

The 'here and now' for little kids and families in the Central Great Southern, 2022:

Situational analysis to inform local plans for the Early Years Initiative in the Central Great Southern

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1. Introduction

The regional community of Central Great Southern, comprising the four local government authorities (LGAs) of Broomehill-Tambellup, Gnowangerup, Katanning and Kojonup, was the first community to accept an invitation from the Western Australian State Government and the Minderoo Foundation to participate in the Early Years Initiative (EYI). The Central Great Southern is one of only four communities invited to participate in the EYI; the other three are Bidyadanga, Derby and a part of Armadale in Perth.

The ten-year EYI will run until 2028, and aims to co-design more effective ways to nurture the health, development and learning of children from conception to four years of age and to create lasting change.

The EYI is focused on very young children because the first 2000-days of life from conception to four years of age are vital in shaping each child's long-term health, learning, social and language skills, culture and identity. A solid start in this period before they start school lays the ground-work for children to become strong, proud grown-ups who have a good life.

While the EYI is focused on improving outcomes in early childhood, it recognises that children are raised by families who live within dynamic communities so it is intended that actions taken through the EYI will be holistic, culturally responsive and strengths-based. It is anticipated that through the EYI in coming years, insights will emerge about how the State Government and other organisations can better support families and young children in the four EYI partner communities, and that these insights can be applied at scale to other places in the future.

A key premise of the EYI is that people living and working in the four partner communities are best placed to understand local needs and strengths, and to decide what actions are most likely to work in the unique context of their community. To facilitate these decisions, Telethon Kids Institute – the EYI's Evidence Partner – has prepared this Situational Analysis Report for the Central Great Southern. It contains key data to outline the 'here and now' of children and families in this community with respect to key indicators which, according to research evidence, have a large impact on children's long-term health, development and learning and warrant close attention.

Four LGAs make up the EYI's Central Great Southern community so the data in this report are presented for each separate LGA (i.e.: Broomehill-Tambellup, Gnowangerup, Katanning and Kojonup) as well as for the Central Great Southern as a whole. In each case, the data are provided in two formats:

- 'Snapshots' which capture the 'big ticket' data items on one page
- Data tables which include comparisons at each line-item with the Western Australian average.

2. Comments on interpretation of the data

In the Snapshots and tables, the following abbreviations have been used:

- CGS Central Great Southern
- BT Broomehill-Tambellup
- Gn Gnowangerup
- Ka Katanning
- Ko Kojonup
- Albany SA3 Albany Statistical Area Level 3 (where data are not available at LGA level)



Australian Bureau of Statistics' (ABS) Census of Population and Housing data

• Most data provided from this five-yearly national Census are from the 2021 Census, however data on internet access is from the 2016 Census, as this information was not collected in the 2021 Census.

Australian Early Developmental Census (AEDC) data

- AEDC for Broomehill-Tambellup are 2015 figures 2018 and 2021 figures are not published due to small counts. 2021 AEDC reported for overall Central Great Southern exclude Broomehill-Tambellup for this reason.
- AEDC for Broomehill-Tambellup and Gnowangerup must be interpreted with care as the number of five-year-olds at each collection in these LGAs is less than 20. This means large percentage changes are to be expected between AEDC collections due to random chance. For example, the percentage of children on track on all five domains in Gnowangerup shows considerable fluctuation 41.4% in 2009, 78.6% in 2012, 31.6% in 2018 and 70.6% in 2021 (2015 results not published).

National Assessment Program for Literacy and Numeracy (NAPLAN) data

- NAPLAN results reporting the percentage of children who achieved at or above National Minimum Standards (NMS) were obtained from the Western Australian Department of Education website and are available only for Government schools. NAPLAN results for non-government schools are not routinely published and harder to access.
- Results are not published for some government schools where counts are small. For Broomehill-Tambellup, 2019 results are reported. For Gnowangerup, results are only for Gnowangerup District High School. For Katanning, results are for Katanning Primary School and Braeside Primary School only. For Kojonup results are for Kojonup District High School only.
- NAPLAN results must be interpreted with care as the number of Year 3 cohort each year is less than 30 children for all four LGAs.

School Attendance

• Attendance levels (the percentage of students from Year 1 to Year 10 who attended at least 90% of the time) are presented for both 2019 and 2021, as it appears that attendance levels for some schools were adversely affected by COVID-19 in 2021.

Socio-economic Index for Areas - Relative Socio-economic Disadvantage (SEIFA IRSD) data

The SIEFA-IRSD is calculated and published by the ABS using data the five-yearly Census. The SIEFA-IRSD indexes calculated from the 2021 Census have not yet been released, so those provided in this report are from the 2016 Census. This index is calculated for each individual LGA and cannot be aggregated to an overall Central Great Southern.

Child and Maternal Health data

Child and maternal health figures were largely sourced from the Western Australian Child Development Atlas
(CDA) and averaged over the four LGAs within the Central Great Southern. Counts of one to four inclusive
are suppressed within the CDA. Where small counts have been suppressed but the total population was
reported, lower and upper thresholds have been calculated by assuming the minimum (i.e., one) and
maximum (i.e., four) values respectively.



CENTRAL GREAT SOUTHERN DATA SNAPSHOT







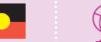




Number of children aged 0-4

Source: ABS (2016)

CHILDREN



FAMILIES

10.9% of children 0-4 are Aboriginal

Source: ABS (2016)

of children 0-4 are CALD

Source: ABS (2016)

Births per year to **Central Great Southern** residents

Source: ABS (2018)

CHILD HEALTH



7.3% - 7.8%

of babies had low birth weight (<2.500g) (WA average 6.5%)

Source: CDA (2018)

COMMUNITY



TOTAL POPULATION

8.495

Source: ABS (2016)

Index of relative socio-economic disdvantage



Varies from 907 to

997

which go from the lowest to the sixth decile

Source: ABS (2021)



39.7% with children

45.2% no children



Family make-up

13.5% one parent

1.8% other

Source: ABS (2016)

HOSPITALISATION RATES FOR 0-4 YEAR OLDS



Oral Disease related

1.4-2.6

per 100 persons (WA average 0.8)

Source: CDA (2018)



Respiratory Disease related

1.2-1.5 per 100 persons (WA average 0.8)

Source: CDA (2018)



Chronic Physical Illness

5.8-6.3

per 100 persons

(WA average 4.3)

Vaccination rates

89.5% of Albany SA3

children are fully immunised

at 2 years old

(WA average 91.4%)

Source: CDA (2018)

Emergency Dept presentations

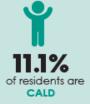
138.6 per 100 persons (WA average 70.7)

DIVERSITY



of residents are **Aboriginal**

Source: ABS (2016)



Source: ABS (2016)

MATERNAL HEALTH

17.4%

Families with children under 15

Source: ABS (2016)

of women smoked during pregnancy (WA average 7.9%)

Source: CDA (2018)



8.9%

of women drank alcohol during pregnancy

Source: Stork Perinatal Database (2019)



of women used drugs during pregnancy

Source: Stork Perinatal Database (2019)

of births were to

(WA average 10.2%)

Source: CDA (2018)

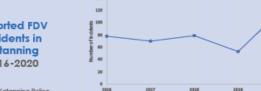
10.4%

mothers with a mental illness

Reported FDV Incidents in Katanning 2016-2020

Source: Katanning Police

FAMILY AND DOMESTIC VIOLENCE



6.0% - 7.0% of births were to women aged 15-19 (WA average 2.6%)

Source: CDA (2018)

3. Central Great Southern - overall

Item	Location	Location Value	WA Average	Comments			
Children							
% children 0-4 in sole parent family	CGS	15.0%	12.8%	See note 1			
% children 0-4 who don't speak English well or not at all	CGS	8.1%	9.0%				
Family make-up				See note 2			
Couple family with children	CGS	39.5%	44.6%				
Couple family no children	CGS	45.5%	46.5%				
One parent family	CGS	15.1%	15.1%				
Other family	CGS	1.2%	1.6%				
Child Health							
Child health figures and hospitalisation rates below have been sourced from the WA Child Development Atlas and averaged over all four LGAs within the CGS. Where small counts have been suppressed for some LGAs, ranges have been provided based on minimum							

and maximum values for those LGAs.

		· · · · , · · · · · · · · ·		
% babies with low birth weight	CGS	7.3 - 7.9%	6.5%	
% babies born pre-term	CGS	8.1%	8.6%	
	Albany			
% fully immunised at 2 years old	SA3	89.5%	91.4%	
0-4 yr old hospitalisations rates (per 100				
children aged 0-4 yrs)				
Ear and hearing	CGS	2.2 - 2.5	1.9	
Respiratory disease	CGS	1.2 - 1.6	8.0	Hospitalisation rates are the
Vaccine preventable diseases	CGS	0.0 - 0.3	0.2	number of hospitalisations per
Injury	CGS	0.7 - 2.9	2.3	100 children in the community

Maternal Health

Maternal health figures below have been sourced from the WA Child Development Atlas and averaged over all four LGAs within the CGS. Where small counts have been suppressed for some LGAs, ranges have been provided based on minimum and maximum values for those LGAs.

% births to women aged 15-19	CGS	6.0 - 7.0%	2.6%	See note 3
% women who smoked at any time during	ng			
pregnancy	CGS	17.4%	7.9%	See note 4
Children's Education				
		results for CGS exclude to	he Shire of	
Australian Early Development Census (A	,	ambellup as results for th		
2021	not ;	published due to small co	unts	See note 5
% children on track on all five domains	CGS	54.0%	57.9%	
% children vulnerable on one or more				For CGS (excluding
domains	CGS	27.0%	19.4%	Broomehill-Tambellup)
% children vulnerable on two or more				N=100
domains	CGS	16.0%	9.4%	
% students who attend school more tha	n 90%			See note 6
of time (Yr 1-10)				2021 attendance levels may
20.	<i>19</i> CGS	57 – 92%	NA	have been adversely affected
20.	21 CGS	33 - 92%	NA	by COVID-19
Year 3 NAPLAN results, 2021				
% achieving Reading benchmark	CGS	95%	96.0%	
% achieving Numeracy benchmark	CGS	91%	95.3%	See note 7
% homes with internet access*	CGS	73.5%	85.1%	

^{*} Internet access is from 2016 Census, as this information was not collected in the 2021 Census



Language	Figures l	below include people who s who only speak		nd another language plus people
% people who speak a language other than		who only speak	another fully u	age at nome
English at home	CGS	22.1%	19.4%	
Family functioning				
Income				See note 8
Time	-	for these vital resources an		
Human capital		d in publicly available data, the proposed survey of pa		
Psychological capital		for the EYI Evaluation	rene	
Social capital				
Community				
		Below figures don't a		
Highest level of school completed		100% due to not stated and rou		See note 9
% < Yr 10	CGS	12.4%	6.7%	Jee Hote J
% Yr 10	CGS	23.7%	19.2%	
% Yr 11	CGS	9.7%	8.8%	
% Yr 12	CGS	42.0%	58.0%	
Post-school qualifications	000	,,	00.070	See note 9
% Certificate/Diploma	CGS	25.2%	30.5%	
% Bachelors degree or higher	CGS	11.1%	23.8%	
% With a post-school qualification	CGS	50.0%	63.5%	
Socio-economic index	CGS			See note 10
SEIFA IRSD Score	CGS	907-997	NA	
Economy				
Workforce Participation	_			
% work Full Time	CGS	59.2%	57.1%	See note 11
% work Part Time	CGS	29.7%	32.0%	
% unemployed	CGS	4.1%	5.1%	
% temporarily away from work	CGS	6.9%	5.8%	
Parental employment				See note 11
% children 0-4 with at least one parent				
employed	CGS	82.7%	82.0%	
% children 0-4 with no parent employed	CGS	12.0%	10.2%	
Income				See note 11
% family households with income less than	666	= 40/	2.22/	
\$500 per week	CGS	5.1%	3.3%	
% family households with income \$500 to less than \$1,000 per week	CGS	18.1%	12.9%	
% family households with income \$3,000 or	CGS	10.170	12.570	
more per week	CGS	18.0%	30.1%	
more per week	CGS	18.0%	30.1%	



BROOMEHILL-TAMBELLUP LOCAL GOVERNMENT AREA **DATA SNAPSHOT**







CHILDREN



Source: ABS (2016)



of children 0-4 are Aboriginal

Source: ABS (2016)



of children 0-4 are CALD

Source: ABS (2016)

Births per year to **Broomehill-Tambellup** residents

Source: ABS (2018)

CHILD HEALTH



Babies with low birth weight (<2.500g) 1.3% - 5.4% (WA average 6.5%)

Source: CDA (2018)



TOTAL POPULATION

1.144

Source: ABS (2016)

Index of relative socio-economic disdvantage



Broomehill-Tambellup = 961

which is in the third decile

Source: ABS (2021)

FAMILIES

Families with children under 15

Source: ABS (2016)

Family make-up





2.8% no children



15.2% one parent

1.4% other

Source: ABS (2016)

HOSPITALISATION RATES FOR 0-4 YEAR OLDS



Ear and hearing related

1.6

per 100 persons (WA average 1.9)

Source: CDA (2018)



