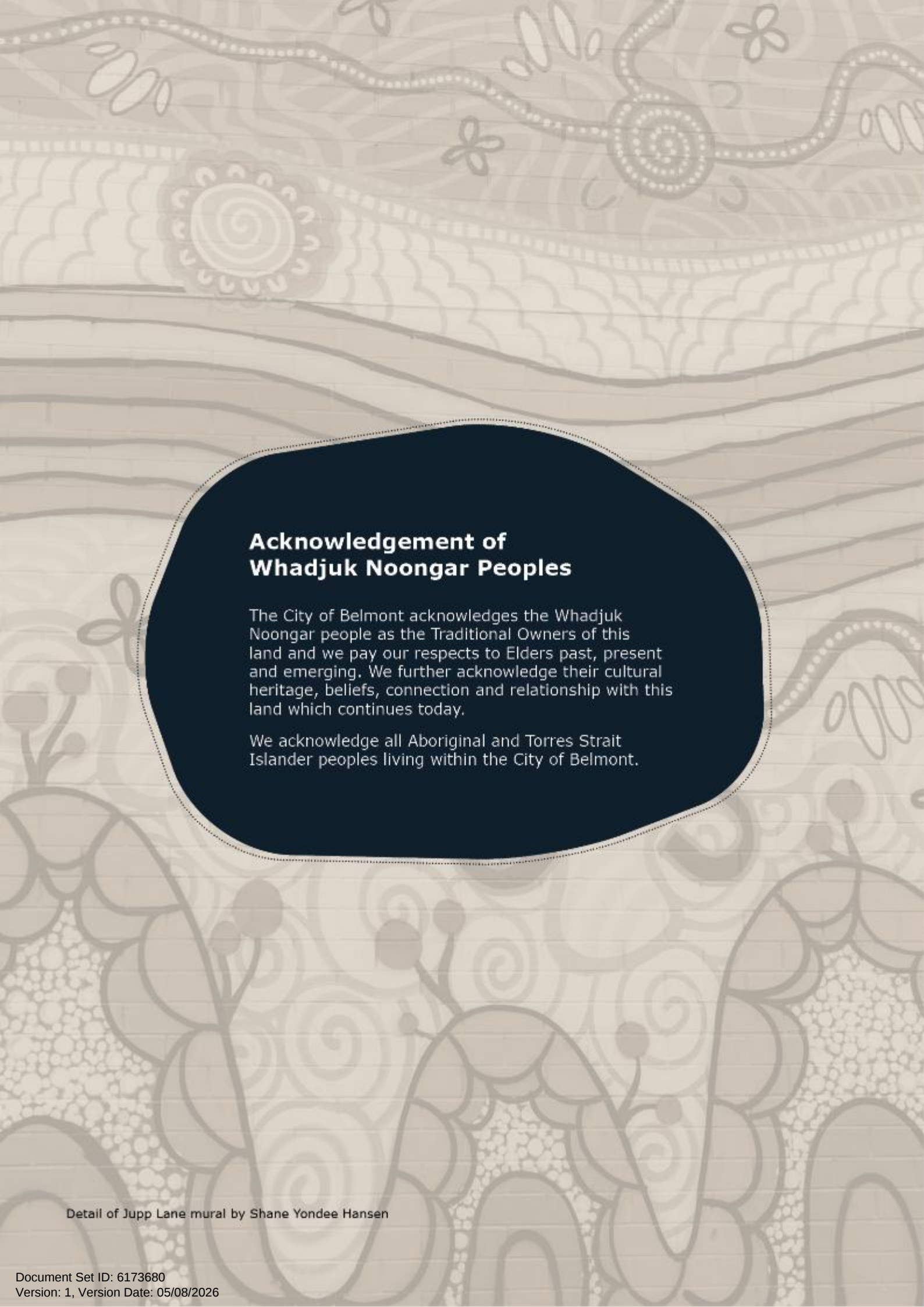


Public Health Plan 2026-2031





Acknowledgement of Whadjuk Noongar Peoples

The City of Belmont acknowledges the Whadjuk Noongar people as the Traditional Owners of this land and we pay our respects to Elders past, present and emerging. We further acknowledge their cultural heritage, beliefs, connection and relationship with this land which continues today.

We acknowledge all Aboriginal and Torres Strait Islander peoples living within the City of Belmont.

Executive summary

The City of Belmont is the City of Opportunity. It is a diverse community with a mix of residential, commercial, freight, logistical and industrial areas located and operating in relatively close proximity.

