

7 CARDINIA SAFER COMMUNITIES STRATEGY

FILE REFERENCE INT1738490

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RECOMMENDATION

That Council endorses the Safer Communities Strategy.

Attachments

1 Draft Safer Communities Strategy 25 Pages

EXECUTIVE SUMMARY

Cardinia Shire Council committed to becoming an International Safe Community in December 2014 at a General Council meeting.

The International Safe Communities Model is an internationally recognised, evidence based, best practice model premised on collaboration, partnerships and community capacity building to reduce injury and enhance safety.

The International Safe Communities model focuses on 7 core indicators:

1. An infrastructure based on high level partnerships and collaborations, governed by a cross - sector group that is responsible for safety promotion in their community
2. Long-term, sustainable programs covering genders and all ages, environments, and situations
3. Programs that target high-risk groups and environments, and programs that promote safety for vulnerable groups
4. Programs that are based on the available evidence
5. Programs that document the frequency and causes of injuries
6. Evaluation measures to assess their programs, processes and the effects of change
7. On-going participation in national and international Safe Communities networks.

The process commenced with the researching of data and statistics including crime statistics, hospital admission data and ambulance statistics. Coupled with this, an extensive community consultation process was conducted to determine the community's perception of safety. The details of both were collated and six priority areas were identified:

- Road and pedestrian safety
- Family violence
- Alcohol and other drugs
- Mental health
- Crime
- Natural hazards (emergency management)

In 2016, the Cardinia Safer Communities Strategic Committee was formed and a terms of reference developed. Members of the committee are senior leaders from government and non-government agencies and organisations representing each of the six priority areas. The committee is chaired by the General Manager Community Wellbeing and has representation from two councillors.

The committee has developed a Safer Communities Strategy which aims to guide a number of Action Groups operating across each of the six priority areas. The Cardinia Safer Communities

Strategy provides a framework for the implementation of solutions that aim to improve safety, and perceptions of safety within Cardinia. This strategy is built on a set of guiding principles developed collaboratively by the Strategic Committee with a vision - Cardinia is a community working together to build a safe place.

BACKGROUND

The Process

At the General Council meeting in December 2014, Cardinia Shire Council committed to becoming designated as an International Safe Community. Core to this work is the development of an integrated planning framework bringing together community, the service sector/community agencies and Council business units to achieve a shared vision of a safer community for all within a collective impact approach.

A detailed project plan and community consultation process was developed and presented to SLT on 23rd June 2015 and to Council on 13th July 2015.

In order to progress towards the development of a framework and subsequently accreditation as an International Safe Community, it is important to understand the specific safety issues and injury concerns impacting the Cardinia community, as well as the initiatives that are already occurring which contribute to the creation and/or upkeep of a safer community.

To achieve this, a three step process was employed:

An internal scoping exercise was conducted; meeting with managers, team leaders and coordinators of business units across Council to establish the initiatives that are currently occurring internally that contribute to the creation and/or upkeep of a safer community. This included gathering relevant statistical data routinely collected by other business units.

The second step involved a review of the existing statistics and research to establish the evidence based safety issues and causes of injury within Cardinia Shire. From this a community safety profile was developed.

Lastly, an extensive community consultation was undertaken to establish community perceptions of safety and injury within Cardinia Shire.

This was framed by asking 3 core questions:

- What are the main safety concerns for people in Cardinia Shire?
- What are the main causes of injuries?
- What could be done to make Cardinia Shire a safer place?

A total of 640 people participated in the consultation process (ranging from 4 y.o. to 90+ y.o.) and saturation point was achieved, where there was no new information coming out towards the end of the consultation period.

A range of issues were raised, however there were 6 that came out across wards and population groups which were of the most concern to the community. They were:

- Road and pedestrian safety
- Family violence
- Alcohol and other drugs
- Mental health
- Crime
- Natural hazards (emergency management)

A consultation report was developed (see attached) and released publicly through Council's website.