FAMILY AND DOMESTIC VIOLENCE

Respiratory related

1.6 per 100 persons (WA average 0.8)

Source: CDA (2018)

Vaccination rates

89.5% of Albany SA3

children are fully immunised

at 2 years old

(WA average 91.4%)

Chronic Physical Illness

per 100 persons (WA average 4.3)

Source: CDA (2018)



Emergency Dept presentations

per 100 persons (WA average 70.7)

DIVERSITY



of residents are **Aboriginal**

Source: ABS (2016)

of residents are CALD

Source: ABS (2016)

MATERNAL HEALTH



Women who smoked during pregnancy

Numbers too small to report (WA average 7.9%)

Source: CDA (2018)



Women who drank alcohol during pregnancy

Numbers too small to report

Source: Stork Perinatal Database



Women who used drugs during pregnancy

Numbers too small to report

Source: Stork Perinatal Database (2019)



Incidents

2016-2020

Numbers unavailable for Broomehill-Tambellup

Births to women aged 15-19 1.3% - 5.4%

(WA average 2.6%)

Source: CDA (2018)



Births to mothers with a mental illness

Numbers too small to report (WA average 10.2%)

Source: CDA (2018)

4. Broomehill-Tambellup

4. Diodiliciiii	-rambenup						
Item		Location	Location Value	WA Average	Comments		
Children							
% children 0-4 in sol	•	ВТ	6.1%	12.8%	See note 1		
% children 0-4 who	don't speak English						
well or not at all		ВТ	2.8%	9.0%			
Family make-up					See note 2		
Couple family with c	hildren	ВТ	37.2%	44.6%			
Couple family no chi	ldren	ВТ	46.2%	46.5%			
One parent family		ВТ	15.9%	15.1%			
Other family		ВТ	1.4%	1.6%			
Child Health							
	and hospitalisation rates bo ave been suppressed, rang						
% babies with low b	irth weight	ВТ	1.3 - 5.4%	6.5%			
% babies born pre-te	erm	ВТ	9.3%	8.6%			
		Albany					
% fully immunised a	t 2 years old	SA3	89.5%	91.4%			
0-4 yr old hospitalisa children aged 0-4 yr:							
Ear and hearing		ВТ	1.6	1.9	Hospitalisation rates		
Respiratory disease		ВТ	1.6	0.8	are the number of		
Vaccine preventable	diseases	ВТ	0.0 - 0.2	0.2	hospitalisations per 100 children in the		
Injury		ВТ	1.1 - 4.5	2.3	community		
Maternal Health							
Maternal health figur	Where small counts num values.	have been suppressed,					
% births to women a	aged 15-19	ВТ	1.3 - 5.4%	2.6%	See note 3		
% women who smol	ked during pregnancy	ВТ	n/a	7.9%	See note 4		
Children's Education	ı						
Australian Early Dev (AEDC) 2015	elopment Census	are reported f	*AEDC results for the Shire of Broomehill-Tambellup are reported for 2015, as 2018 and 2021 results for this Shire were not published due to small counts See note 5				
% children on track o	on all five domains	ВТ	57.9*	57.9%			
% children vulnerabl	le one or more				For Broomehill-		
domains		ВТ	26.3*	19.4%	Tambellup		
% children vulnerabl domains	le on two or more	ВТ	10.5*	9.4%	N=19		
% students who atte 90% of time (Yr 1-10	end school more than				See note 6		
Broomehill PS	., 2019	ВТ	81%	NA			
	2021	BT	92%	NA			
Tambellup PS	2019	BT	78%	NA			
	2021	BT	54%	NA			
		*NAPLAN Tambellup are	results for the Shire of E reported for 2019, as 2	Broomehill- 1021 results for			
Year 3 NAPLAN resu			ere not published due to		See note 7		
% achieving Reading		ВТ	100%*	96.0%	For Broomehill- Tambellup		
% achieving Numero	•	ВТ	100%*	95.3%	N=17		
% homes with interr	net access	ВТ	72.1%	85.1%			



Item	Location	Location Value	WA Average	Comments
	Figures below			ther language plus people
Language		who only speak (home	
% people who speak a language other than English at home	ВТ	14.7%	19.4%	
Family functioning				
Income				See note 8
Time		these vital resources and		
Human capital		publicly available data, e proposed survey of pa	•	
Psychological capital	for the EYI Evo		cit caregivers	
Social capital				
Community				
		Below figures dor 100% du		
Highest level of school completed		not stated and	rounding	See note 9
% < Yr 10	ВТ	9.9%	6.7%	
% Yr 10	ВТ	23.1%	19.2%	
% Yr 11	ВТ	9.8%	8.8%	
% Yr 12	ВТ	43.6%	58.0%	
Post-school qualifications				See note 9
% Certificate/Diploma	ВТ	25.6%	30.5%	
% Bachelors degree or higher	ВТ	11.9%	23.8%	
% With a post-school qualification	ВТ	52.8%	63.5%	
Socio-economic index				See note 10
SEIFA IRSD Score	ВТ	961	NA	LGAs ranked from
Percentile (within WA)	ВТ	29	NA	lowest score
Donals (southline 14/4)	ВТ	40	N. A.	(rank=1) to highest
Rank (within WA)		40	NA	score (rank=137)
Economy				
Workforce Participation	DT	FO 00/	F7.40/	C 11
% work Full Time	BT	59.9%	57.1%	See note 11
% work Part Time	BT	29.0%	32.0%	
% unemployed	BT	4.4%	5.1%	
% temporarily away from work	BT	5.8%	5.8%	Can make 11
Parental employment				See note 11
% children 0-4 with at least one parent employed	ВТ	89.8%	82.0%	
% children 0-4 with no parent employed	BT	6.1%	10.2%	
Income	ы	0.170	10.270	See note 11
% family households with income less				Jee note 11
than \$500 per week	ВТ	8.3%	3.3%	
% family households with income \$500 to less than \$1,000 per week	ВТ	16.2%	12.9%	
% family households with income \$3,000 or more per week	ВТ	18.1%	30.1%	



GNOWANGERUP LOCAL GOVERNMENT AREA







DATA SNAPSHOT



Source: ABS (2016)

CHILDREN

of children 0-4 are

Aboriginal

Source: ABS (2016)

of children 0-4 are CALD

Source: ABS (2016)

Births per year to Gnowangerup residents

18

Source: ABS (2018)

CHILD HEALTH



of babies had low birth weight (<2.500g) (WA average 6.5%)

Source: CDA (2018)



TOTAL POPULATION

1.215

Source: ABS (2016)

Index of relative socio-economic disdvantage



Gnowangerup = 996 which is in the

sixth decile

Source: ABS (2021)

FAMILIES

Family make-up



39.7% with children

44.0% no children



11.4% one parent

1.6% other

Source: ABS (2016)

HOSPITALISATION RATES FOR 0-4 YEAR OLDS



Oral Disease related

Numbers too small to report

(WA average 0.8 per 100 persons)



Vaccination rates

89.5% of Albany SA3

children are fully immunised

at 2 years old

(WA average 91.4%)

Chronic Physical Illness

Numbers too small to report

(WA average 4.3 per 100

Source: CDA (2018)



Respiratory related

0.3 - 1.5per 100 persons (WA average 0.8)

Source: CDA (2018)



Emergency Dept presentations

98.9 per 100 persons (WA average 70.7)

DIVERSITY



of residents are **Aboriginal**

Source: ABS (2016)

of residents are CALD

Source: ABS (2016)

MATERNAL HEALTH

10.7%

of women smoked during pregnancy

Families with children under 15

Source: ABS (2016)

(WA average 7.9%)

Source: CDA (2018)



Women who drank alcohol during pregnancy

Numbers too small to report

Source: Stork Perinatal Database



Women who used drugs

during pregnancy

Numbers too small to report

Source: Stork Perinatal Database (2019)

FAMILY AND DOMESTIC VIOLENCE

Reported FDV Incidents 2016-2020

Numbers unavailable for Gnowangerup

10.0%

of births were to women aged 15-19 (WA average 2.6%)



8.9%

of births were to

mothers with a mental illness (WA average 10.2%)

Source: CDA (2018)

5. Gnowangerup

J. Gilowanger	<u>up</u>				
Item		Location	Location Value	WA Average	Comments
Children					
% children 0-4 in sole pa	rent family	Gn	6.1%	12.8%	See note 1
% children 0-4 who don'	t speak English well or				
not at all			3.3%	9.0%	
Family make-up					See note 2
Couple family with chil	dren	Gn	42.9%	44.6%	
Couple family no childr	ren	Gn	42.9%	46.5%	
One parent family		Gn	7.8%	15.1%	
Other family		Gn	0.9%	1.6%	
Child Health					
	nd hospitalisation rates below we been suppressed, ranges l				
% babies with low birth	weight	Gn	9.0%	6.5%	
% babies born pre-term		Gn	7.0%	8.6%	
% fully immunised at 2 y	ears old	Albany SA3	89.5%	91.4%	
	ns rates (per 100 children	•			
aged 0-4 yrs)					
Ear and hearing		Gn	0.3 - 1.5	1.9	
Respiratory disease		Gn	0.3 - 1.5	0.8	Hospitalisation rates are
Vaccine preventable di	seases	Gn	0.1 - 0.8	0.2	the number of hospitalisations per 100
Injury		Gn	1.1 - 4.5	2.3	children in the community
Maternal Health					
Maternal health figure	s below have been sourced f				s have been suppressed,
	-	rovided based on	minimum and maximu		
% births to women aged		Gn	10.0%	2.6%	See note 3
% women who smoked a	at any time during	_			
pregnancy		Gn	10.7%	7.9%	See note 4
Children's Education	(4.77.2)				
Australian Early Develop 2021	ment Census (AEDC)				See note 5
% children on track on	all five domains	Gn	70.6%	57.9%	Fan Chausan namu
% children vulnerable o	on one or more domains	Gn	11.8%	19.4%	For Gnowangerup N=17
% children vulnerable d	on two or more domains	Gn	5.9%	9.4%	74-17
% students who attend s time (Yr 1-10)	school more than 90% of				See note 6
Gnowangerup DHS	2019	Gn	57%	NA	
<i>J</i> ,	2021	Gn	62%		2021 attendance levels
Borden PS	2019	Gn	75%	NA	may have been
	2021	Gn	38%		adversely affected by
Ongerup PS	2019	Gn	92%		COVID-19
- 9 1	2021	Gn	33%		
			NN results are provide	ed for	
			erup DHS only, as re	-	
Year 3 NAPLAN results, 2	2021	_	e for Borden PS or Or		See note 7
% achieving Reading b	enchmark	Gn	100%	96.0%	For Gnowangerup DHS
% achieving Numeracy	benchmark	Gn	100%	95.3%	N= 12
% homes with internet access		Gn	80.1%	85.1%	



Item	Location	Location Value	WA Average	Comments
				nother language plus people
Language		who only speak o	another language	at home
% people who speak a language other than	_	/		
English at home	Gn	15.6%	19.4%	
Family functioning				
Income	Magguras for	those vital resources an	od risks are not	See note 8
Time	•	these vital resources an publicly available data		
Human capital		proposed survey of pa		
Psychological capital	for the EYI Eva	luation		
Social capital				
Community		2 / (* /		
		Below figures doi 100% du		
Highest level of school completed		not stated and		See note 9
% < Yr 10	Gn	8.3%	6.7%	
% Yr 10	Gn	26.7%	19.2%	Figures don't add to
% Yr 11	Gn	7.0%	8.8%	100% due to 'not-
% Yr 12	Gn	48.6%	58.0%	stated' and rounding
Post-school qualifications				See note 9
% Certificate/Diploma	Gn	25.4%	30.5%	
% Bachelors degree or higher	Gn	13.6%	23.8%	
% With a post-school qualification	Gn	49.6%	63.5%	
Socio-economic index				See note 10
SEIFA IRSD Score	Gn	996	NA	LGAs ranked from
Percentile (within WA)	Gn	58	NA	lowest score (rank=1)
Development (Artista 14/4)	C.	00	N. A.	to highest score
Rank (within WA)	Gn	80	NA	(rank=137)
Economy Wood forms Participation				
Workforce Participation	C.	62.20/	F7.40/	C 11
% work Full Time	Gn	63.2%	57.1%	See note 11
% work Part Time	Gn	27.4%	32.0%	
% unemployed	Gn	4.3%	5.1%	
% temporarily away from work Parental employment	Gn	4.6%	5.8%	Coo noto 11
• •				See note 11
% children 0-4 with at least one parent employed	Gn	86.7%	82.0%	
% children 0-4 with no parent employed	Gn	12.0%	10.2%	
Income	J.1	12.0/0	10.270	See note 11
% family households with income less than				556 11016 11
\$500 per week	Gn	4.9%	3.3%	
% family households with income \$500 to less				
than \$1,000 per week	Gn	12.8%	12.9%	
% family households with income \$3,000 or				
more per week	Gn	21.8%	30.1%	



KATANNING LOCAL GOVERNMENT AREA **DATA SNAPSHOT**











Source: ABS (2016)

of children 0-4 are Aboriginal

of children 0-4 are CALD

Source: ABS (2016)

Births per year to Katannina residents

Source: ABS (2018)