The City is located six kilometres east of the Perth CBD and covers 40 square kilometres. It includes the suburbs of Ascot, Belmont, Cloverdale, Kewdale, Redcliffe, and Rivervale, and much of the Perth Airport precinct and is situated on the banks of the Derbal Yerrigan (Swan River).

While the City is a major employer in the Perth metropolitan area with over 41,000 workers moving daily in and out of the City, it is also home to more than 47,377 residents.

To understand and address the public health needs of those who live, work and visit the City, we need to know its strengths, weaknesses and vulnerabilities. From this the City, as a local government, can assess and understand its priorities and build on current service provisions.

Using public health data and statistics the City's Demographic and Health & Wellbeing Profiles have been developed. These confirm that the City of Belmont is one of the most disadvantaged communities in the Perth metropolitan area.

Socioeconomic factors include poorer standards of housing, lower income, lower levels of educational attainment and unhealthy lifestyle choices (poor diet, smoking, risky levels of alcohol consumption and inactivity/lack of exercise). These have translated into similar or above State levels of health risk factors, chronic and preventable disease, injury and mental health conditions.

Many of these challenges are beyond the City's direct control however we are in a unique position to *Promote, Prevent, Protect and Enable* along with State and Federal governments, not for profit agencies, businesses and the community to achieve the best possible outcomes for all.

Community feedback has been positive and there is a clear desire amongst many to change their quality of life by addressing poor lifestyle choices. The community cannot on its own make all of the changes required and have asked the City for support in their health journey.

The City of Belmont Public Health Plan 2026 – 2031 considers and aligns with the *Objectives, Priorities, Action Areas and Guiding Principles* of the State Public Health Plan for Western Australia 2025 – 2030.

In doing so, the City's actions reflect the State's overarching public health strategies and supports many of the visionary goals and aspirations in the City's Strategic Community Plan 2024 – 2034 and the more practical actions and outcomes of the Corporate Business Plan 2026 – 2030.

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Alternative formats

This document is available on the City of Belmont website and can be requested in alternative formats including electronic format by email, in hardcopy both in large and standard print and in other formats as requested. For further information contact the City on 9477 7222.

For language assistance please contact TIS (Translating and Interpreting Service) on 131 450.

Introduction

What is Public Health?

Public health is the science of protecting and improving the health and wellbeing of individuals, groups and whole communities.

The health and wellbeing of individuals and communities is influenced by the broader environment as well as by pre-existing behaviours and genetic factors. These are known as *determinants of health* and include **social, cultural, political, commercial, economic and environmental factors**.

Early intervention and prevention are essential in breaking the cycle of sometimes life long and often intergenerational habits and behaviours that reduce quality of life and life expectancy. Establishing strong foundations for health and wellbeing is as important as supporting change at any stage of life.

This can be achieved by promoting healthy lifestyles, researching and addressing causes of chronic and preventative disease and injury prevention and detecting, preventing and responding to infectious disease.

Public health planning needs to be actioned at all levels of government and throughout all sectors of the community. Addressing these determinants needs effective and sustained collaboration and coordinated partnerships with communities.

The City of Belmont's Public Health Plan 2026 – 2031 (PHP) outlines how we will support and improve our community's journey to better health and wellbeing for all.



Plan purpose

The purpose of this plan is to deliver meaningful improvements in health, wellbeing, and living standards for all residents, workers, and visitors in the City of Belmont.

Part 5 of the *Public Health Act 2016* places statutory requirements on both State and Local Governments to produce and implement a new Public Health Plan every five years.

This plan is shaped by the unique needs and expectations of our local community and aligns closely with the objectives and priorities of the State Public Health Plan for Western Australia 2025–2030.

Strategic context

The PHP is an informing document under the City’s Integrated Planning and Reporting Framework. It works alongside the City’s Corporate Business Plan and aligns closely with the overarching State Public Health Plan for Western Australia 2025-2030

Key actions in this plan will be delivered through action plans that involve all City directorates, subject to the City’s annual budget process.



Strategic alignment

The Strategic Community Plan 2024-2034 outlines the City’s plans for the future with 5 key performance areas of People, Planet, Place, Prosperity, and Performance and 11 outcomes. Public health actions align with all 5 performance areas, all 11 desired outcomes and most of the objectives under the Strategic Community Plan.

Out of the 32 objectives in the Strategic Community Plan, 28 directly correlate to actions within this Public Health Plan, recognising that public health is influenced by a myriad of factors and local government has an important role to play in the health of our local communities.