Cardinia Safer Communities Strategic Committee

The Cardinia Safer Communities Strategic Committee was formed in April 2016 and has been meeting quarterly since. Members of the committee are senior leaders from government and non-government agencies and organisations representing each of the six priority areas. The committee is chaired by the General Manager Community Wellbeing and has representation from two councillors.

As per the agreed Terms of Reference, the purpose of the Cardinia Safer Communities Strategic Committee is to address local community safety, injury and crime prevention issues by working in partnership with all major stakeholders. The committee will support Cardinia's designation as an International Safe Community and provide leadership in the identification, development and evaluation of activities and programs by:

- Developing a Safer Communities Strategy (attached) in collaboration with relevant agencies and the community which prioritise injury and safety issues for Cardinia Shire
- Establishing effective partnerships with key stakeholders engaged in injury prevention and improving the safety of individuals and groups in the Cardinia region
- Informing, lobbying and influencing Government departments and/or organisations to improve levels of safety in the Cardinia region
- Taking action to foster a positive image of community safety for residents, investors and visitors
- Oversee and coordinate the activities of the Cardinia Safer Communities Action Groups

The Strategy

The Committee has developed a strategy which is built on a set of guiding principles agreed to by the Strategic Committee; Sense of community, Resilient, Prevention, Responsible, Universal design, Innovative, Vibrant, Thriving, Evidence based approach, Significant positive impact, Inclusiveness – multicultural, Strengthening community resilience, Partnerships, Respectful, Caring, Tolerance, Being happy, Confidence.

The vision is - Cardinia is a community working together to build a safe place.

The Cardinia Safer Communities Strategy will work toward its vision by:

- Strengthening and developing a network of partnerships which enable collaborative approaches to creating a safer community
- Establishing a commitment to long term, sustainable programs which take a whole of community approach to creating a safer community
- Implementing programs and initiatives which take an equitable, tailored approach to meeting the needs of high-risk, vulnerable groups and environments throughout the Shire
- Ensuring evidence based and best practice approaches are used to work towards creating a safer community
- Effectively monitoring the frequency and causes of safety related harm throughout the Shire
- Implementing evaluation measures that assess the effects of change

POLICY IMPLICATIONS

There are no specific policy implications with this strategy.

RELEVANCE TO COUNCIL PLAN

Our People	Access to support services and programs for young people Improved health and wellbeing for all Increased awareness of safety Minimised impact of emergencies
Our Community	Our diverse community requirements met Improved health and wellbeing for all
Our Environment	Provision and maintenance of assets on a life cycle basis Transport linkages connecting towns Natural and built environments that support the improved health and wellbeing of our communities
Our Economy	A local economy supporting the improved health and wellbeing of our communities

CONSULTATION/COMMUNICATION

An extensive community consultation process was undertaken to establish the community's perceived safety and injury concerns.

Perceptions were collected through a range of methods and those who lived, worked, volunteered, studied, visited or owned a business in Cardinia were eligible to participate in the consultation opportunities. There was no minimum or maximum age for participation.

There was a conscious effort to reach a range of diverse individuals and community groups from across the Shire. As a result, consultations were held across the three wards with people aged from 4 - 90+ from a range of social, cultural and sexual backgrounds.

The following groups and locations were reached:

- Evergreen Retirement Village
- Hills Men’s Shed
- Catch Up
- English language classes at Living Learning
- Upper Beaconsfield Kindergarten
- Kooweerup Men’s Shed
- Be Ur Self
- Pakenham Young Mum’s Network
- Women on farms
- Pakenham Country Women’s Association
- Gembrook Senior Citizens
- Oakwood School
- Cardinia CALD Network
- Cardinia Access and Inclusion Committee
- Bunyip – Garfield Probus Club
- Pakenham Police
- Emerald Police
- Proactive Policing Unit
- Local Area Inspector - Victoria Police
- Monash health - Aboriginal Health Service

- Cardinia Shire Council Community Wellbeing Division
- Open consultation - Gembrook
- Open consultation - Bunyip
- Open consultation - Pakenham
- Open consultation - Emerald
- Open consultation - Lang Lang
- Open consultation - Kooweerup
- Open consultation - Beaconsfield

Individual meetings were also held with other municipal Councils which currently hold designation as an International Safe Community; City of Melbourne, Hume City Council, City of Casey.