CHILD HEALTH



of babies had low birth weight (<2,500g) (WA average 6.5%)

Source: CDA (2018)



TOTAL POPULATION

4.151

Source: ABS (2016)

Index of relative socio-economic disdvantage



Katanning = 907

which is in the 2nd lowest decile

Source: ABS (2021)

DIVERSITY

of residents are

Aboriginal

Source: ABS (2016)

of residents are

CALD

Source: ABS (2016)

Source: ABS (2016)

FAMILIES

Family make-up





44.3% no children



15.1% one parent

2.5% other

Source: ABS (2016)

HOSPITALISATION RATES FOR 0-4 YEAR OLDS



Oral Disease related

2.4 per 100 persons

(WA average 0.8)

Source: CDA (2018)



Vaccination rates

89.5% of Albany SA3

children are fully immunised

at 2 years old

(WA average 91.4%)

Source: CDA (2018)

Chronic Physical Illness

6.4

per 100 persons (WA average 4.3)

Source: CDA (2018)



Emergency Dept

presentations

per 100 persons (WA average 70.7)

MATERNAL HEALTH

18.8%

Families with children under 15

Source: ABS (2016)

of women smoked during pregnancy (WA average 7.9%)

Source: CDA (2018)



of women drank alcohol during pregnancy

Source: Stork Perinatal Database (2019)

12.8%

of women used drugs during pregnancy

Source: Stork Perinatal Database (2019)

Source: CDA (2018)

Respiratory Disease related

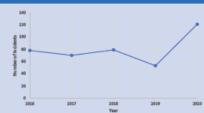
1.9

per 100 persons

(WA average 0.8)

FAMILY AND DOMESTIC VIOLENCE

Reported FDV Incidents 2016-2020



Source: Katanning Police

8.3%

of births were to women aged 15-19 (WA average 2.6%)

Source: CDA (2018)



11.2%

of births were to mothers with a mental illness

(WA average 10.2%)

Source: CDA (2018)

6. Katanning

Children O-4 in sole parent family Ka 21.1% 12.8% See note 1 K children O-4 who don't speak English well or not at all 15.7% 9.0% See note 2 Family make-up Ka 37.1% 44.6% See note 2 Couple family with children Ka 37.1% 44.5% 46.5% </th <th>Item</th> <th></th> <th>Location</th> <th>Location Value</th> <th>WA Average</th> <th>Comments</th>	Item		Location	Location Value	WA Average	Comments
8 children 0-4 who don't speak English well on tat all 15.7% 9.0% Family make-up 5ce note 2 Couple family with children Ka 37.1% 44.6% Couple family with children Ka 45.5% 46.5% One parent family Ka 15.7% 15.1% Child real family on children Ka 15.7% 15.1% Child real family four sond hospitalisation rates below been sourced from the WAR Child Development At Use. The Ward Shide Shide Shides with low birth weight Ka 7.3% 8.5% 6 babies with low birth weight Ka 7.3% 8.5% 5 8 babies born pre-term Ka 7.3% 8.5% 5 8 babies born pre-term Ka 2.2 1.9 Mospitalisation rates are the number of are the number of are the number of are the number of a rectanglish shides are and hearing Ka 1.9 Mospitalisation rates are the number of a rectanglish shides are all the number of a rectanglish s	Children					
Family make-up	% children 0-4 in sole p	parent family	Ка	21.1%	12.8%	See note 1
Pamily make-up	% children 0-4 who do	n't speak English well or				
Couple family with children	not at all			15.7%	9.0%	
Couple family no childrer Ka 45.5% 46.5% One parent family Ka 15.7% 15.1% Other family Ka 15.7% 15.1% Child Health figures and hospitalisation rates below hove been suppressed, ranges have been provided based on minimum and maximum values: where small counts have been suppressed, ranges have been provided based on minimum and maximum values: where small counts have been suppressed, ranges have been provided based on minimum and maximum values: where small counts have been suppressed, range share been provided based on minimum and maximum values: where small counts have been suppressed, as a serie the number of a nospitalisations rates Ear and hearing Ka 2.2 1.9 Hospitalisations per are the number of a nospitalisation of the suppressed, and suppressed, are the number of a nospitalisation of the suppressed was a suppressed. The suppressed was a suppressed was a suppressed was a suppressed. The suppressed was a suppressed was a suppressed was a suppressed was a suppressed. The suppressed was a suppressed was	Family make-up					See note 2
One parent family Ka 15.7% 15.1% Other family Ka 1.7% 1.6% Child health Child health figures and haspitalisation rates below have been sourced from the WA Child Development Atlas. Where small counts have been suppressed, ranges have been provided based on minimum and maximum values. Where small counts have been sourced from the WA Child Development Atlas. Where small counts have been suppressed, ranges have been provided based on minimum and maximum values. % babies born pre-term Ka 7.3% 8.6% % tally immunised at 2 years old Albany SA3 89.5% 91.4% 0-4 yr old hospitalisations rates 8 1.9 40.8 40.00 4.7 40.00 <td< td=""><td></td><td></td><td>Ka</td><td>37.1%</td><td>44.6%</td><td></td></td<>			Ka	37.1%	44.6%	
Other family Ka 1.7% 1.6% Child health figures and hospitalisation rates below have been sourced from the WA Child Development Atlas. Nave been suppressed, ranges have been provided bosed on minimum and maximum values. Where small counts have been suppressed, ranges have been provided bosed on minimum and maximum values. % babies with low birth weight Ka 8.7% 6.5% % babies born pre-term Ka 7.3% 8.6% % fully immunised at 2 years old Albany SA3 89.5% 91.4% 0-4 yr old hospitalisations rates 8 1.9 0.8 are the number of a region of the Maximum of the standard form the Maximum of the standard form of the standard form of the Maximum of the standard form of the standard form of the Maximum of the standard form of the standard form of the Maximum of the standard form of the standard form the Wax Child Development Atlas. Where small counts have been suppressed, and the standard form who smoked at any time during pregandy See note 3 % births to women aged 15-19 Ka 8.3% 7.9% See note 4 ** births to women aged 15-19 Ka 8.3% 7.9% See note 5 ** births to women aged 15-19 Ka 8.3% 7.9% See note 5 ** Children's Educ	Couple family no childi	ren	Ka	45.5%	46.5%	
Child health figures and hospitalisation rates below hove been sourced from the WA Child Development Atlas. Where small counts have been suppressed, ranges have been provided based on minimum and maximum values. % babies with low birth weight weight (% babies with low birth weight) Ka 8.7% 6.5% % babies born pre-term Ka 7.3% 8.6% % fully immunised at 2 years old 0.4 yr old hospitalisations rates 8.6% 91.4% Ear and hearing Respiratory disease (Respiratory disease) Ka 1.9 4 hospitalisation per value of are the number of inospitalisations per loop to the post of the post	One parent family		Ka	15.7%	15.1%	
### Subject of the provided based on minimum and moximum values. Where small counts have been suppressed, ranges have been provided based on minimum and moximum values. Where small counts have been suppressed, ranges have been provided based on minimum and moximum values. Where small counts have been suppressed, ranges have been provided based on minimum and moximum values. Where small counts have been suppressed and hearing the subject of the subject	- •		Ка	1.7%	1.6%	
Nave been suppressed, ranges have been provided based minimum and minimum values. % babies with low birth weight Ka 8.7% 6.5% % babies born pre-term Ka 7.3% 8.6% % fully immunised at 2 years old Albany SA3 89.5% 91.4% For and hearing Ka 2.2 1.9 Hospitalisation rates are the number of hospitalisations per are the number of hospitalisations per 100 children in the Injury Ka 0.0 - 0.1 0.2 hospitalisations per 100 children in the 100 children in the Injury Ka 0.4 - 1.7 2.3 browning the number of hospitalisations per 100 children in the Injury Ka 0.4 - 1.7 2.3 browning the number of hospitalisations per 100 children in the Injury Ka 0.4 - 1.7 2.3 browning the number of hospitalisations per 100 children in the Injury Ka 0.4 - 1.7 2.3 browning the number of hospitalisations per 100 children in the Injury Ka 0.4 - 1.7 2.3 browning the number of hospitalisations per 200 children with per 200						
% babies born pre-term Ka 7.3% 8.6% 91.4% % fully immunised at 2 years old Albany SA3 89.5% 91.4% 0-4 yr old hospitalisations rates 8.2 1.9 Mospitalisation rates are the number of 100 children in the 100 plants of 100						
## fully immunised at 2 years old O-4 yr old hospitalisations rates ## Far and hearing ## Ka 2.2 1.9 Hospitalisation rate or return the number of hospitalisation rate or return the number of hospitalisations preventable diseases Vaccine preventable diseases	% babies with low birt	h weight	Ka	8.7%	6.5%	
0-4 yr old hospitalisations rates Ear and hearing Ka 2.2 1.9 Hospitalisation rates are the number of are the number of hospitalisations per place in the number of hospitalisations per proposed because the number of hospitalisations per proposed proposed by the number of hospitalisations per proposed propose	% babies born pre-terr	m	Ka	7.3%	8.6%	
Ear and hearing Ka 2.2 1.9 Hospitalisation rates are the number of are the number of hospitalisations per 100 children in the positions per 100 children in the position per 100 children in the positions per 100 children	% fully immunised at 2	2 years old	Albany SA3	89.5%	91.4%	
Respiratory disease Ka 1.9 0.8 are the number of hospitalisations per look claime per look claime per look claime per look claime in the lanjury Ka 0.0 - 0.1 0.2 are the number of hospitalisations per look claime in the lanjury Ka 0.0 - 0.1 0.2 are the number of hospitalisations per look community floor community community </td <td>0-4 yr old hospitalisati</td> <td>ons rates</td> <td></td> <td></td> <td></td> <td></td>	0-4 yr old hospitalisati	ons rates				
Near Production Preventable diseases Ka 0.0 - 0.1 0.2 hospitalisations per 100 children in the Injury Ka 0.0 - 0.1 0.2 hospitalisations per 100 children in the Injury Ka 0.0 - 0.1 0.2 book lideren in the Injury Long community Maternal Health Maternal Health figures below have been sourced from the WA Child Development Atlas. Where small counts have been suppressed, ranges have been provided based on minimum and maximum values: Australian Early counts have been suppressed, suppressed, and the properties of the properties	Ear and hearing		Ka	2.2	1.9	
Vaccine preventable diseases Ka 0.0 - 0.1 0.2 100 children in the Injury Ka 0.4 - 1.7 2.3 community Maternal Health Maternal Health figures below have been sourced from the WA Child Development Atlas. Where small counts have been suppressed, ranges have been provided based on minimum and maximum values. % births to women aged 15-19 Ka 8.3% 2.6% See note 3 % women who smoked at any time during pregnancy Ka 18.8% 7.9% See note 4 Children's Education Australian Early Development Census (AEDC) 2021 See note of 5 % children on track on all five domains Ka 50.0% 57.9% For Katanning N=50 % children vulnerable on one or more domains Ka 28.0% 19.4% N=50 % students who attend school more than 90% of time (Yr 1-10) See note 6 Katanning PS 2019 Ka 67% NA 2021 Ka 58% NA 2021 attendance levels may have been adversely affected by St Patrick's School 2019 Ka 82% NA COVID-19 Year 3 NAPLAN results are provided for Katanning PS and Braeside PS only, as results are Year 3 NAPLAN results are provided for Katanning PS and Braeside PS only, as results are Year 3 NAPLAN results are provided for Katanning PS and Braeside PS only, as results are Year 3 NAPLAN results are provided for Katanning PS and Braeside PS only, as results are Year 3 NAPLAN results are provided for Katanning PS and Braeside PS only, as results are Year 3 NAPLAN results are provided for Katanning PS and Braeside PS only, as results are Year 3 NAPLAN results, 2021 Unavailable for St Patrick's School See note 7 % achieving Reading benchmark Ka 85% 95.3% For Katanning % achieving Numeracy benchmark	Respiratory disease		Ka	1.9	0.8	
Maternal Health Maternal health figures below have been sourced from the WA Child Development Atlas. Where small counts have been suppressed, ranges have been provided based on minimum and maximum values. % births to women aged 15-19 Ka 8.3% 2.6% See note 3 % women who smoked at any time during pregnancy Ka 18.8% 7.9% See note 4 Children's Education Australian Early Development Census (AEDC) 2021 Ka 50.0% 57.9% See note 5 % children on track on all five domains Ka 28.0% 19.4% For Katanning N=50 % children vulnerable on one or more domains Ka 28.0% 19.4% N=50 % children vulnerable on two or more domains Ka 18.0% 9.4% N=50 % students who attend school more than 90% of time (Yr 1-10) Ka 67% NA NA See note 6 Katanning PS 2019 Ka 68% NA levels may have been adversely affected by St Patrick's School 2021 Ka 68% NA levels may have been adversely affected by St Patrick's School 2019 Ka 82%	Vaccine preventable di	iseases	Ka	0.0 - 0.1	0.2	
Maternal health figures below have been sourced from the WA Child Development Atlas. Where small counts have been suppressed, ranges have been provided based on minimum and maximum values. % births to women aged 15-19 Ka 8.3% 2.6% See note 3 % women who smoked at any time during pregnancy Ka 18.8% 7.9% See note 4 Children's Education Australian Early Development Census (AEDC) 2021 See note 5 % children on track on all five domains Ka 50.0% 57.9% For Katanning Nestolated and the control of the control o	Injury		Ka	0.4 - 1.7	2.3	community
% births to women aged 15-19 Ka 8.3% 2.6% See note 3 % women who smoked at any time during pregnancy Ka 18.8% 7.9% See note 4 Children's Education Australian Early Development Census (AEDC) 2021 Australian early Development Census (AEDC) 500% 57.9% 6000 57.9%	Maternal Health					
% births to women aged 15-19Ka8.3%2.6%See note 3% women who smoked at any time during pregnancyKa18.8%7.9%See note 4Children's EducationAustralian Early Development Census (AEDC) 2021See note 52021See note 5% children on track on all five domainsKa50.0%57.9%For Katanning N=50% children vulnerable on one or more domainsKa18.0%9.4%Por Katanning N=50% students who attend school more than 90% of time (Yr 1-10)Ka67%NA2021 attendance levels may have been adversely affected by 2021Katanning PS2019Ka68%NA2021 attendance levels may have been adversely affected by 2021Braeside PS2019Ka67%NA2071-19St Patrick's School2019Ka78%NAYear 3 NAPLAN results, 2021Ka78%NAYear 3 NAPLAN results, 2021Ka93%96.0%For Katanning PS and Braeside PS only, as results are unavailable for St Patrick's SchoolSee note 7% achieving Reading benchmarkKa93%96.0%For Katanning M=22% achieving Numeracy benchmarkKa85%95.3%N=22	Maternal health figures					ve been suppressed,
Name	0/ hirths to wam on age					Coomata 2
Ka 18.8% 7.9% See note 4 Children's Education Australian Early Development Census (AEDC) 2021 See note 5 % children on track on all five domains Ka 50.0% 57.9% For Katanning Material Section on track on all five domains Ka 28.0% 19.4% Por Katanning Material Section on track on all five domains Ka 18.0% 9.4% Por Katanning Material Section on track on all five domains Ka 18.0% 9.4% Por Katanning Material Section on track on all five domains Ka 18.0% 9.4% Por Katanning Material Section on track on all five domains Ka 18.0% 9.4% Por Katanning Material Section on track on all five domains Ka 18.0% 9.4% Por Katanning Material Section on track on all five domains Ka 18.0% 9.4% Por Katanning Material Section on track on all five domains Ka 67% NA 2021 attendance levels may have been adversely affected by and Braeside PS only, as results are unavailable for St Patrick's School NA NAPLAN results are provided for Katanning PS and Braeside PS only, as results are unavailable for St Patrick's School N	_		Nd	8.3%	2.0%	see note 3
Children's Education Australian Early Development Census (AEDC) 2021 See note 5 % children on track on all five domains % children vulnerable on one or more domains % children vulnerable on two or more domains % children vulnerable on two or more domains % children vulnerable on two or more domains % students who attend school more than 90% of time (Yr 1-10) Kaa 67% NA 2021 Ka 58% NA 2021 Attendance levels may have been adversely affected by COVID-19 Year 3 NAPLAN results, 2021 Kaa 93% 96.0% For Katanning % achieving Numeracy benchmark Kaa 93% 95.3% N=22		u at any time during	Ka	18.8%	7 9%	See note 4
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2021 See note 5 % children on track on all five domains Ka 50.0% 57.9% For Katanning N=50 % children vulnerable on two or more domains Ka 28.0% 19.4% For Katanning N=50 % students who attend school more than 90% of time (Yr 1-10) Ka 18.0% 9.4% See note 6 Katanning PS 2019 Ka 67% NA 2021 attendance levels may have been adversely affected by Braeside PS 2019 Ka 68% NA 2021 attendance levels may have been adversely affected by St Patrick's School 2019 Ka 67% NA Additional patrick's School NA COVID-19 St Patrick's School 2019 Ka 78% NA COVID-19 Year 3 NAPLAN results, 2021 Ka 78% NA NA See note 7 Year 3 NAPLAN results, 2021 Valuational particles of the patrick's School For Katanning Na Por Katanning Na Year 3 NAPLAN results are provided for St Patrick's School For Katanning Na Por Katanning Na Por Katannin		onment Census (AFDC)				
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% children vulnerable on one or more domains % children vulnerable on two or more domains % children vulnerable on two or more domains % students who attend school more than 90% of time (Yr 1-10)Ka18.0%9.4%For Katanning N=50Katanning PS Braeside PS School2019 2021Ka67% 88%NA2021 attendance levels may have been adversely affected by COVID-19St Patrick's School2019 2021Ka68% 82% 95.3%NACOVID-19Year 3 NAPLAN results, 2021Ka78% unavailable for St Patrick's SchoolSee note 7Year 3 NAPLAN results, 2021Ka93% 86.0%96.0%For Katanning For Katanning For Katanning For Katanning For Katanning For Katanning M-22	% children on track on	all five domains	Ka	50.0%	57.9%	
% children vulnerable on two or more domains % students who attend school more than 90% of time (Yr 1-10) Katanning PS 2019 Ka 58e note 6 Katanning PS 2021 Ka 58% NA 2021 attendance levels may have been adversely affected by 2021 St Patrick's School 2019 Ka 67% NA 68% NA 68% NA 67% 67% 67% 67% 67% 67% 67% 67		=	Ka	28.0%	19.4%	=
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Katanning PS 2019 Ka 67% NA 2021 Ka 58% NA 2021 attendance levels may have been adversely affected by COVID-19 St Patrick's School 2019 Ka 82% NA COVID-19 2021 Ka 78% NA NAPLAN results are provided for Katanning PS and Braeside PS only, as results are vinavailable for St Patrick's School Year 3 NAPLAN results, 2021 Ka 93% 96.0% For Katanning PS achieving Numeracy benchmark Ka 85% 95.3% N=22		d school more than 90%				See note 6
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2021 Ka 78% NA NAPLAN results are provided for Katanning PS and Braeside PS only, as results are Year 3 NAPLAN results, 2021 unavailable for St Patrick's School See note 7 % achieving Reading benchmark Ka 93% 96.0% For Katanning % achieving Numeracy benchmark Ka 85% 95.3% N=22	St Patrick's School					
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and Braeside PS only, as results are Year 3 NAPLAN results, 2021 **unavailable for St Patrick's School** See note 7 **achieving Reading benchmark** Ka 93% 96.0% **For Katanning* **achieving Numeracy benchmark** Ka 85% 95.3% **N=22*						
Year 3 NAPLAN results, 2021 unavailable for St Patrick's School See note 7 % achieving Reading benchmark Ka 93% 96.0% For Katanning % achieving Numeracy benchmark Ka 85% 95.3% N=22				•	_	
% achieving Numeracy benchmark Ka 85% 95.3% N=22	Year 3 NAPLAN results	, 2021		•		See note 7
% achieving Numeracy benchmark Ka 85% 95.3% N=22	% achieving Reading b	enchmark	Ка	93%	96.0%	For Katanning
0/ homes with internet access Va 73.30/ 95.40/	% achieving Numeracy	benchmark	Ka	85%	95.3%	=
% nomes with internet access Ka /2.2% 85.1%	% homes with internet	t access	Ka	72.2%	85.1%	