Corporate Business Plan 2026 - 2030

People

Outcome 1. A safe, healthy community

Objective 1.2 Facilitate community health and wellbeing

Action 1.2.1 Develop a Public Health Plan

City strategies and plans

Many City strategies and plans support the PHP and the City's public health and community wellbeing outcomes. These documents are key pillars and drivers of change in the public health realm and are referenced throughout this plan.

Financially the City significantly invests in the health and well-being of the community providing a wide range of programs, activities, services and infrastructure to create a vibrant and safe community.

State Public Health Plan for Western Australia 2025 - 2030

The State Public Health Plan for Western Australia 2025 -2030 (State PHP) identifies two overarching objectives:

- Aboriginal health and wellbeing
- Equity and inclusion

These underpin the four main public health Objectives of Promote, Prevent, Protect and Enable and the associated Priorities and Guiding Principles.

This PHP aligns closely with the objectives and priorities of the State PHP to create a unified approach to public health planning, see table below.

State Public Health Objectives	City of Belmont five performance areas				
	People 	Planet 	Place 	Prosperity 	Performance 
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	•			•	•

Our community at a glance

Knowing who and what makes up our Belmont community help us understand its public health related strengths, weaknesses and vulnerabilities.



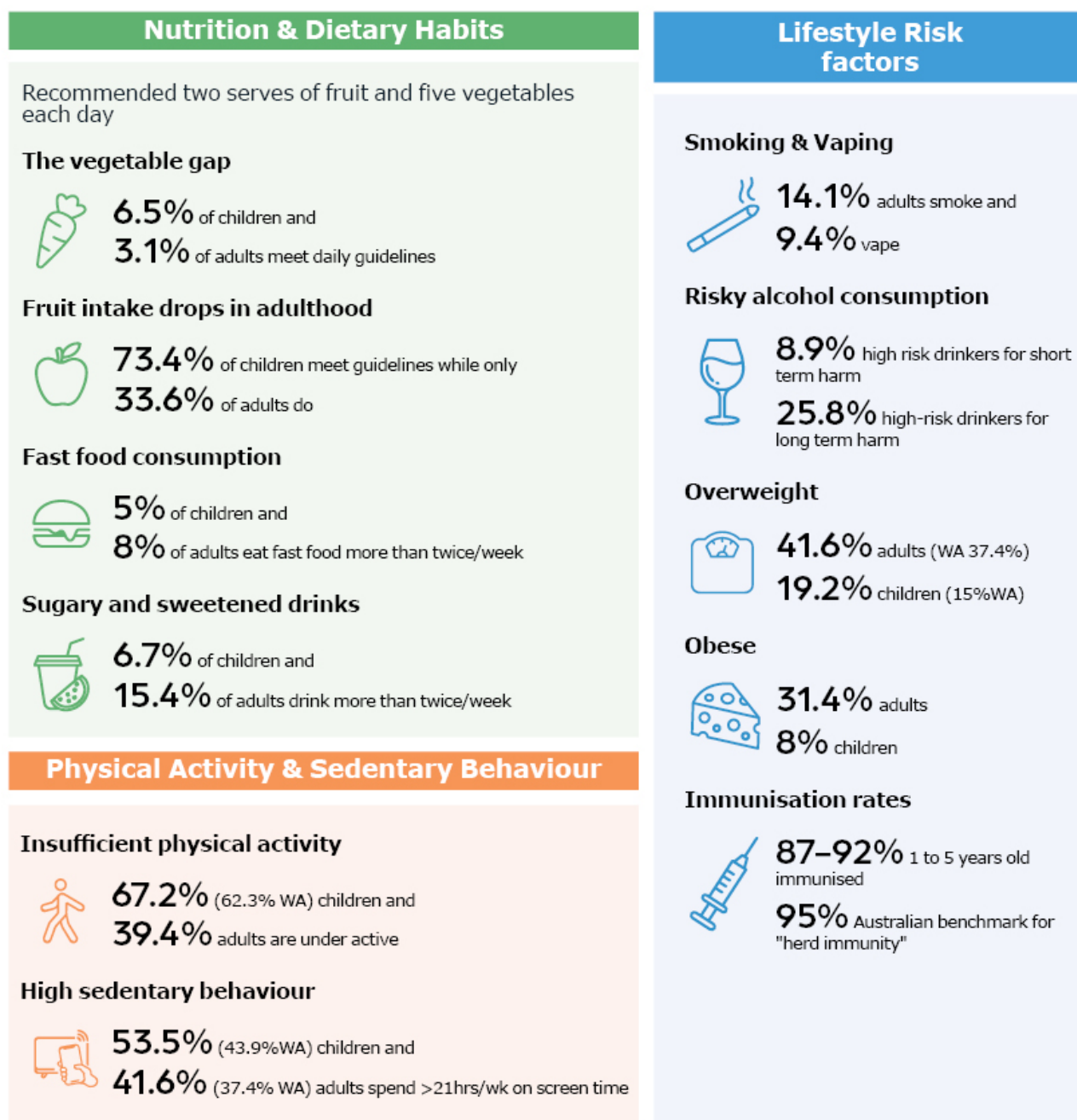
Demographics confirm that our community experiences significant socioeconomic disadvantage with the 3rd lowest SEIFA score in the Perth metropolitan area. Poorer standards of housing, higher levels of food insecurity, lower levels of educational attainment and lower paid employment contribute to this disadvantage.