To enable such a diverse range of individuals and groups to participate, and make the process a worthwhile and enjoyable activity, a variety of processes and methods were employed. These included both electronic and hard copy surveys, individual interviews, sticker dot matrix and targeted and open consultations. The targeted and open consultations deviated from the usual community meetings to include world cafes, photo-language, storying telling, creative visioning and a debate.

A total of 640 people participated in the consultation process and saturation point was achieved, where there was no new information coming out towards the end of the consultation period.

A range of issues were raised, however there were 6 that came out across wards and population groups which were of the most concern to the community. They were:

- Road and pedestrian safety
- Family violence
- Alcohol and other drugs
- Mental health
- Crime
- Natural hazards (emergency management)

Participants were also asked about things that make them feel safe and what they believe could be done to make Cardinia a safer place. The following were common responses:

- Strong sense of community and social connection/cohesion
- Presence of authority eg: police, security
- Access to essential services
- Provision and upkeep of amenities
- Design of environments

Everyone who participated in the consultation process was given the opportunity to provide their contact details so that they could stay informed about what was happening with the information that they provided and how the project is progressing. Providing this opportunity saw 127 individuals provide their contact details. To date, one project update has been circulated to these participants as well as the service providers and managers, team leaders and coordinators who have been involved. These updates will continue to be sent out on a regular basis.

A full community consultation report has been written, which draws together the results of the 3 processes. This report will be a public document that can be shared broadly.

This project has not been referred to the Integrated Advisory Network, as consultation is occurring with all managers, team leaders and coordinators.

A detailed Community Consultation Plan has been developed and is attached for further reference. A comprehensive communications plan is currently being developed to support the consultation plan.

FINANCIAL AND RESOURCE IMPLICATIONS

There are no additional financial or resource implications for Council connected to this strategy.

CONCLUSION

A safe community is not just one that is free of crime, violence and anti-social behaviour; it is one that focuses on safety promotion at all levels, within all areas.

The Cardinia Safer Communities Strategy creates a framework which will identify and treat community safety issues across the municipality.

The development of a strategy connects into the International Safe Communities Model, which is an internationally recognised, evidence based, best practice model premised on collaboration, partnerships and community capacity building to reduce injury and enhance safety.

Through this work, Cardinia Shire Council is creating and leading community partnerships which will systematically and holistically address key strategic safer community's objectives across the municipality.

Cardinia Safer Communities Strategy

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Cardinia is a community working together to build a safe place.

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Message from the Mayor

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1. Creating a safe community

Introduction & Background

Cardinia Shire Council has a long-standing commitment to community safety and crime prevention. In 2014, Council made the commitment to develop a more coordinated and structured approach to creating a safer community and agreed to begin working towards designation as an International Safe Community. At the same time, a decision was made to move away from the term community safety to safer communities so that an all-encompassing, proactive approach was ensured. The designation is a formal process through which Cardinia will be recognised for working to strengthen local safety and injury prevention capacity.

A safe community is not just one that is free of crime, violence and anti-social behaviour; it is one that focuses on creating a safer community at all levels, within all areas. Community safety affects every member of the community and requires all residents and organisations alike to work in partnership to create safer environments.

Building a safe community is multifaceted and requires a coordinated, whole of community approach in order to respond effectively to local and regional issues. The formation of strong partnerships between a wide range of government and community services are critical to achieving outcomes that contribute to a connected, safe and empowered community.

The Cardinia Safer Communities Strategic Committee (CSCSC) was established in April 2016 with the purpose of addressing local community safety, injury and crime prevention issues by working in partnership with all major stakeholders through a whole of community partnership response.