Item	Location	Location Value	WA Average	Comments	
Language	Figures bel	ow include people who	•		
Language		people who only spear	k anotner language	at nome	
% people who speak a language other than English at home	Ка	30.0%	19.4%		
Family functioning					
Income				See note 8	
Time		these vital resources an			
Human capital		n publicly available data, e proposed survey of pa			
Psychological capital	included in the proposed survey of parent-caregivers for the EYI Evaluation				
Social capital					
Community					
	_	Below figures dor			
High act lavel of calcal accordated		100% du		Coo moto O	
Highest level of school completed		not stated and	-	See note 9	
% < Yr 10	Ka	16.4%	6.7%	Figures don't add	
% Yr 10	Ka	23.0%	19.2%	to 100% due to	
% Yr 11	Ka 	10.8%	8.8%	'not-stated' and	
% Yr 12	Ка	36.8%	58.0%	rounding	
Post-school qualifications				See note 9	
% Certificate/Diploma	Ка	25.3%	30.5%		
% Bachelors degree or higher	Ка	8.5%	23.8%		
% With a post-school qualification	Ка	47.6%	63.5%		
Socio-economic index				See note 10	
SEIFA IRSD Score	Ка	907	NA	LGAs ranked from	
Percentile (within WA)	Ка	13	NA	lowest score (rank=1) to highe	
Rank (within WA)	Ка	17	NA	score (rank=137)	
Economy		<u> </u>		3007C (101110 137)	
Workforce Participation					
% work Full Time	Ka	58.4%	57.1%	See note 11	
% work Part Time	Ka	29.8%	32.0%	333 333 ==	
% unemployed	Ka	5.2%	5.1%		
% temporarily away from work	Ka	6.9%	5.8%		
Parental employment				See note 11	
% children 0-4 with at least one parent					
employed	Ка	75.6%	82.0%		
% children 0-4 with no parent employed	Ка	16.5%	10.2%		
Income				See note 11	
% family households with income less than					
\$500 per week	Ka	5.2%	3.3%		
% family households with income \$500 to less	.,				
than \$1,000 per week	Ка	20.9%	12.9%		
% family households with income \$3,000 or	V =	4.4.50/	20.40/		
more per week	Ka	14.5%	30.1%		



KOJONUP LOCAL GOVERNMENT AREA DATA SNAPSHOT







CHILDREN

Number of children aged 0-4

Source: ABS (2016)



of children 0-4 are Aboriginal

Source: ABS (2016)

of children 0-4 are CALD

Source: ABS (2016)

Births per year to Kojonup residents

Source: ABS (2018)

CHILD HEALTH



of babies had low birth weight (<2,500g) (WA average 6.5%)

Source: CDA (2018)



TOTAL POPULATION

1.985

Source: ABS (2016)

Index of relative socio-economic disdvantage



Kojonup = 997 which is in the

> sixth decile Source: ABS (2021)



48.9% no children

40.1% with children

0.8% other

Source: ABS (2016)

HOSPITALISATION RATES FOR 0-4 YEAR OLDS



Oral Disease related

Numbers too small to report (WA average 0.8)

Source: CDA (2018)



Ear and Hearing related

per 100 persons (WA average 1.9)

Source: CDA (2018)



Chronic Physical Illness

0.8

per 100 persons

(WA average 4.3)

Source: CDA (2018)

Vaccination rates

89.5% of Albany SA3

children are fully immunised

at 2 years old

(WA average 91.4%)

Emergency Dept presentations

per 100 persons (WA average 70.7)

DIVERSITY



of residents are **Aboriginal**

Source: ABS (2016)



of residents are CALD

Source: ABS (2016)

MATERNAL HEALTH

FAMILIES

19.4%

Families with children under 15

Source: ABS (2016)

of women smoked during pregnancy (WA average 8.6%)

Source: CDA (2018)

Births to

women aged 15-19

0.7% - 2.9%

(WA average 2.6%)

Source: CDA (2018)



9.1%

of women drank alcohol during pregnancy

Source: Stork Perinatal Database (2019)



4.5%

of women used drugs during pregnancy

Source: Stork Perinatal Database

of births were to

mothers with a mental illness

Source: CDA (2018)

9.7%

(WA average 10.2%)

FAMILY AND DOMESTIC VIOLENCE

Reported FDV **Incidents** 2016-2020

Numbers unavailable for Kojonup

7. Kojonup

Item		Location	Location Value	WA Average	Comments
Children		Location	Location value	VVA Average	Comments
% children 0-4 in sole par	rent family	Ко	14.6%	12.8%	See note 1
% children 0-4 who don't		KO	14.070	12.870	See note 1
or not at all	. speak Liigiisii weii		2.0%	9.0%	
Family make-up			2.073	5.675	See note 2
Couple family with child	dren	Ко	43.6%	44.6%	300 11010 2
Couple family no childr		Ко	46.5%	46.5%	
One parent family		Ко	9.9%	15.1%	
Other family		Ко	0.0%	1.6%	
Child Health		NO .	0.070	1.070	
	d hosnitalisation rates h	elow have heen sou	ırced from the WA Child D	evelonment Atlas	Where small counts
			ded based on minimum ar		
% babies with low birth v	weight	Ко	6.5%	6.5%	
% babies born pre-term		Ко	10.1%	8.6%	
% fully immunised at 2 ye	ears old	Albany SA3	89.5%	91.4%	
0-4 yr old hospitalisation children aged 0-4 yrs)	s rates (per 100				
Ear and hearing		Ко	3.9	1.9	Hospitalisation rates
Respiratory disease		Ко	0.2 - 0.9	0.8	are the number of
Vaccine preventable di	seases	Ко	0.0 - 0.1	0.2	hospitalisations per 100 children in the
Injury		Ко	0.7 - 1.7	2.3	community
Maternal Health					·
Maternal health figures	below have been source	ed from the WA Chil	ld Development Atlas. Wh	nere small counts h	ave been suppressed,
	_	en provided based o	n minimum and maximum		
% births to women aged		Ко	0.7 - 2.9%	2.6%	See note 3
% women who smoked a	it any time during				
pregnancy		Ко	19.4%	7.9%	See note 4
Children's Education					
Australian Early Develop 2021	ment Census (AEDC)				See note 5
% children on track on	all five domains	Ко	51.5%	57.9%	
% children vulnerable d	n one or more				For Kojonup
domains		Ко	33.3%	19.4%	N=33
% children vulnerable o	n two or more	12	40.20/	0.40/	
domains	-ll	Ko	18.2%	9.4%	
% students who attend s of time (Yr 1-10)	chool more than 90%)			See note 6
Kojonup DHS	2019		61%	NA	2021 attendance
	2021		66%		levels may have
St Bernard's School	2019		83%		been adversely
	2021		85%	NA	affected by COVID-19
	2021	NAPI AN result	ts are provided for Kojo		20112 13
Year 3 NAPLAN results, 2	021		e unavailable for St Berr	•	See note 7
% achieving Reading be		Ко	97%	96.0%	For Kojonup DHS
% achieving Numeracy		Ко	97%	95.3%	N=29
% homes with internet		Ко	73.0%	85.1%	