More vulnerable groups experience day to day challenges due to disability, illness, communication (non-English speaking), ethnicity and age (both young and old).

Our health & wellbeing profile

Understanding how our community lives, works and plays provides insights into the key factors causing short- and long-term illnesses and reduced life expectancy.

Comparing nutritional and physical activity levels and lifestyle risk factors (those that are similar or exceeding West Australian (WA) averages) identifies community health priorities.



Our profile confirms that poor nutrition, insufficient exercise and high frequency of sedentary leisure time have resulted in above State average numbers of overweight and similar levels of obesity in children and adults. Smoking, vaping and risky alcohol consumption are comparable with State averages.

Mental Health



Anxiety **15.3%**
 Depression **12.4%**
 High or very high psychological distress **21.6%**
 Any mental health condition **22.1%**

Mental health and related conditions significantly impact many in the community. Past stigmas have reduced, resulting in those affected feeling more comfortable speaking out and asking for assistance.

Short Term Health Outcomes



Disease (per 100,000)

Sexually transmitted infections

746 Belmont (WA 600)

Vector borne (eg Ross River, Barmah Forest – mosquito)

8.5 (WA 21)

Vaccine preventable (eg measles, mumps, rubella, TB)

574 (WA 714)

Enteric (food and water borne)

192 (WA 218)

Blood borne (eg hepatitis B & C, HIV)

64 (44WA)



Injury related hospitalisations (per 100,000)

Accidental falls

1,396 (WA 1,031)

Accidental poisoning

84 (WA 52)

Intentional Self harm

112 (WA 106)

Assault and neglect

111 (WA 106)

Transport Accidents

207 (WA 236)

Accidental drowning, submersion, threats to breathing

24.5 (WA 21.8)

Injury in last year requiring treatment

25.6% children and
26.1% adults

Direct and indirect factors contribute to above State average levels of harm and injury resulting in hospitalisation. Many of these are preventable.

Long Term Health Outcomes



Top 5 Long term health conditions after mental illness

- Arthritis
- Asthma
- Diabetes
- Heart disease
- Cancer



Top 5 causes of death

- Coronary heart disease
- Dementia including Alzheimer's disease
- Cerebrovascular disease
- Lung cancer
- COPD (Chronic Obstructive Pulmonary disease)

Causes of avoidable hospitalisations & death (per 100,000)



Alcohol attributable

764 (WA 664) hospitalisation and
30 (WA 26) death



Illicit drug attributable

219 (WA 181) hospitalisation and
11 (WA 9) death



Tobacco

441 (WA 366) hospitalisation and
63 (WA 48) death

Similar or above State average levels of risk-taking behaviour, poor lifestyle choices and socioeconomic disadvantage combine to significantly impact on the health, well-being, quality of life and ultimately longevity of many in the community.

Community engagement

In 2025 the City worked with an independent research company to conduct Wellbeing Scorecard to better understand community context in relation to health and wellbeing indicators.

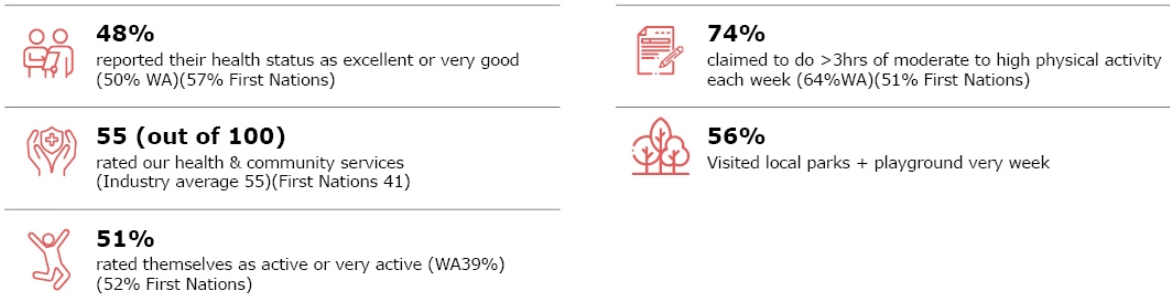
The MARKYT Wellbeing Scorecard was run for three weeks during August 2025 and 833 people participated.