The Cardinia Safer Communities Strategic Committee is chaired by Cardinia Shire Councils General Manager – Community Wellbeing and includes representation from agencies and organisations including but not limited to:

- Cardinia Shire Council
- Victoria Police
- Department of Justice and Regulation
- Emergency Management Victoria
- VicRoads
- Department of Health and Human Services
- Alcohol and Drug Foundation
- Womens Health in the South East (WHiSE)
- Chair of each Action Group

To assist with building a safer community, the Cardinia Safer Community Strategic Committee will support Cardinia's designation as an International Safe Community, and provide leadership in the identification, development and evaluation of activities and programs.

Guiding Principles

This strategy is built on the guiding principles developed collaboratively by the Strategic Committee;



Vision

Cardinia is a community working together to build a safe place.

Strategic Objectives

The Cardinia Safer Communities Strategy will work toward its vision by:

- Strengthening and developing a network of partnerships which enable collaborative approaches to creating a safer community
- Establishing a commitment to long term, sustainable programs which take a whole of community approach to creating a safer community
- Implementing programs and initiatives which take an equitable, tailored approach to meeting the needs of high-risk, vulnerable groups and environments throughout the Shire
- Ensuring evidence based and best practice approaches are used to work towards creating a safer community
- Effectively monitoring the frequency and causes of safety related harm throughout the Shire
- Implementing evaluation measures that assess the effects of change

Priority Areas

Identifying the specific issues facing Cardinia's communities is the first step towards developing an effective and appropriate community response. To accomplish this task, the following information was collected and analysed:

- Insight from Cardinia Safer Communities Strategic Committee, Council staff and other professionals
- Information and advice obtained through a series of targeted and open community consultations
- A literature review of government, academic and non-academic materials
- Collection and analysis of crime, safety and injury data and statistics

Six priority areas were identified:



Implementation of strategy

The Cardinia Safer Communities Strategy provides a framework for the implementation of solutions that aim to improve safety, and perceptions of safety within Cardinia. The Cardinia Safer Community Strategy will be implemented through the Cardinia Safer Communities Strategic Committee and be assisted through the establishment of Action Groups.

Action Groups will be established for each priority area where an existing group is not already in operation. Once established, they will develop action plans for their particular priority area of focus, and have an appointed chair that will join the Strategic Committee and facilitate the flow of information between the Strategic Committee and the Action Group.

It is recognised that there are a number of overlaps between the priority areas and it is expected that activities between the Action Groups will often interact and involve many of the same organisations. It will be important for the Action Groups to communicate regularly through the Strategic Committee to ensure they do not duplicate each other's efforts and maximise the use of available resources.

Evaluation and Measurement

An evaluation plan has been developed to ensure the outcomes of the strategy can be measured for effectiveness, continuous improvement, and accountability and dissemination purposes.

The overall evaluation will be guided by a structured collective impact evaluation framework to help provide a comprehensive picture which outlines the effectiveness of the process, the short to mid-term impacts and the overall outcomes of the project. During the initial three year funded project from 2015-17, the Cardinia Safer Communities evaluation will focus on developmental evaluation and formative (early initiative/program level implementation) evaluation to determine the effectiveness of the designation process and the establishment of a coordinated approach to building a safer community. The ongoing Cardinia Safer Communities evaluation (2018 and beyond – Funding dependent) will implement more summative evaluation activities.

For the priority areas of Emergency Management and Family Violence the Cardinia Safer Communities project will not be looking to implement new programs/initiatives. Rather, it will look to the comprehensive work currently going on within these spaces across Council and by other Cardinia Safer Communities Network members to feed information, data and outcomes into the project as relevant.

The overall community impact of the strategy will be measured by the summative evaluation activities. These evaluation activities will focus on the analysis of various internal and external data sources, plus community consultations, to determine the mid to long term outcomes of the project. Baseline data for this was established in 2015 and a comparison research process will be undertaken every four years.