Figures below in	clude people who speak	English and anothe	r language plus neonle
	WIND ONLY CHOOK AND	ther language at hoi	
	wно оту <i>зреак</i> апо	ther language at noi	ne
(ο	13.5%	19.4%	
			See note 8
Measures for the	se vital resources and ri	sks are not easy to	
proposed survey	of parent-caregivers for	the EYI Evaluation	
	Below figures don't o	add up to 100%	
			Can make O
<i>1</i> -		J	See note 9
_			Figures don't add
			to 100% due to
			'not-stated' and
Ко	48.1%	58.0%	rounding
			See note 9
⟨o	53.8%	63.5%	
			See note 10
-			LGAs ranked from
⟨o	58	NA	lowest score (rank=1) to highest
ζo	81	NA	score (rank=137)
	_		,
ζo	58.0%	57.1%	See note 11
			See note 11
(o	85.6%	82.0%	
(o	14.4%	10.2%	
			See note 11
(o	3.2%	3.3%	
/o	16 50/	12.00/	
\U	10.5%	12.9%	
(n	22 7%	30 1%	
	find in publicly av	Below figures don't due to not stated and (0	Ko 23.6% 19.2% Ko 9.1% 8.8% Ko 48.1% 58.0% Ko 24.7% 30.5% Ko 14.9% 23.8% Ko 53.8% 63.5% Ko 997 NA Ko 58 NA Ko 81 NA Ko 31.5% 32.0% Ko 9.0% 5.8% Ko 9.0% 5.8% Ko 14.4% 10.2% Ko 3.2% 3.3% Ko 16.5% 12.9%



8. Notes on research evidence about quantitative data

1 Sole-parent families

In the Central Great Southern community, 15 per cent of children in the 0-4 years age range live in a sole-parent family, compared to the Western Australian average of 12.8 per cent. Sole parents with young children may face multiple layers of adversity: they are typically on a low income, have very little spare time to focus on themselves or their children, are under constant pressure and stress (no money, no time and lots of responsibility), may have few resources to drawn on (i.e.: no partner to help, limited life experience and educational opportunities which limit employment and other opportunities) and are often socially isolated1. Support for sole-parent families has to be multi-faceted, simultaneously working towards reducing any sense of social isolation they may experience while also addressing their material needs (food, clothing, other cost items), providing opportunities for them to 'give back' and feel worthwhile (reciprocity) and providing clear and accessible information that builds their sense of empowerment and confidence².

2 Family make-up

These categories of 'family make-up' are set by the ABS and may not be meaningful for definitions of 'family' among some cultural groups, including for Aboriginal peoples and CaLD community members. Further, in ABS Census data, a lot of the available tables are based on 'couple' families, 'sole-parent' families, or 'other' family types, the latter of which includes grandparent families. This means it is not possible to look specifically at grandparent families in detailed ABS tables an important dimension of family types in the Central Great Southern community may be invisible in the data. Advice from the community on whether this is something that should be considered more closely will be valuable.

3 Teen mothers

The incidence of teen mothers in the Central Great Southern is double the Western Australian average. Infants born to teenage mothers are more likely to be preterm and have low birthweight, both of which predict poor long-term health outcomes for the child³. Teen mothers are strongly associated with sole-parent families and compounding adversity associated with household poverty, limited time, reduced day-to-day support and challenging home circumstances (as per note 1 above). Socioeconomic and educational disadvantage associated with teen pregnancy can endure across generations, however the adverse maternal and neonatal impact can be reduced with targeted antenatal and postnatal support7. The relatively high incidence of teen pregnancy in the Central Great Southern likely contributes to normalisation of such circumstances among teenagers and makes it more difficult to change because young women are especially motivated to 'fit in' and pregnancy may entail kudos and attention among their peers. However, studies have also found that young women often show high levels of resilience and use any resources available to them to make their lives, and their children's lives, happy and meaningful⁴.

Hoffmann, H.,Lam, J. and Baxter, J. (2021). Young Mothers in Australia: prioritising motherhood and resisting stereotypes. Life Course Centre Working Papers Series, 25 November 2021. Accessed 14 February 2022 via https://lifecoursecentre.org.au/working-papers/young-mothers-in-australia-prioritising-motherhood-and-resisting-stereotypes/



¹ Zubrick, S., Williams, A.A., Silburn, S. and Vampani, G., 2000. Indicators of Social and Family Functioning, Department of Family and Community Services, Commonwealth of Australia

Zubrick, S., 2018. Circumstances for healthy children and empowered communities, Early Years Initiative Workshop for the Department of Communities, Port Hedland, 28 November 2018

Mann, L, Bateson, D. and Black, K (2021). "Teenage pregnancy" in Australian Journal of General Practice Vol 49, No 6., June 2020. Accessed 15 February 2022 via Infants born to teenage mothers are more likely to be preterm, have low birthweight and be small for gestational age

4 Smoking during pregnancy

Pregnant women in the Central Great Southern are more than twice as likely to smoke during pregnancy compared with the Western Australian average. Smoking in pregnancy is a modifiable risk factor for low birthweight, pre-term birth and placental complications because tobacco smoke reduces the flow of oxygen to the placenta and exposes the foetus to a number of toxins. Exposure to these toxins during the first 20 weeks of pregnancy are especially harmful and are associated with sudden infant death syndrome (SIDS), childhood cancers, high blood pressure, asthma, skin infections, obesity and lowered cognitive development⁵. As with teen pregnancy (note 3, above) normalisation of this behaviour among young women in the Central Great Southern may make it especially difficult to change.

5 Australian Early Development Census (AEDC)

The AEDC is conducted across Australia every three years when children are in their first year of full-time schooling. Pre-primary teachers complete the AEDC for each child in their class, contributing to a community-level measure of local children's development on five domains: physical health and wellbeing; social competence; emotional maturity; language and cognitive skills (school based); communication skills; and general knowledge. These areas of child development are important predictors of adult health, education and social outcomes⁶. Results from the 2021 AEDC show that five-year-olds in the Central Great Southern are more likely than their Western Australian peers to be developmentally vulnerable on one or more domains (i.e.: 27.0 per cent for the Central Great Southern compared with a Western Australian average of 19.4 per cent) and on two or more domains (16.0 per cent compared with a Western Australian average of 9.4 per cent). Conversely, children in the Central Great Southern are less likely to be on track on all five domains than the Western Australian average (54.0 per cent and 57.9 per cent respectively). Children who start school behind with developmental vulnerabilities tend to stay behind. These data reiterate the importance of the EYI for this community, especially in light of strong evidence that it is possible for communities to 'restack' the odds of children achieving favourable outcomes through a combination of health, early learning and family supports^{7.}

6 School attendance

There is a direct relationship between school attendance and school achievement – children who attend regularly do better at school⁸. There is a high level of variability in the percentage of students in the Central Great Southern community (Years 1-10) who attend school at least 90 per cent of the time⁹. Some schools have achieved very high levels of attendance, while others have low levels. Attendance in 2021 may have been affected by COVID-19, with some schools having particularly low attendance levels. Research points to the importance of children being supported by schools and their families to establish the habit of regular

⁹ My School. (2019). Retrieved February 22, 2022, from https://www.myschool.edu.au/



Australian Institute of Health and Welfare, 2021. Australia's mothers and babies; Smoking during pregnancy. Accessed 15 February via https://www.aihw.gov.au/reports/mothers-babies/australias-mothers-babies/contents/antenatal-period/smoking-during-pregnancy

Commonwealth of Australia and Department of Education, Western Australia, 2019. Early childhood development for children living in Western Australia by region: Australian Early Development Census 2018. Accessible via https://www.education.wa.edu.au/dl/vnnm73

Goldfeld, S., Villanueva, K., Lee, J.L., Robinson, R., Moriarty, A., Peel, D., Tanton, R., Giles-Corti, B., Woolcock, G., Brinkman, S., Katz, I. (2017). Foundational Community Factors (FCFs) for Early Childhood Development: A report on the Kids in Communities Study. Accessed 23 December 2021 via https://www.rch.org.au/uploadedFiles/Main/Content/ccch/CCCH-KICS-Final-Report-April-2018.pdf

⁸ ACARA. (2019). Student attendance. Retrieved February 1, 2022, from http://www.acara.edu.au/reporting/national-report-on-schooling-in-australia-data-portal/student-attendance

attendance from Kindergarten onwards¹⁰ and for schools to have strategies in place to ensure they are interesting and engaging for students, culturally safe and provide prompt follow-up on all unexplained absences to emphasise the importance of regular attendance.

7 National Assessment Program for Literacy and Numeracy (NAPLAN)

While the measure of a child's success at school (and life beyond school) is far more complex than his or her score in NAPLAN tests, literacy and numeracy are essential foundational skills for success in life and there is strong evidence that children who do not achieve the National Minimum Standard (the benchmark) for Reading and Numeracy when they are in Year 3 are unlikely to catch-up with their age-group peers and will struggle throughout their education¹¹. 2021 NAPLAN results from primary schools in the Central Great Southern for Year 3 Reading were comparable to Western Australian averages (i.e.: 95 per cent for the Central Great Southern met or bettered the National Minimum Standard (NMS) score compared with 96 per cent for Western Australia). However corresponding results for Numeracy were lower (i.e.: 91 per cent for the Central Great Southern compared with a Western Australian average 95.3 per cent, meaning the proportion of Year 3 children in the Central Great Southern who did not meet the NMS for Numeracy was almost twice the Western Australian average).

8 Family functioning

While data are available about child development, health and education outcomes, limited amounts of robust data are available on the social and family factors that influence positive or negative child outcomes. To help address this gap, a collaborative national project developed an evidence-based framework for tracking social and family factors that jointly influence children's outcomes¹². The 'social and family functioning' framework includes five inter-related elements: family income; family time (i.e.: time caregivers have for themselves or their children); human capital (i.e.: caregiver's knowledge, experience and skills about healthy choices and how the world works); psychological capital (i.e.: life satisfaction, confidence, worries, self-efficacy and conflict); and social capital (i.e.: sense of connectedness, civic engagement, safety and community cohesion). Unfortunately, quantitative data on these five social factors are not readily available at this time, so data items such as 'sole-parent families' are often used as a proxy (see note 1 in this section). To help address these gaps in the quantitative data available for the Central Great Southern community, the Evaluation of the EYI will address these factors via the parent-caregiver survey that will conducted in each of 2022, 2024 and 2027 to track changes over time.

9 Levels of education in the community

Fewer than half (37.1 per cent) of Central Great Southern community members completed Year 12 (or equivalent). This is considerably lower than the 53.5 per cent for Western Australia overall. Conversely, the proportion who only completed Year 10 is higher than the Western Australian average (Year 10 attainment 13.8 per cent in the Central Great Southern compared with 20.2 per cent in Western Australia). Also, a lower proportion of people from the Central Great Southern have a post-school qualification from TAFE or university (i.e.: 51.0 per cent compared to 61.1 per cent for the state). These data should be considered in light of landmark longitudinal research which found that the primary caregiver's (usually the mother's) level

¹² Zubrick, S., Williams, A.A., Silburn, S. and Vampani, G., 2000. Indicators of Social and Family Functioning, Department of Family and Community Services, Commonwealth of Australia



Hancock, K. J., Shepherd, C. C. J., Lawrence, D., & Zubrick, S. R. (2013). Student attendance and educational outcomes: Every day counts. Report for the Department of Education, Employment and Workplace Relations, Canberra. https://doi.org/10.13140/2.1.4956.6728.

de Carvalho, D. (2019). 'ACARA: NAPLAN and Aboriginal and Torres Strait Islander students' in Education Matters Magazine, online version accessed 12 December 2021 via https://www.educationmattersmag.com.au/acara-naplan-and-aboriginal-and-torres-strait-islander-students/

of education is a strong predictor of that child's lifetime success^{13.} However, the same research found two other important things. Firstly, that participating in high quality preschool (through early learning centres, playgroups and Kindergarten) before children start full-time Pre-primary is particularly beneficial for disadvantaged children, especially in groups of children with a blend of different social backgrounds. Secondly, the study found that the child's home learning environment is extremely important: "For all children, the quality of the home learning environment is more important for intellectual and social development than parental occupation, education or income. What parents do is more important than who parents are"¹⁴. It follows that multi-generational early learning programs such as supported playgroups through the Child and Parent Centre, Champion Centre, KindiLink and local schools may be especially effective in simultaneously building the confidence and capability of families while also focusing on children's learning.