It ran concurrently with a MARKYT Community Scorecard to better understand community priorities and satisfaction with City services and facilities and a MARKYT Business Scorecard that assessed satisfaction among local business owners.

The feedback provided through all three scorecards provides valuable information regarding the community’s public health needs and priorities.

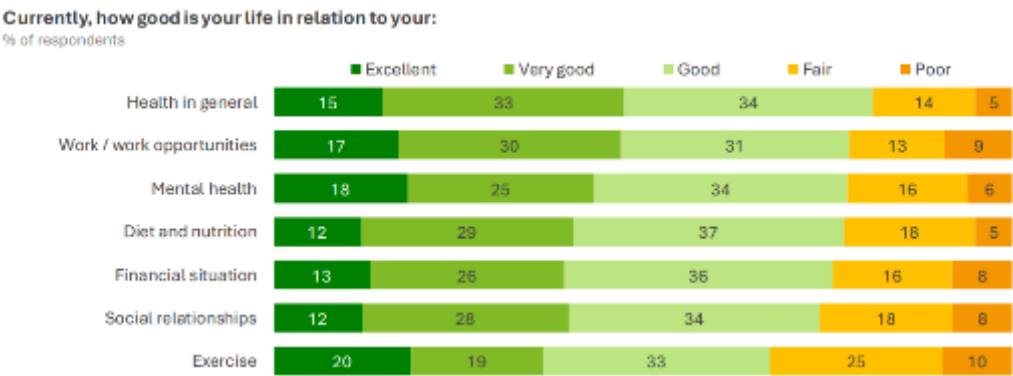
Feedback was also sought from the community during the development of the City’s many strategies and plans that support the Public Health Plan.

WELLBEING Scorecard data



The community was asked to self-assess 7 “quality of life” dimensions. Health in general rated the highest.

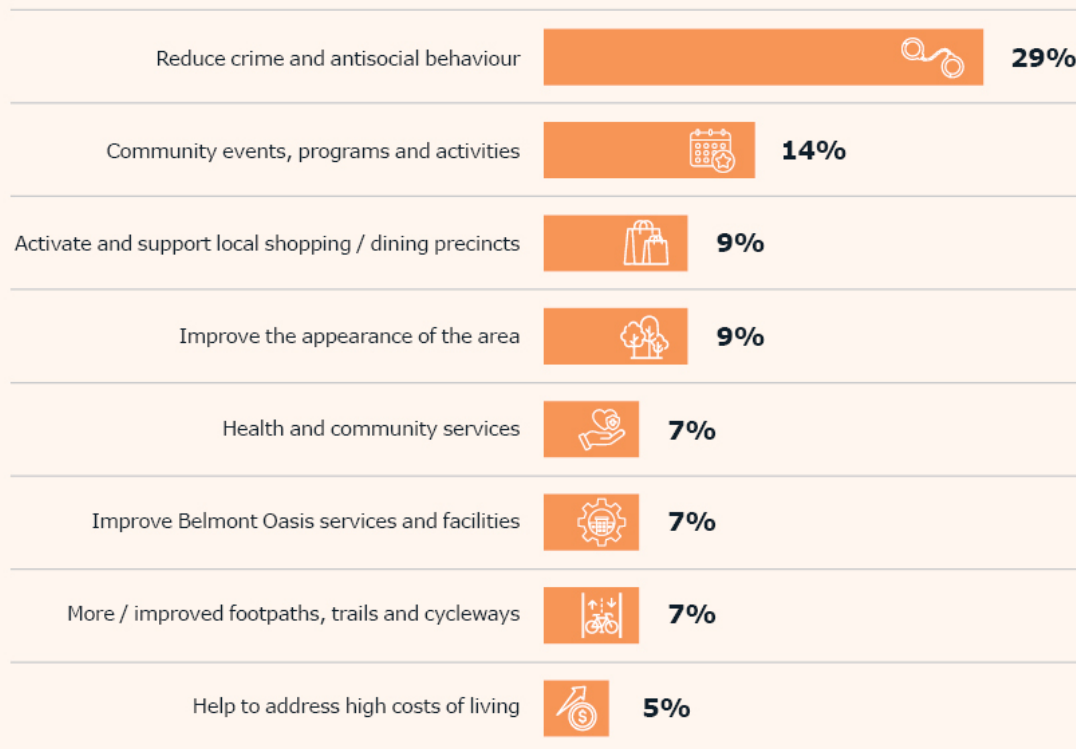
Quality of Life indicators



We then asked what the City could do to improve quality of life. Community feedback indicated they would like the City to focus on initiatives to reduce crime and anti-social behaviour.