Communication Plan

A communications plan with a strong focus on the dissemination of the evaluation findings has been developed and implemented in line with the project deliverables. The objectives of the communications plan are:

- To outline effective strategies for the members of the Cardinia Safer Communities Network to communicate internally
- To promote and provide information about the work being undertaken and the outcomes achieved by the Cardinia Safer Communities Network and to spread its key messages to the wider community

- To promote any opportunities for the wider community to become involved in the Cardinia Safer Communities Project
- To improve real and perceived safety outcomes for Cardinia's residents through awareness raising and information dissemination

Review

This strategy will be reviewed every four years from the date it is adopted.

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2. Profile

Cardinia Shire Profile

Cardinia Shire is located south-east of Melbourne and is one of 10 'interface councils' around the perimeter of metropolitan Melbourne, providing a transition between urban and rural areas. The primary urban centre is Pakenham, which is 55km from Melbourne's CBD.

The Princes Highway and Gippsland railway corridor runs east-west through the centre of the Cardinia Shire, providing a key road and rail link between Melbourne and West Gippsland. The western end of this corridor comprises the Cardinia Shire growth area (about 10% of the Shire's land area).

Cardinia Shire has a large rural population; 27 rural townships exist outside the urban growth area, resulting in unique service provision issues. The northern part of the Shire is set in the foothills of the Dandenong Ranges, and includes Bunyip State Park and Cardinia Reservoir. Koo Wee Rup swamp and Westernport Bay are significant features of the southern part of Cardinia Shire.

Population

- Cardinia Shire is among the fastest and largest growing LGAs in Victoria and across Australia.
- Approximately three to four families move into Cardinia Shire every day. This figure has recently decreased from five per day.
- Most recent population estimate is 87,008 (June 2014 ERP), an increase of 3,011 from 2013.
- Population is expected to increase by approximately 41,000 over the next 10 years (2025) and 81,887 over the next 20 years, to a total of 168,895 by 2035.
- Median age of residents is 34 which is two years younger than Greater Melbourne at 36.
- Largest age group cohort is up to four years (currently 6,873), which is expected to increase by approximately 3,822 in the next ten years (2025) and 7,271 in the next 20 years (2035), totalling over 14,000 children.
- Higher than average youth population, with 21 per cent of the population aged between 10–24 years.
- By 2035, the 10–24 age group will increase by around 16,900.

The Victorian Government has nominated the Casey–Cardinia region as one of five regions around the fringe of metropolitan Melbourne where new housing and population growth is to be concentrated. As a result, rapid population growth will happen for the next 20 years within the Shire's designated growth area, comprising the townships of Beaconsfield, Officer and Pakenham.

Cardinia Shire has a higher proportion of young families than the Melbourne average. In contrast, the proportion within the 60-plus age group is lower when compared with metropolitan Melbourne. These patterns are typical of growth areas on the fringe of large cities where young couples often move out from rental accommodation in inner suburbs in search of affordable housing and larger family-sized dwellings.

Approximately 13,940 residents aged 60 and over live in Cardinia Shire, representing 15.1 per cent of the total population. The number of senior residents, aged 60 plus, living in Cardinia Shire is expected to increase to approximately 30,477 by 2035. This increase in the number of older residents will have a corresponding impact on the demand for community and aged services, health services, public transport and local infrastructure.

At the time of the 2011 census, 62 per cent of Cardinia Shire's population identified as having a Christian faith and Catholic was the most prominent denomination chosen by residents. Just 2.9 per

cent of residents identified with a non-Christian religion, the most common being Buddhism. Approximately 29.8 per cent of residents said they had no religion which is a higher proportion compared with Greater Melbourne (23.5%).

While CALD communities comprise only a small proportion of the overall Cardinia Shire population, in line with current population growth this number is increasing. The number of residents from non-English speaking backgrounds is now estimated to be approximately 15 per cent. The most common countries of birth for non-Australian born residents are the United Kingdom, New Zealand, the Netherlands, India, Germany, and Sri Lanka.

Households and housing

- Cardinia Shire has 31,113 households.
- Nearly 40 per cent of households are couples with children, more than the Melbourne average.
- Approximately 27.6 per cent are couples without children and 11 per cent are one-parent families.
- Overall 26 per cent of the population own their dwelling, 48.4 per cent were purchasing and 20 per cent are renting.