Creating a rich home learning environment does not mean turning home into a school; rather, it means making home a fun, calm, secure and cognitively stimulating place, shared with people the child trusts and feels a strong attachment to. Key features include predictable routines, frequent sustained 'serve and return'¹⁵ conversations with children (from birth, even when the child can only 'babble'), engaging the child in daily household activities (e.g.: cooking, cleaning, shopping, etc.), consistent and calm responses to behaviour, playing and reading with the child daily, stimulating out-of-home experiences with friends, family and other children (e.g.: in parks, the bush, a library or at a river) and having a regular bedtime¹⁶.

10 Socio-economic index for areas – index of relative socio-economic disadvantage (SEIFA IRSD)

The SEIFA-IRSD¹⁷ is a statistic generated for every statistical area across Australia by the ABS using selected data items from that national Census conducted every five years. The SEIFA-IRSD summarises key information about the economic and social conditions of people and households within a specified geographical area. A low score indicates that cumulative and compounding features of economic and social disadvantage are prevalent within the community including many households with low-income and many people with low qualifications and low-skill occupations. While there is variation in SEIFA-IRSD scores across the Central Great Southern, the Local Government Area (LGA) of Katanning is in the lowest 13% of LGAs across Western Australia. A low SEIFA-IRSD is strongly associated with poor AEDC results for a community (see note 5), and points to the entrenched disadvantage faced by families and children in the community. However, this index does not define a community and many communities perform better (or worse) than their SIEFA-IRSD score might predict. The EYI exists to work alongside the Central Great Southern

Australian Bureau of Statistics. (2021). Socio-Economic Indexes for Areas (SEIFA), Australia. ABS.
https://www.abs.gov.au/statistics/people/people-and-communities/socio-economic-indexes-areas-seifa-australia/latest-release.



Sylva, K., Melhuish, E., Sammons, P., Siraj-Blatchford, I. & Taggart, B. (2004). The Effective Provision of Pre-school Education (EPPE) Project: Findings from pre-school to end of key stage 1. Nottingham, United Kingdom: Department for Education and Skills. Accessible via https://ro.uow.edu.au/cgi/viewcontent.cgi?article=3155&context=sspapers

Quote from p.1 of Sylva, K., Melhuish, E., Sammons, P., Siraj-Blatchford, I. & Taggart, B. (2004). The Effective Provision of Preschool Education (EPPE) Project: Findings from pre-school to end of key stage 1. Nottingham, United Kingdom: Department for Education and Skills. Accessible via https://ro.uow.edu.au/cgi/viewcontent.cgi?article=3155&context=sspapers

Harvard Center on the Developing Child, December (2009). Working Paper No. 1: Young children develop in an environment of relationships, accessed 7 February 2022 via https://www.albertafamilywellness.org/resources/doc/working-paper-1-young-children-develop-in-an-environment-of-relationships

Yu, M. and Daraganova, G. (2014). "Children's early home learning environment and learning outcomes in the early years of school", Chapter 4, Longitudinal Survey or Australian Childre Annual Statistical Report 2014. Accessed 7 February 2022 via http://talkingtogether.com.au/wp-content/uploads/2018/09/childrens-early-home-learning-environment-and-learning-outcomes-in-the-early-years-of-school.pdf

community to implement strategies which will enable it to perform better than might be predicted by its low SEIFA-IRSD.

11 Workforce participation and income levels

Data on workforce participation for the Central Great Southern community show a slightly lower rate of unemployment than the Western Australian average (4.1 per cent compared to 5.1 per cent). A similar percentage of children aged 0-4 in the Central Great Southern have at least one parent employed as for Western Australia. Unemployment and the associated lack of financial resources can create stress for families and may perpetuate intergenerational disadvantage because parental workforce participation and daily modelling of the 'habit' of going to work (or not) can impact their children's future joblessness¹⁸. It is also important to note, however, that the impact of parental employment is not one-dimensional. While working parents can provide a positive role model for their children and their employment income can pay for more items and benefits, some jobs may entail poor working conditions, low pay, job insecurity or having to work away from home and can lead to increased stress levels in households. Also, families require assured access to affordable, quality childcare¹⁹.

The proportion of family households in the Central Great Southern community with income below \$500 per week is only slightly higher than that of the Western Australian average (5.1 per cent and 3.3 per cent respectively), but only 18.0 per cent have an income of at least \$3,000 per week, compared to 30.1 per cent across the state. This indicates a universal modest level of income across the community and limited access to discretionary expenditure or to savings for a 'rainy day'.

¹⁹ Heinrich CJ. Parents' employment and children's wellbeing. The future of children. 2014 Apr 1:121-46.



Tanton, R., Dare, L., Miranti, R., Vidyattama, Y., Yule, A. and McCabe, M. (2021), Dropping Off the Edge 2021: Persistent and multilayered disadvantage in Australia, Jesuit Social Services: Melbourne

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- 3. Mann, L, Bateson, D. and Black, K (2021). "Teenage pregnancy" in Australian Journal of General Practice Vol 49, No 6., June 2020. Accessed 15 February 2022 via Infants born to teenage mothers are more likely to be preterm, have low birthweight and be small for gestational age
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- 8. ACARA. (2019). Student attendance. Retrieved February 1, 2022, from http://www.acara.edu.au/reporting/national-report-on-schooling-in-australia-data-portal/student-attendance
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10. Appendices

Appendix A – Detailed data sources

Item	Data Currency	Source	Website
Children			
% children 0-4 in sole parent family	2021	ABS Census of Population and Housing General Community Profiles	https://datapacks.censusdata.abs.gov.au/datapacks/
% children 0-4 who don't speak English well or not at all	2016	Western Australian Child Development Atlas	https://childdevelopmentatlas.com.au/
Family make-up	2021	ABS Census of Population and Housing General Community Profiles	https://datapacks.censusdata.abs.gov.au/ datapacks/
Child Health			
% babies with low birth weight	2018	Western Australian Child Development Atlas	https://childdevelopmentatlas.com.au/
% babies born pre-term	2018	Western Australian Child Development Atlas	https://childdevelopmentatlas.com.au/
% fully immunised at 2 years old	June 2020	Western Australian Child Development Atlas	https://childdevelopmentatlas.com.au/
0-4 yr old hospitalisation rates (per 100 children)	2018	Western Australian Child Development Atlas	https://childdevelopmentatlas.com.au/
Maternal Health			
% births to women aged 15-19	2018	Western Australian Child Development Atlas	https://childdevelopmentatlas.com.au/
% women who smoked at any time during pregnancy	2018	Western Australian Child Development Atlas	https://childdevelopmentatlas.com.au/
Children's Education			
Australian Early Development Census (AEDC) (2021)	2021	Australian Early Development Census	https://www.aedc.gov.au/data
% students who attend school more than 90% of time (Yr 1-		Australian Curriculum, Assessment and	
10)	2019	Reporting Authority	https://www.myschool.edu.au/
Year 3 NAPLAN results, 2021	2021	WA Department of Education	https://www.det.wa.edu.au/schoolsonline/home.do
% homes with internet access	2016	ABS Census of Population and Housing General Community Profiles	https://datapacks.censusdata.abs.gov.au/datapacks/
Language			
% people who speak a language other than English at home	2021	ABS Census of Population and Housing General Community Profiles	https://datapacks.censusdata.abs.gov.au/datapacks/
Community			
Highest level of school completed	2021	ABS Census of Population and Housing General Community Profiles	https://datapacks.censusdata.abs.gov.au/datapacks/
Post-school qualifications	2021	ABS Census of Population and Housing General Community Profiles	https://datapacks.censusdata.abs.gov.au/datapacks/https://www.abs.gov.au/statistics/people/
Socio-economic index	2021	ABS Socio-Economic Indexes for Areas	people-and-communities/socio- economic-indexes-areas-seifa- australia/latest-release#data-downloads



Item	Data Currency	Source	Website
Economy			
Workforce Participation	2021	ABS Census of Population and Housing General Community Profiles	https://datapacks.censusdata.abs.gov.au/datapacks/
Parental employment	2021	ABS Census of Population and Housing General Community Profiles	https://datapacks.censusdata.abs.gov.au/datapacks/
Income	2021	ABS Census of Population and Housing General Community Profiles	https://datapacks.censusdata.abs.gov.au/datapacks/



Appendix B — Notable changes for Central Great Southern between the 2016 and 2021 Census

The following table contains line-items for which ABS Census data in 2021 differed markedly from the 2016 results. While tests of statistical significance have NOT been undertaken, differences on these line-items are fairly large and have been provided here for information. These differences cannot be considered as 'trends' unless similar changes are evident in data from three or more time-points.

Location	Statistic	2016	2021
Central Great	Number of children age 0-4	604	553
Southern	Total population	8,495	8,219
(overall)	Income at least \$3000 per week	12.8%	18.0%
Broomehill-	Number of children aged 0-4	107	63
Tambellup	% of children 0-4 that are Aboriginal	12.1%	15.9%
	Number of children aged 0-4	90	103
	Number of children aged 0-4 who are Aboriginal	15.6%	5.8%
	% one parent family	11.4%	7.8%
Gnowangerup	% of residents who are Aboriginal	8.8%	7.7%
	% of people renting households who are financially stressed by rental payments	4.2%	9.3%
	% of households with a mortgage are financially stressed by mortgage repayments	2.8%	9.8%
Katanning	% of children 0-4 who are Aboriginal	9.0%	15.9%
	% of residents who are Aboriginal	7.6%	8.8%
	% of households with a mortgage are financially stressed by mortgage repayments	5.1%	15.3%
	% of people renting households are financially stressed by rental payments	7.3%	17.8%
Kojonup	Number of children aged 0-4	152	111
	% of ppl renting households are financially stressed by rental payments	5.2%	19.8%
	% of households with a mortgage are financially stressed by mortgage repayments	2.2%	9.6%

Appendix C – Service Mapping

Program	Service Provider	Description	Target	Funding Agency	Location	Comments					
	Child										
		Child Development									
Kindilink	Katanning Primary School	Kindilink is a play-and-learn initiative for 3-year-old Aboriginal children in the year before they start kindergarten. Children attend with a parent/carer for six hours a week. Kindilink offers high quality play and learn sessions for children and their parent/carer at the participating schools, at no costs to families. families are supported by a teacher and assistant to be actively involved in the activities with their children. where there is room in the program, younger members of the family may also attend with the three-year-old child.	3 Years	State Government (Education)	Katanning						
Katanning Toy Library	Run by volunteer organisation	Education toys to borrow for the community	0-4 yr old's		Katanning						
E Tipu E Rea'	Amity funded ASSGS support EYI focus	A NZ focussed facilitated playgroup which supports families of 0-4 yr old's living in CGS. The group has a Māori cultural focus and supports Kiwi families with cultural connection. ECH developmental programs and early literacy and learning.	5 years reviewed annually	DSS Federal funding Communities for ch'n	Katanning						
Katanning Community Child Care Centre	Wanslea Family Services	Not-for-profit community-owned childcare offering three-year-old kindy weekly on Tuesdays and Thursdays. Also offers long day care (full day, half day and casual), after school and vacation care. Offers 30 places. Funded by Parent Committee (through fees) and small grants.	6 weeks to 5 years old.	Private/Industry	Katanning						
Bright Star Child Care Service		Long day care, before and after school care and vacation care		Privately owned	Katanning						
Katanning Aquatic Centre	YMCA WA	Fun, family-friendly three-pool facility catering to people of all ages, abilities and backgrounds. The centre has a range of facilities on offer during pool season (the beginning of November to the end of March). Includes a toddler's pool with a water fountain and a portable disabled pool hoist available for the 50m pool.			Katanning	If this includes swimming lessons for 0-4 yrs, we can keep (although an aquatic centre is					



Program	Service Provider	Description	Target	Funding Agency	Location	Comments
						not strictly a service).
CaLD read Write Now literacy /playgroup	Amity funded through C4C	A facilitated group for CaLD women including parents of 0-4 yr. old's. Adults complete reading and writing studies. Ch'n complete developmentally appropriate activities prepared by paid play leader.	CaLD Families	DSS Federal funding Communities for ch'n	Katanning	
Katanning Public Library Services	Shire of Katanning	Story Time/Baby Rhyme Time weekly on Tuesdays; free. Library Club weekly on Mondays; free. Includes a fun book-based learning activity + game + Lego + snack. Toy Library weekly on Mondays, Tuesdays and Saturdays for 0-7 year olds; joining fee.			Katanning	
Child Development Service	WACHS Great Southern - Primary and Public Health	Includes Child Development Service for Central Great Southern (including Dietetics, Occupational Therapy, Physiotherapy, Social Work, Speech Pathology). Visiting paediatrician, ear nose and throat specialist and audiology providing outreach once every three months (contract services dependent on funding; reviewed once every 12 months). Includes Kids Are Kids clinical psychology service delivered through video/telehealth to meet educational and therapy needs of all children using a family-centred practice model. Referral patterns fluctuate. Partial funding through NDIA and DSS grants. Includes Kindergarten Oral Language Program (KOLP), a wholeclass oral language program in kindergartens and pre-primary schools. KOLP aims to improve the oral language skills of kindergarten children by providing targeted, goal based interventions. The KOLP has been providing population wide intervention aimed at improving the oral language skills of kindergarten students within the Central Great Southern over the past two years, with highly successful results – all students who took part showed positive change. The program also develops the skills of early childhood teachers to build capacity within schools and is an effective way to help children with mild to moderate language delay whose families do not have access to mainstream services. Includes a Speech Therapist and Therapy Assistant who form part of an integrated team to deliver the program to Kindergarten children across the Central Great Southern. The program involves school teachers, education assistants and parents to create an integrated support network for children who have been identified with mild to moderate language delays.				ENT and audio visit every 4 months – funded through Rural Health West



