting the region per year.
4.3 We have positive relationships with other levels of government and partners that deliver great outcomes for the community.	Existing	Number of inter-agency partnerships.
4.4 We are in a surplus financial operating position.	Existing	Annual budgets
4.5 We have safe, accessible and well-utilised CBD, public spaces and built environments that reflect the priorities of our community.	Existing	Number of people utilising the CBD area.
4.6 Continue to promote and develop the Upper Spencer Gulf Region as a renewable power production hub.	Existing	Number of renewable projects established in the region.

Strategies in this section are taken directly from the Port Augusta City Council 2019- 2029 Strategic Directions Plan.

Review and Reporting Requirements

Port Augusta's RPHP will be monitored and reviewed to ensure the strategies are being implemented effectively. Any area's for improvement will also be noted and amended to ensure the best result is achieved. The act requires that council undertake a review of the RPHP biannually. In a reporting year this must be submitted to the Chief Public Health Officer on or before the 30th of September. This information will be shared with the Chief Public Health Officer and internally within council. Support from both SA Health and the Local Government Association in the form of reporting on public health and health statistics will allow for effective review of strategies. Council has the opportunity to amend the RPHP at any time; however it must be reviewed at least once every five years as a requirement of the act.





References

1. Australian Government Department of Health. 2020. Childhood Immunisation Coverage. [online] Available at: <<https://www.health.gov.au/health-topics/immunisation/childhood-immunisation-coverage>> [Accessed 4 June 2020].
2. Australian Institute of Health and Welfare, 2016. Australia's Health 2016. [online] Canberra: Australian Institute of Health and Welfare, pp.129-181. Available at: <<https://www.aihw.gov.au/getmedia/9844cefb-7745-4dd8-9ee2-f4d1c3d6a727/19787-AH16.pdf.aspx?inline=true>> [Accessed 24 July 2020].
3. Australian Institute of Health and Welfare, 2017. Impact Of Overweight And Obesity As A Risk Factor For Chronic Conditions. [online] Canberra: Australian Government, pp.31-34. Available at: <<https://www.aihw.gov.au/getmedia/f8618e51-c1c4-4dfb-85e0-54ea19500c91/20700.pdf.aspx?inline=true>> [Accessed 4 June 2020].
4. Australian Institute of Health and Welfare, 2018. Size And Sources Of The Indigenous Health Gap. Australia's health series no. 16. Canberra: Australian Government, pp.1-13.
5. Biggs, A. and Jolly, R., 2010. Improving The Health Of All Australians: The Role Of Preventative Health – Parliament Of Australia. [online] Parliament of Australia. Available at: <https://www.aph.gov.au/About_Parliament/Parliamentary_Departments/Parliamentary_Library/pubs/BriefingBook43p/preventativehealth> [Accessed 12 May 2020].
6. Bureau of Meteorology. 2020. Climate Statistics For Australian Locations. [online] Available at: <http://www.bom.gov.au/climate/averages/tables/cw_018201.shtml> [Accessed 5 May 2020].
7. Carroll, P., Witten, K., Calder-Dawe, O., Smith, M., Kearns, R., Asiasiga, L., Lin, J., Kayes, N. and Mavoa, S., 2018. Enabling participation for disabled young people: study protocol. BMC Public Health, 18(1).
8. Chan, Y., Teh, C., Lim, K., Lim, K., Yeo, P., Kee, C., Omar, M. and Ahmad, N., 2015. Lifestyle, chronic diseases and self-rated health among Malaysian adults: results from the 2011 National Health and Morbidity Survey (NHMS). BMC Public Health, 15(1).
9. Cramm, J. and Nieboer, A., 2015. Social cohesion and belonging predict the well-being of community-dwelling older people. BMC Geriatrics, 15(1).
10. Department for Health and Wellbeing, 2018. Promoting Healthier Neighbourhoods And Stronger Communities. [online] Department for Health and Wellbeing, pp.1-3. Available at: <https://www.sahealth.sa.gov.au/wps/wcm/connect/e44b4e25-9c48-42c4-aa58-d98e9234687d/Case+Studies_Promoting+healthier+neighbourhoods.pdf?MOD=AJPERES&CACHEID=ROOTWORKSPACE-e44b4e25-9c48-42c4-aa58-d98e9234687d-n5jr6QO> [Accessed 3 June 2020].
11. Fatimah, O., Noraishah, D., Nasir, R. and Khairuddin, R., 2012. Employment Security as Moderator on the Effect of Job Security on Worker's Job Satisfaction and Well Being. Asian Social Science, 8(9).
12. Hafeez, H., Zeshan, M., Tahir, M., Jahan, N. and Naveed, S., 2017. Health Care Disparities Among Lesbian, Gay, Bisexual, and Transgender Youth: A Literature Review. Cureus,.
13. Lee, A., Jordan, H. and Horsley, J., 2015. Value of urban green spaces in promoting healthy living and wellbeing: prospects for planning. Risk Management and Healthcare Policy, p.131.

14. Liaw, S., Lau, P., Pyett, P., Furler, J., Burchill, M., Rowley, K. and Kelaher, M., 2011. Successful chronic disease care for Aboriginal Australians requires cultural competence. *Australian and New Zealand Journal of Public Health*, 35(3), pp.238-248.
15. Linn, M., Sandifer, R. and Stein, S., 1985. Effects of unemployment on mental and physical health. *American Journal of Public Health*, 75(5), pp.502-506.
16. Pharr, J., Moonie, S. and Bungum, T., 2012. The Impact of Unemployment on Mental and Physical Health, Access to Health Care and Health Risk Behaviors. *ISRN Public Health*, 2012, pp.1-7.
17. Public Health Information Development Unit, 2019. Population Health Profile Port Augusta. Torrens University Australia, pp.1-61.
18. Robinson, KH, Bansel, P, Denson, N, Ovenden, G & Davies, C 2014, Growing Up Queer: Issues Facing Young Australians Who Are Gender Variant and Sexuality Diverse, Young and Well Cooperative Research Centre, Melbourne
19. SA Health, 2019. State Public Health Plan 2019- 2024. Adelaide: SA Health, pp.1- 52.
20. University of Western Australia, 2013. Climate Change Impacts And Adaptation In The Southern & Southwestern Flatlands Cluster: Review Of Existing Knowledge. Albany: University of Western Australia, pp.6-9.
21. Walsh, K., Scharf, T. and Keating, N., 2018. Correction to: Social exclusion of older persons: a scoping review and conceptual framework. *European Journal of Ageing*, 16(1), pp.129-129.
22. Wellbeing SA, 2020. Wellbeing SA Strategic Plan 2020–2025. [online] Adelaide: Wellbeing SA, pp.12-19. Available at: <<https://www.sahealth.sa.gov.au/wps/wcm/connect/337cc838-658a-48c2-b171-a6e05c2aeaad/20090.1+WellbeingSA-StrategicPlan-2020update-WEB.PDF?MOD=AJPERES&CACHEID=ROOTWORKSPACE-337cc838-658a-48c2-b171-a6e05c2aeaad-niPIUKI>> [Accessed 27 October 2020].
23. World Health Organisation, 2014. Social Determinants of Mental Health. [online] Geneva: World Health Organisation, pp.16- 21. Available at: <https://apps.who.int/iris/bitstream/handle/10665/112828/9789241506809_eng.pdf;jsessionid=43E5A2ED1567DF6E9242F2697318F4A2?sequence=1> [Accessed 24 July 2020].