Education

In general, Cardinia Shire residents are achieving lower levels of educational and training attainment than elsewhere in metropolitan Melbourne. At the time of the 2011 census, 40 per cent of residents had completed Year 12 or equivalent, compared to the metropolitan Melbourne average of 54.6 per cent. At present, there is no university campus and there are restricted TAFE courses available in Cardinia Shire, which limits the availability of post-secondary education opportunities for residents.

Industry and economy

- More Cardinia Shire residents work in manufacturing than any other industry.
- There are more technicians and trade workers in Cardinia Shire than any other occupation.
- Of the 16,537 people who work in Cardinia Shire, 64.9 per cent (or 10,560) also live in the area.
- Total of 24,471 jobs located in Cardinia Shire in the year ending June 2014.
- Approximately 36,270 persons (95.4%) were employed from a labour force of 38,008.
- Approximately 4.6 per cent of residents were unemployed which is less than metropolitan Melbourne (5.5%)

3. Context

Policy

The following policies and strategies inform and support the work of the Cardinia Safer Communities Strategy. The Cardinia Safer Communities Strategy provides a framework for the implementation of solutions that aim to improve safety, and perceptions of safety within Cardinia.

Creating the future Council Plan 2013 – 2017

The Council Plan sets out Cardinia Shire Council's strategic vision and outlines Council's commitment to the community, key priorities and anticipated challenges over a four year period.

The Council Plan outlines five key strategic objectives. Under the strategic objective of *Our People*, action six is directly related to community safety:

Increased awareness of safety

- Work with the police, State Government and community to improve safety in homes, businesses, public places and roads
- Improve awareness of township safety

Municipal Public Health and Wellbeing Plan 2013 – 2017

The Municipal Public Health and Wellbeing Plan (MPHWP) takes into consideration all aspects of Cardinia Shire's environment and how these impact on the community's health and wellbeing. The MPHWP outlines four domains with a set of priority issues and actions under each. The four areas are Our People, Our Community, Our Environment and Our Economy. This work is reflected in Our Community.

Cardinia Shire Council has a variety of other policies that have implications and relevance for community safety. Key policies and plans include:

- Road Safety Strategy 2011-2014 (PDF, 829KB)
- Bicycle and Pedestrian Strategy
- Reconciliation Action Plan
- Cardinia's Access and Inclusion Policy and Action Plan 2014 – 2017
- Positive Ageing Strategy and Action Plan 2012–15
- Risk management framework and policy
- Injury management policy
- Gender Equity Framework
- Communities That Care Cardinia Action Plan
- Cardinia Municipal Emergency Management Plan
- Youth Strategy 2012–16

4. Priority Areas

Data taken from a number of sources, including perceptions of safety and crime and health statistics have been analysed to give an overview of community safety in Cardinia. In reviewing and analysing current local and state data and undertaking an extensive community consultation, Council has been able to develop a baseline understanding of the Shire's current position and the issues that affect and are important to the community. This review has also provided a platform for moving forward towards achieving designation as an International Safe Community.

Six priority areas were established through this process:

Road, pedestrian and transport related issues

With a geographically large and diverse region, access to safe transportation options is critical to the social and economic wellbeing of the local community. Currently Cardinia Shire is not well serviced by public transport; the community is mostly car dependant. Road and transport accidents inflict an enormous social, economic and health toll on the community, including death, hospitalisation, permanent disability, mental illnesses, loss of income and property damage. Safety for residents while they are commuting within and out of the city is an essential safer community consideration. This priority area is focused around creating and maintaining a network of safe roads, paths and transport options for residents and encouraging their safe use throughout the Shire.

Road, pedestrian and transport safety in Cardinia:

From the 1st July 2008 to the 30th June 2013 there were 30 fatalities in Cardinia Shire. Twenty one of these were men and nine were women. The highest death rate was amongst those aged 18 – 21 years ($n=7$) and of the total fatalities, 2 were cyclists, 1 was a pedestrian and the remaining were related to either cars or motorcycles (VicRoads, 2014). The majority of these fatalities were reported as a result of running off a straight road (TAC, 2015a).