Program	Service Provider	Description	Target	Funding Agency	Location	Comments
Kojonup Child Care Centre - Play and Learn	Shire of Kojonup	Provides occasional care Monday to Friday from a Shire building on Elverd Street. Offers 23 places.			Kojonup	
Kojonup Public Library Services	Shire of Kojonup	Story/Rhyme Time every second Friday morning. Toy library Thursday mornings from a Shire building. Supported by the Shire of Kojonup and the State Library of WA.			Kojonup	
Play café Kojonup	Outdoor play group	Play café recently changed locations, Now held outdoors at the Lions Park in Kojonup.	0-4 yrs.	DSS vis C4C Amity	Kojonup	
Gnowangerup Childcare centre	Gnowangerup Family support service	Childcare service incorporating Norbarach out of school hrs care and mobile childcare service travels to Jerramungup, Borden, Ongerup. Also known as Gnowangerup Family Support association.		Not for profit community based	Gnowangerup	
Gnowangerup Family Hub	Gnowangerup Community Resource Centre	Provides programs that are flexible and respond to local community needs for families with children aged 0-12 years. Programs and activities support parenting, social isolation, physical and emotional development of children, family and community cohesiveness. Includes after school activities during the school term and Play Cafe (through Communities for Children).		Commonwealth Govt - DSS	Gnowangerup	
Gnowangerup Public Library Services	Shire of Gnowangerup	Includes Story Time and Better Beginnings resources for 0-6 year old's. Closed Sunday and Monday.			Gnowangerup	
Tambellup Family Day-care	Wanslea Family Services	Family day-care provider offers care M,T Thu and Fridays. Privately run licenced through Wanslea Family Services.		Privately owned Wanslea overarching body	Tambellup	
A Smart Start Great Southern	A Smart Start Great Southern Inc	Supports and empowers all families of young children which will encourage an optimal learning environment so children can reach their potential across all learning areas by facilitating and coordinating to link families to early childhood services, information, events and activities. The ASS database consists of all children between the age of 0-4. Families register through the child health nurse at the first visit after birth of child or by referral from service provider or self at an older age. Holds a Memorandum of Understanding with Better Beginnings.		Local Govt - Katanning; Local Govt - Kojonup; Local Govt - Gnowangerup; Local Govt - Broomehill-Tambellup; Local Govt - Development Commission	Katanning; Kojonup; Gnowangerup; Broomehill- Tambellup	



Program	Service Provider	Description	Target	Funding Agency	Location	Comments
		Information/event mornings held across various venues in the 7 participating Shires; supported by all Shire Councils.				
Playgroup WA	Playgroup WA parent facilitated playgroup	Universal playgroup held M and Fri, Playgroup building Katanning. Also run weekly in Tambellup, Gnowangerup and Tambellup	0-4 yrs.	DSS funded With LGA supports	Katanning Broomehill Tambellup Gnowangerup	
Communities for Children - Gnowangerup Play in the Park	YMCA WA	A program for families with young children. Play in the Park encourages families who are socially isolated, vulnerable, Aboriginal, Culturally and Linguistically Diverse to attend. Play in the Park provides children with opportunities for socialisation, free play and developmental activities in a neutral and non-threatening setting.	0-4 months		Gnowangerup Kojonup	Has overlaps with Family connection
Tambellup Noongar Playgroup	Wanslea Family Services	Facilitated playgroup provided to familiarise Noongar parents and families with the school community and formal education.			Broomehill- Tambellup	
Tambellup Public Library Services	Shire of Broomehill- Tambellup	Delivered out of the Tambellup Community Resource Centre. Open Monday through Friday. Provides activities for children and youth such as Story Time for primary students and Play in the Park in the cooler months for infants and parents.		Local Govt - Broomehill- Tambellup	Broomehill- Tambellup	
Communities for Children - Community Education Workshops for Parents	Relationships Australia	Child and Family Practitioners deliver community education workshops across the Great Southern through Communities for Children at schools, Community Resource Centres and other programs. Topics such as emotional intelligence, digital technology, self-esteem for children and parents, and protective behaviours as well as developing workshops to suit the needs of the community.		Commonwealth Govt - DSS	CGS	
		Child Health				

Program	Service Provider	Description	Target	Funding Agency	Location	Comments
Great Southern Community Health Clinic	WACHS Great Southern - Primary and Public Health	Universal Child Health Checks. Gnowangerup Monday and Thursday by appointment. Main street location. Outreach to Tambellup Outreach from Katanning to Broomehill second Wednesday of every month. Kojonup Child Health Clinic based at Kojonup District High School. Open Thursday and Friday by appointment. Community Child Health Nurses based at the clinics provide a variety of supports for parents, including five 'purple book' appointments to assess child health and development at key developmental ages (0-14 days, 8 weeks, 4 months, 12 months and 2 years) and a School Entry Health assessment when the child starts school, (SEHA is conducted by School Health Nurse) and immunisation, plus information provision and referral to specialist programs as required. An Enhanced Aboriginal Child Health Schedule is available for Aboriginal families, which includes additional visits at 6, 8 and 18 months, and 2.5, 3 and 3.5 years. Child Health Clinics provide a range of parenting programs (see programs outlined in Family Connection). Services may include infant health screening, feeding advice for mothers, parenting groups, new parents' groups, immunisation programs and referrals where appropriate. The WA Child Health Service promotes the health and development of children by engaging with families and undertaking preventative health initiatives, health surveillance and screening, and health promotion activities. The five (5) scheduled Universal contacts focus on eliciting and responding to parental concerns, the early identification of health and developmental concerns, supporting parenting and the promotion of child parent relationships. The Universal contacts involve identifying protective and risk factors, undertaking observations and assessments, surveillance and screening, providing anticipatory guidance, offering health information, and care planning that may include additional contacts and/or referral to relevant services and programs. The WACHS child health program is referred to as Healthy Country Kids.	All Children from birth to entry school level.	State Govt – (WACHS)	Katanning, Gnowangerup, Broomhill, Kojonup, Tambellup	
Health Care Assessments for Children in Care (Health	WACHS / contracted services / Primary Care providers	Health assessments inform the health component of the child's care plan, comprise the physical, developmental and psychosocial domains of health and wellbeing, and are reviewed annually.	Children in the care of the Department of		State Wide	



Program	Service Provider	Description	Target	Funding Agency	Location	Comments
assessments for care plans)			Communitie s			
Enhanced Child Health Schedule (supports families to raise children with optimal health)	WACHS / contracted service providers	The ECHS offers scheduled contacts with children and families, including the five Universal child health contacts and an additional ten contacts to provide extra support and monitoring for children/families experiencing poor social determinant. It supports families to raise healthy children with optimal development and wellbeing who are ready to commence school.	Child and families who are experiencin g poor social determinant s and who require additional support		State Wide	
Ear Health Screening for Aboriginal children	WACHS / contracted service providers	Ear health and hearing screening (including otoscopy and tympanometry where required) is offered for all Aboriginal children from birth to school entry, as part of the universal child health contact at a minimum, with additional checks conducted for vulnerable children 0-5 years as identified.	Aboriginal children 0-5 years	State Government (WACHS)	State wide	
Born to Move	Shire of Katanning	Costed physical fun activity for kids aged two to four years and their parent or caregiver. Music is written for the class with lyrics that act as sung instructions, leading children through simple moves that build body awareness and balance. Held weekly on Fridays during the school term at Katanning Leisure and Function Centre.	2-4		Katanning	
Great Southern Community Health Clinic	WACHS Great Southern - Aboriginal Health Service	Boodjari Yorgas: The program delivers antenatal and child health services in a culturally appropriate manner, in consultation with the Aboriginal and Torres Strait Islander community.		State Govt - Health	Katanning	
Health Promotion Services	WACHS Great Southern - Primary and Public Health	Provides information and support at child care centres and across the region regarding nutrition-related skills and awareness, dental and ENT issues and perinatal mental health (including support for Child Health Nurses and School Health Nurses). Work with sporting clubs and community groups to increase health promotion practices (e.g. healthier options at canteens). Also work with local governments to support public health planning.	WACHS Great Southern - Primary and Public Health	State Govt - Health	CGS	This is reviewed annually. Local data and community consultation drive the work of the health promotion team.



Program	Service Provider	Description	Target	Funding Agency	Location	Comments
		Family				
		Maternal health				
WACHS Great Southern - Primary and Public Health Maternity Services - Katanning Hospital and Health Service	No delivery suites but includes maternity services: Community Midwifery Service for antenatal and postnatal care (visits outlying towns as needed, available in Gnowangerup by appointment); Boodjari Yorga pregnancy care for Aboriginal women, Newborn Hearing Screens and Blood Spot Screening, breastfeeding support and referrals.		State Govt - Health	Katanning; other outreach available	Katanning	
Maternity Services - Katanning Hospital and Health Service	WACHS Great Southern - Primary and Public Health	Immunisation clinics the first and third Tuesday of each month; bookings required.			Katanning	(Immunisations is also included in the Statewide services heading at bottom of spreadsheet – is this different? (Rachel)
Palmerston Association (Addiction support service)	Palmerston	Provides support, information and referral for people affected by addiction including smoking during pregnancy.	Universal	State funded	Katanning based covers CGS	This spans both maternal health and parental health.
Deb Julius	Private practitioner	Deb is a qualified midwife offering support to breastfeeding mums. This is a new venture which has Medicare funding	Breastfeedi ng		Katanning covers CGS	
Maternity Services - Katanning Hospital and Health Service	WACHS Great Southern - Primary and Public Health	Childbirth and parenting classes available in Albany or via telehealth/VC. No midwifery group practice available in Great Southern (closest is Bunbury). Closest private OBs are GP Obstetricians in Albany (Southern Regional Medical Group). The only private midwife in Great Southern appears to be Catherine			Albany or telehealth	



Program	Service Provider	Description	Target	Funding Agency	Location	Comments
		Kirke (Bloom Hypnobirthing and Midwifery Services) in Mount Barker.				
Maternity Services - Albany Health Campus	WACHS Great Southern - Primary and Public Health	Albany – Maternity services including delivery suites (eight beds), childbirth and parenting classes. Eight paediatric beds and mental health inpatient unit also available; however, maternal mental health inpatient service only available in Perth (Fiona Stanley and King Edward Memorial Hospitals). Narrogin- Maternity services including delivery suites (two beds) and obstetric beds (three beds) and parenting classes. Maternal mental health inpatient service only available in Perth (Fiona Stanley and King Edward Memorial Hospitals).		State Govt - Health	Albany and Narrogin	
Telehealth Lactation Service	WACHS Great Southern - Primary and Public Health	Access to specialist breastfeeding advice from specialist midwives at King Edward Memorial Hospital via their local health service.		State government	Katanning; Broomehill- Tambellup; Kojonup	WACHS Telehealth is different to KEMH service
Community health midwives		WACHS employ local midwives and child health nurses who support families during pregnancy and after the birth. But do not deliver babies in the CGS • Maternal assessments - weight, urinalysis, blood pressure and abdominal palpitations • Foetal well-being checks • Parent	Universal	Pregnant women	CH located in regional towns.	
		education classes • Referrals to allied health professionals • General pregnancy advice • Requests from your doctor • Home visits after birth. Maternity education sessions are provided in a comfortable, friendly and relaxed environment.				
Helpline - Australian Breastfeeding Association		The Breastfeeding Helpline is available 24 hours a day, 7 days a week. It is staffed by trained; volunteer counsellors who answer calls on a roster system in their own homes. Telephone counselling is free to all callers.	Australian Breastfeedi ng Association	Commonwealth Govt - DoH	Great Southern	