There was also a desire for residents to be out in the community more through attending events and programs, activated and more attractive parks, streetscapes and precincts and improved foot and cycle paths.

What could be done with local services, facilities or programs to improve your quality of life? % of respondents



All of these elements contribute to improving social cohesion, better health and wellbeing, improved mental health and fitness and overall, a safer and more thriving community.

Focus areas

The State PHP has a Vision for “the best possible health, wellbeing and quality of life for **all Western Australians** – now and into the future with “**Aboriginal Health & Well Being**” and “**Equity & Inclusion**” integrated across the four State Health Plan Objectives.

Some community groups experience greater levels of isolation, dislocation and difficulty in accessing beneficial, health empowering services. Disadvantage can impact at an early age, with poor starts in life for children having cumulative effects during development years and potentially throughout life.

Inequity of service, bias, prejudice and discrimination can be reduced through better communications, programs and planning enabling more equitable access, health promotion and provision of services to all.

Residents from Culturally & Linguistically (CaLD) Diverse backgrounds, those living with social disadvantage, disability and mental illness, seniors and the LGBTIQ+SB community are particularly at risk, as are those experiencing Family and Domestic violence.

There are opportunities to improve the health and well-being of the more vulnerable through a range of strategies and plans that recognise this disadvantage and prioritises additional support and services.

They also raise this awareness in City staff to ensure equity and inclusion is considered in decision making processes.



Equity & Inclusion at work in our community



Harmony Festival



Pioneers Group



Harman Park – support & activities for the socially isolated, frail or with disability



Accessible spaces at Hub and Oasis

Aboriginal Health & Wellbeing

Demographics



626 households and (2.7%) 1,134 residents

Median age

27 years, 0-24 years (45.7%)

6.6% > 65 years old

46% households earn \$999 or less / week

Life expectancy

71.9 males (81.1 non-Indigenous) years

75.6 females (85.1 non-Indigenous) years

Lifestyle Risk factors



High risk drinking

18%



Smoking

26%

18% 5+ serves of veg/day

66% 2+ serves of fruit/day

51% moderate to high physical activity each week

85-90% Immunisation rates one to five-year-olds



Top 5 causes of death in First Nations community

- Coronary heart disease
- Diabetes
- COPD (Chronic Obstructive Pulmonary disease)
- Lung Cancer
- Suicide (2nd highest cause in First Nations males)

The Health gap: Socioeconomic disadvantage determinants including higher unemployment, lower educational achievement, lower income and poorer lifestyle choices.

This results in an **8 to 9 year lower life expectancy and 3.3 times higher avoidable mortality rate** than the non-indigenous population.

The City's Koort Karnadjil Mya (Heart Truth Voice) First Nations Strategy 2025 recognises and reflects the unique challenges faced by its First Nations community.

The Strategy's four key priority areas of "Respecting & Celebrating", "Empowerment, advocacy and partnerships", "Capacity building" and "Cultural safety" acknowledge First Nations culture and heritage, support First Nations right to lead and self-manage, build capacity to Close the Gap and enhance City cultural training and leadership.

The City's priorities and strategies reflect the State Health Plans Objectives of Promote, Prevent, Protect and Enable both directly and through normal service provisions.



Aboriginal Health & Well-being at work in our community



Celebrating First Nations culture - National Reconciliation Week, NAIDOC



Bilya Kard Boodja Lookout



Supporting and promoting key stakeholders and their services - Jacaranda Community Centre, Aboriginal Health Council of WA, Arche Health and the Derbarl Yerrigan Health Service



Listening and recognising - Aboriginal Advisory Group, NAIDOC Awards and Student Awards

Public Health Themes and Key Actions

The following four objectives reflect and align, at a local level, with the State Public Health Objectives of Promote, Prevent, Project and Enable.

The City's Actions and Desired Outcomes provide the higher-level intent of the plan with some highlighted community examples.

The City's Implementation Plan details the day to day public health related services, actions and activities currently in place and those proposed for the future.

Promote

Foster strong, connected communities and healthier environments.

State priorities	City actions	Responsible
Ensure public health risks are considered and addressed in planning and development policies and approval processes to facilitate healthy living and minimise impacts from public health hazards	1.1 Implement, promote, and advocate for the best planning, health and wellbeing outcomes in the community.	Director Development & Communities
	1.2 Enhance public open spaces, amenities and infrastructure that provide greener, safer, healthier and attractive environments and promote community pride, engagement and use.	Director Infrastructure Services
	1.3 Ensure local laws provide enforceable and practical management of community health and amenity issues.	Manager Safer Communities
Optimise mental health and wellbeing	1.4 Deliver City strategies that enhance quality of life, participation in arts and cultural activities and community connection for all community members.	Director Development & Communities
Improve health literacy by ensuring that accessible and appropriate health information is effectively communicated	1.5 Promote and support healthier lifestyle opportunities and services that encourage self-improvement.	Manager Economic and Community Development
	1.6 Support health related events that promote improved health opportunities.	Director Development and Communities

Desired outcomes

- A well-designed, safe and vibrant City
- Attractive and welcoming places that encourage improved physical and mental health for all ages, abilities and demographics
- Reduced environmental health related impacts and improved community safety and amenity
- People of all ages and abilities feel engaged and supported
- All tiers of government, groups and not for profits working together to improve community health and wellbeing for all

PROMOTE actions at work in our community



Enhanced public open spaces for all – Faulkner Park Precinct, Wilson Park, Centenary basketball half court and Belvidere Street (current) enhancements



Enhancing quality of life through arts, education and culture - Early development classes and Arts & Culture initiatives at Hub. Age Friendly, Multicultural, Access & Inclusion workshops and clubs. Youth engagement, Hub recording studio and Kidzfest



Promoting and supporting healthier lifestyle opportunities and services - CountUSin, nutrition classes and sleep health classes

Prevent

Reduce the burden of chronic disease, communicable disease and injury.

State priorities	City actions	Responsible
Initiatives to reduce harm from use of tobacco, vapes and drugs and consumption of alcohol	2.1 Reduce exposure to second hand smoke and implement programs reducing harm from tobacco, alcohol and drugs	Manager Economic and Community Development
Encourage and support healthy eating and active living to halt the rise in obesity	2.2 Provide spaces that enable and empower the community to engage in physical activity	Manager Parks, Leisure and Environment
	2.3 Improve community knowledge and understanding of the benefits from healthy food and activity choices.	Manager Economic and Community Development
	2.4 Inspire the community to embrace active living by providing diverse programmes, welcoming environments, infrastructure and services.	Director Infrastructure Services
Prevent injuries and promote safer communities.	2.5 Implement Health, Ranger and Building measures that minimise risk and potential impacts on the health and safety of the community	Manager Safer Communities
	2.6 Promote safer and more sustainable transport options	Manager Design, Assets & Development
	2.7 Deliver community safety crime prevention initiatives that support and empower the community	Manager Safer Communities
Immunisation program to prevent infectious disease.	2.8 Promote and support community immunisation	Manager Safer Communities

Desired outcomes

- Improved health outcomes from reduced levels of smoking, drinking and drug taking
- Increased active participation in lifelong learnings that maximise physical and mental health and improve longevity and quality of life
- A safer and healthier community
- A City that is easier to get around safely and sustainably

PREVENT actions at work in our community



Helping our community feel safe – Belmont Community Watch, Faulkner Park Precinct Officer, CCTV network, Community Safety Crime Prevention pop ups and Rangers Team of the Year



Reducing harm from the effects of smoking, vaping, alcohol and drug consumption – Smoke and alcohol-free events, dry July campaigns, No smoking areas around play areas and the Hub



Encouraging healthy eating and activities – Night lights in park, bike and scooter paths, food programs at Hub

Protect

Protect against public and environmental health risks, effectively manage emergencies, reduce impacts of disaster, and lessen the health impacts of climate change.

State priorities	City actions	Responsible
Manage the effects of climate change on people's health	3.1 Implement environmentally based response strategies to reduce waste and emissions, increase efficiencies and improve sustainability across the City.	Director Infrastructure Services
Provide sustainable disaster, emergency management and pandemic support across prevention, preparedness, response and recovery phases	3.2 Provide coordinated support to the community at times of emergency and disaster.	Manager Safer Communities
Reduce harm due to current and future health hazards including environmental, radiation, biosecurity risks and infectious disease	3.3 Implement mosquito management strategies to minimise disease.	Manager Safer Communities
	3.4 Address potentially harmful exposures to the community from environmental hazards and infectious disease.	Manager Safer Communities
Ensure access to safe food and water	3.5 Maintain food and water safety through ongoing inspection, monitoring and sampling programs.	Manager Safer Communities

Desired outcomes

- A safe, healthy community for all who live, work and visit.
- Healthy and sustainable ecosystems that are climate resilient and retain and / or enhance existing environments.
- A City that is ready and prepared to support the community in time of emergency, disaster and pandemic.