Program	Service Provider	Description	Target	Funding Agency	Location	Comments
		Parental (includes substance use, mental ar	nd emotiona	al health)		
Needle & Syringe Program (NSP)	WA Health	A free, confidential needle exchange provides syringes, filters, barrels, swabs, condoms, lubricant and disposal for used syringes.			Katanning	
Youth Focus (Behaviour exchange system therapy (BEST))	Youth Focus	An eight-week program provides support for parents and carers with children and young people 12 to 25 years old, with substance use problems and other mental health issues. The program works to help families understand more about adolescence, mental health, and learning to work together and support each other.	12-25 yo		Katanning	
Adult Mental Health Service	WACHS Great Southern - Mental Health Service	Includes visiting psychiatrist and psychologist (regular days).		State Govt - Mental Health	Katanning	
Alcohol & drug information service	Drugs & alcohol hotline	Free call: Alcohol & drug information service	Universal		National	
Relationships Australia	Women's support & counselling group	Weekly women's group offering Aboriginal Family supports meets in Katanning & Tambellup. They also employ a part time counsellor. Specialising in relationship counselling.	Aboriginal families	NGO	Tambellup Katanning	
Mobile Family Counselling Service	Southern Agcare	Community Support Services Face to face counselling DIDO from Gnowangerup Mental health first aid courses. Bereavement and other support groups Workshops and seminars on a variety of topics on request, including: Relationship Enhancement, Conflict Resolution in the Workplace Anger Management, dealing with the Blues, Parenting for Pre-Schoolers, Using Journaling to Manage Life, Crisis De-briefing, Coping with Natural Disasters, Emergency Relief, No Interest Loans (NILS)confidential / free / mobile.	Universal	ER when available funded by Lotteries West	Gnowangerup based services CGS	



Program	Service Provider	Description	Target	Funding Agency	Location	Comments
Palmerston Association Communities for Children - Parents Under Pressure	An evidence-based program provided year-round which provides intensive at home and community support to any family with children aged 0-8 years affected by drugs and alcohol. This activity aims to improve parenting efficacy, improve family functioning and children feel safe and nurtured within their family environment. Delivered at Katanning Palmerston Association office through Communities for Children.	Families with children aged 0-8		Communities for Ch'n DSS funding via Amity to Palmerston Assoc.	CGS DIDO from Albany 1 day per week Katanning; Kojonup; Gnowangerup; Broomehill- Tambellup	
	Family finance	Lial well-being (including financial counselling, employ	/ment servi	Les and housing/home	lessness)	
AnglicareWA Financial counselling	Universal service	Financial counselling including budgeting, nils loans, advocacy, financial literacy and assistance to apply for Govt incentives and supports.	Universal	Anglicare WA	Office in Katanning and CGS FC travels to Gnow and Kojonup fortnightly	
Katanning Community Harvest	Katanning Community Harvest	Foodbank service to support people on low incomes to access reduced price grocery items. Available to pension or Health Care Card holders.		Katanning Community Harvest	Katanning	
APM	APM employment service	Assists Centrelink clients to build work skills and find suitable employment to meet their requirements.	Centrelink clients		Katanning office Services CGS	
ParentsNext	SMYL Community Services	Pre-employment Commonwealth program required for parents with children under 6 years who are receiving a Parenting Payment to plan and prepare for future study or employment. Referrals occur through Centrelink.	Parents with a child 6 years and under	Commonwealth Govt - DSS	Katanning	



Program	Service Provider	Description	Target	Funding Agency	Location	Comments
Public Housing Services	Anglicare WA	Provide public housing, Keystart loans, tenancy support and disrupt management services for the region. Includes two Aboriginal trainees based in Katanning.	iv Department of Communitie s (Housing)	State Govt - Communities	Katanning	
Atwork	Disability employment network	Job Provider assisting clients with a disability employment and training needs.	DSP participants		Katanning office Services CGS	
AnglicareWA Housing support	Anglicarewa	Anglicare WA works with people experiencing housing issues or at risk of homelessness, providing support to seek stable housing arrangements.	Universal service:	State Government (Communities)	Katanning based covers CGS	
Katanning Regional Emergency (Max 3-day accommodation)	Katanning Regional Emergency Accommodation Service	Homelessness Service offering a max 3-day short term accommodation.		State Government (Communities)	Katanning But supports CGS	
Badgebup Aboriginal Corporation Ranger Program	Aboriginal Training, employment & social programs	Badgebup facilitate a ranger program for Aboriginal Employees. Participants are supported with training & employment. A range of social programs are also offered, these align to broader initiatives such as Closing the gap & include Tourism, bush foods, Landcare, ranger program and support for families.	Aboriginal adults	Dept Prime Minister& cabinet, Minderoo GSDC	Badgebup	
Advanced Housing (Affordable housing development & management	Advanced housing	Provides development and management of affordable housing across Western Australia. Advance Housing alleviates poverty by providing and managing affordable, appropriate & secure housing for people in need, including seniors and students; increases & diversifies affordable housing options to meet local needs & improve customer choices; and enhances the well-being of tenants by partnering with other service providers and working with the community & government to effect whole-of-life enrichment		NGO Partnered with Department of communities(housing)	Albany with properties in other CGS locations managed via Albany	
Southern Aboriginal Corporation		Housing for Aboriginal Families. SAC Housing is registered as a Preferred Provider with the Department of Communities Housing WA and is committed to growing the residential property portfolio by requesting titles to residential properties at no cost from the Department and	Aboriginal Families	State Government (Communities)	Katanning & Albany	



Program	Service Provider	Description	Target	Funding Agency	Location	Comments
		managing additional residential property head leases from Housing.				
THRIVE Housing Support Program		Commencing 1 October 2019 to replace STEP. In partnership with local non-government and government organisations, will assist people to manage their household by developing strategies to grow their capacity and resilience. It will also help people to navigate and link up with support services and programs across government and the private sector.		Outcare	Great Southern	
Skill Hire	Skill Hire	Registered training organisation and recruitment company offering transition to work, job active, Youth Jobs PaTH and Indigenous employment support services. Time-limited program for young school leavers with disability who can progress towards employment, vocational education and training or higher education over one or two years. Based at Southern Regional TAFE. While staff previously visited CGS in person, they now offer Skype appointments.			Online appointments	
		Family connection (includes family advocacy	and cultura	l services)		
Wiring Kids Workshops on Fears, Worries and Anxiety in Early Childhood	Ad hoc/sporadic workshops organised in partnership with A Smart Start regarding practical tips and strategies for parents and carers to manage their child's fears. Presented by Wendy Muller from WiringKids.				Katanning; Broomehill- Tambellup; Kojonup	
Great Southern Community Health Clinic	WACHS Great Southern - Primary and Public Health;	Solid Start/Introduction to Solids: An information session for parents, with children aged 3-6 months, on introducing solids, including why and how solids are introduced; how much food and which foods to start with; and allergies and intolerances.		State Govt - Health	Katanning	Usually part of the new parent's group, not specifically 'Solid Start'
Great Southern Community Health Clinic	WACHS Great Southern - Primary and Public Health	Circle of Security: An 8-week program (2x hours/week) parents/carers of children aged 0-5 years regarding children's		State Govt - Health	Katanning	This is facilitated by Wanslea



Program	Service Provider	Description	Target	Funding Agency	Location	Comments		
		emotional needs, management of emotions and self-esteem.						
Great Southern Community Health Clinic	WACHS Great Southern - Primary and Public Health	Triple P (Positive Parenting Program): short seminar series for parents/carers of children aged 3-8 regarding positive and effective management of common child behaviours and emotional issues. Currently only available online in Great Southern.		State Govt - Health	Katanning	Free for 12 months		
Great Southern Community Health Clinic	WACHS Great Southern - Primary and Public Health	Better Health Program: multi-component healthy lifestyle program for families of overweight/obese children. Delivered once in Katanning in Term 1, 2019; Albany only Term 2.		State Govt - Health	Only available online			
Southern Aboriginal Corporation	Family violence prevention legal service	Offers advocacy and legal support to adult Aboriginal clients who have experienced family violence.	Aboriginal adults	Community legal services WA	Katanning			
Migrant Resource centre Rainbow Coast	Migrant assistance	Funded to assist Migrant families with advocacy, activities and links to appropriate local services. Provides advocacy, practical assistance (including translators), information, counselling, programs, activities and links to other community networks and referral services relating to domestic and social issues arising out of the settlement experience. Services delivered two days per week (?) and funded by Department of Social Services.	Migrant families that have arrived in last 5 yrs and from a refugee or asylum background		Based in Katanning services CGS			
Parenting Connection Wanslea Family Services	Wanslea Family Services	Universal parenting service. Offers 1-1 parent advice & facilitates evidence-based parenting programs. Delivered on an ad hoc basis.	Universal All parents Focus on Aboriginal parents, Dads, young and CaLD	State Government (Department of Communities)	Albany based Katanning DIDO CGS			
	Family safety (includes FDV, child abuse and neglect)							
Anglicare WA DVASS, (Domestic Violence Advocacy & support Service.)	DVASS supports male & female FV victims by providing advocacy, risk assessment & safety planning and	Family violence victims, male or female.	State Government (Communiti es)		Katanning Covers CGS			



Program	Service Provider	Description	Target	Funding Agency	Location	Comments
CRS: Coordinated Response Service (Triaging & action police DV reports,	referral to other services. Referral accepted via agency or self-referral or via the CRS triage process. Coordinated Response Service (Triaging &	Ch'n			CRS located in Albany	
Albany Women's Centre (Refuge) Domestic violence Outreach	action police DV reports,	Women experiencing/escaping FV			CSaTs DIDO service to CGS from Albany.	
	Women's refuge located in Albany, also offers an outreach telephone service to clients in the CGS.				Albany covers CGS & wider WA Albany	
	outreach initiative					
Albany Family Violence Prevention Legal Service	Southern Aboriginal Corporation	Areas of advice include family and domestic violence, family law (children's issues), and child protection.			Albany; Katanning	
Indigenous Family Support Service	Southern Aboriginal Corporation	'Grass roots' community service which raises awareness about the damaging effects of family violence and drug and alcohol abuse, through staff interacting and socialising with community members. A Community Officer is based in Katanning.			Katanning; Broomehill- Tambellup; Gnowangerup	



Program	Service Provider	Description	Target	Funding Agency	Location	Comments	
Albany Women's Centre	Anglicare WA	Supported and/or safe accommodation to women, with/or without accompanying children, who as a result of family and domestic violence or other crisis. Breaking the cycle of domestic violence and homelessness, and assisting clients to maintain existing safe accommodation where appropriate or move to stable safe long term accommodation is a key role of Family and Domestic Violence Accommodation and Support. Linked to Domestic Violence Advocacy and Support Service.		State Govt - Communities	Albany; Central Great Southern (outreach)	Also has links with Homelessness services.	
Narrogin Women's Refuge	Share & Care Community Services Group Inc	Emergency accommodation for women and children at risk of domestic violence or homelessness.		State Govt - Communities	Narrogin; Central Great Southern (outreach)		
AnglicareWA	CSaTs (Counselling for ch'n exposed to sexual abuse)	Child Sexual Abuse Therapeutic Service (Referrals accepted via DoC CPFS).		State Government (Communities)	Albany		
AnglicareWA	Children's Domestic Violence Counselling Service	Children's Domestic Violence Counselling Service		State Government (Communities)	Albany		
Child Protection and Family Support Services	Department of Communities	Statutory child protection and care services.		State Govt - Communities	Katanning		
State-wide or national service available to CGS community							
National Immunisation Program (Free routine immunisation)		The NIP provides the routine childhood immunisations recommended for all children in Australia, free of charge.	Children 0-4 years	State/Commonwealth Government	State Wide		



Program	Service Provider	Description	Target	Funding Agency	Location	Comments
Better Beginnings	Better Beginnings			Statewide		
Otata L'hara NAVA	supports parents in					
State Library WA	reading to children so					
	that they build the early					
	literacy skills they need					
	to become good					
	readers and succeed at					
	school.					
	Better Beginnings aims					
	to develop literacy skills in young children					
	through fostering a love					
	of books and language					
	by:					
	•Introducing children to					
	developmentally					
	appropriate books and					
	language activities					
	through the delivery of					
	free books and reading					
	packs to parents of					
	newborns and children					
	beginning kindergarten					
	and preschool.					
	•Supporting parents as their child's most					
	important teacher in					
	modelling early literacy					
	practices through					
	providing interactive					
	literacy and parenting					
	information sessions at					
	libraries and in the					
	community.					
	•Raising awareness of					
	the value and pleasure					
	of reading sharing					
	stories with children					
	through the program's					
	marketing messages,					
	training practitioners delivering the program					
	and lending literacy					
	resources to child care					
	centres, playgroups,					
	schools and other					
	community groups.					
	•Linking families to the					



Program	Service Provider	Description	Target	Funding Agency	Location	Comments
	resources and services that libraries offer people of all ages.					
Country Families @ Ngala	Ngala	A pilot of delivery of statewide child health and parenting services through media and technology. Includes Country Early Parenting Group (via videoconference) for families of babies 0-4 months; half-hour VC/telephone consults; Facebook group; live chat via Ngala website; and online workshops on sleep, feeding, behaviour, toileting, and managing a baby and toddler. Run by a Child Health Nurse and accessible from home/Community Resource Centres. No fixed schedule available so likely scheduled based on demand.			State Wide	
Homeless ness helpline	Phone support	Ph helpline: Homelessness 1800 065 892	Universal homeless ness			
Rural Link	Rural Link	Afterhours mental health support line for rural communities	Rural community members		Statewide	
1800 Respect	National sexual assault, DV family violence counselling service	24 hr phone/internet support and counselling hotline	Universal	Federal Medibank	National hotline	