PROTECT actions at work in our community



Protecting & enhancing our environment - GOLD Waterwise Council Accreditation, Garvey Park foreshore and remnant bush restoration, and urban tree planting.



Reusing resources and reducing waste - FOGO and East Rockingham Waste to energy plant, Solar panels on Hub and Operations Centre



Protecting our community – Ranger bushfire and mosquito drone treatments. Supporting the Belmont / Town of Victoria Park State Emergency Service.



Enable

Bolster public health systems and workforce and leverage partnerships to support health and wellbeing

State priorities	City actions	Responsible
Enhance population health data, collection, management, analysis and reporting capacity. Foster research and innovation to improve our understanding of, and ability to address, public health issues.	4.1 Undertake ongoing review of available public health data to track trends and tailor strategies to improve City's community health and wellbeing service provision	Manager Economic & Community Development
Develop partnerships with key agencies and communities to enable the delivery of public health services.	4.2 Facilitate opportunities with key stakeholders that advance public health outcomes	Manager Economic & Community Development

Desired outcomes

- City plans and strategies that consider the principles and importance of public health.
- Stakeholders, groups, non for profits and businesses are engaged to achieve improved health outcomes for the whole community.

ENABLE actions at work in our community



Partnerships - East Metropolitan Health Services, Aboriginal service providers and Homeless support agencies



Communicating with the community – Catalyse surveys and community engagement

Delivery and reporting

The key actions identified in this PHP directly or indirectly reflect or align with the City's Strategic Community Plan and the State Public Health Plan for Western Australia's objectives, priorities, actions and guiding principles.

There is strong alignment between the actions identified in this plan and a range of City strategies, plans and documents, each having their own reporting requirements.

An operational implementation plan has been developed to track specific actions under this plan over the next 5 years. The Public Health Implementation Plan will be reported on against the City's Corporate Business Plan.

Externally the City will report annually to the WA Department of Health against the requirements of the *Public Health Act 2016* and review this Public Health Plan 2026-2031 on an annual basis. There is no legislative requirement to report on its implementation.

The Demographic, Health and Wellbeing profiles in this plan have been drawn from a range of historical and current epidemiological and community health indicators and measures. To ensure consistency the same parameters will be monitored on an ongoing basis to assess progress and level of success over time.

References

Linked strategies and plans

Strategic Community Plan 2024 - 2034

Corporate Business Plan 2026 - 2030

Access & Inclusion Plan 2022 – 2026

Active Recreation Strategy 2026-2031

Age Friendly Belmont Plan 2022 – 2027

Arts and Culture Strategy 2025 –2030

Asbestos Management Plan

Belmont on the Move 2017

Belmont Foreshore Precinct Plan

Canopy Plan 2019-2024

Community Infrastructure Plan 2022 -2040

Community Safety Strategy 2025 –2030

Early Years Program Youth Strategy 2019 and Beyond

Economic Development Strategy 2023 - 2028

Engagement Strategy 2023 & Beyond

Environment & Sustainability Strategy 2023 – 2033

Great Eastern Highway Urban Corridor Strategy

Koort Karnadjil (Heart Truth Voice) Mya First Nations Strategy

Local Emergency Management Arrangements – General & Recovery Plans
Local Planning Scheme No.15
Mosquito Management Plan 2026 - 2029
Multicultural Strategy 2020 and Beyond
Public Art Management Plan 2025 -2030
Public Open Space Strategy 2022 – 2040
Safer Communities Plan 2025 - 2028
Stormwater Management Plan
Streetscape Enhancement Plan 2022 -2027
Sustainable Transport Strategy 2026 – 2031
Urban Forest Strategy 2025 - 2030
Waste Plan 2020

Engagement reports

MARKYT Community Perceptions Scorecard 2025
MARKYT Business Perceptions Scorecard 2025
MARKYT Wellbeing Scorecard 2025

Other references

Australian Bureau of Statistics - Census
Australian Early Development Census
Australian Institute of Health and Welfare
Epidemiology Directorate, Public and Aboriginal Health Division, Department of Health WA