During the same time period there were 452 TAC claims involving hospitalisation. Again, men were overrepresented in this figure, accounting for 289 of these claims with the majority of injuries occurring in the age groups of 18 – 25 and 40 – 59. Of the 452 injuries, 10 were cyclists, 32 were pedestrians, 6 were unknown and the remaining were car or motorcycle related incidents. Just as with road fatalities, the majority of injuries caused by road traffic incidents were as a result of running off a straight stretch of road (TAC, 2015b).

In 2012 it was found that 55% of all fatalities in Victoria occur in rural and regional areas while only 25% of the Victorian population live outside the metropolitan area (TAC, 2012). This is an important statistic to note; given that Cardinia Shire comprises both rural and metropolitan areas.

Family violence

Whether it is apparent or not, family violence impacts negatively on the lives of a huge proportion of the population. Family violence encompasses a broad spectrum of violence that occurs between family members within a range of relationships. Family violence and violence against women in particular, is a national issue affecting all sectors of the community. Preventing family violence is a complex problem which requires a whole-of-community approach and the implementation of multi-level strategies to address this critical issue. Under this priority Cardinia will be focusing on both intervention and prevention strategies to reduce rates of family violence throughout the Shire. Cardinia recognises that programs and policies that work to eliminate gender inequalities and challenge attitudes, beliefs and cultures that condone violence are just as essential as having adequate resources in place to respond to and support survivors of family violence.

Family violence in Cardinia:

Family violence is an increasing problem within Cardinia Shire. According to Victoria Police reports, there were 1364 offences reported in 2014 - 2015 which was 15.58% higher than the Victorian average (Victorian Crime Statistics Agency, 2015). This number has increased steadily over the past three years. It is difficult to determine whether this indicates an increase in overall family violence incidents, or rather an increase in the number of reports made to Victoria Police (Department of Justice, 2012).

Cardinia Shire has the third highest number of family violence offences in the South Metropolitan Region (Victoria Police, 2014) however it is widely recognised that reports to Victoria Police are not indicative of the total number of offences, as many go unreported (Australian Bureau of Statistics, 2005).

Undertaking a detailed analysis of data in 2009 - 2010, Victoria Police (2010) found that:

- 76% of family violence victims in Cardinia Shire were female
- 77% of perpetrators in Cardinia Shire were male
- Of these perpetrators, the majority were either current partners or ex- partners (48% and 17% respectively)
- Ages of both victims and perpetrators varied, however the majority were aged between 25 - 44 years.

In 2013 - 2014 children were reported as being present at 41.4% of family violence incidents occurring in Cardinia Shire. This figure has remained relatively stable over the past three years, with children witnessing 38.9% of family violence incidents in 2012/2013 and 42% in 2011/2012 (Victoria Police, 2014).

Cases of child abuse are also recorded for Cardinia Shire. The latest data relating to child protection substantiations was in 2008 - 2009 where it was found that the rate of substantiations was 4.2 per 1000 children aged 0 to 8 years. Over a five year period ranging from 2004 - 2009 it was found that the rate of substantiated child protection cases has decreased at an average rate of 1.8 per 1000 children aged 0 to 8 years each year (Department of Education and Early Childhood Development, 2010).

The 2015 Communities that Care survey found that family conflict¹ was rated highly by young people across years 6, 8 and 10 (ranging between 32% - 42%) which is a risk factor for family violence (Hall, Smith & Toumbourou, 2015) while participants aged 12 - 17 who completed the 2015 Youth Forum Survey rated being safe at home within the top 10 things that are important to them (43% of females, 33% of males and 30% of those who do not identify as either male or female).

¹ Children raised in families high in conflict are at higher risk for violence, and mental health issues. An example question asked in relation to family conflict was 'We argue about the same things in my family over and over again'.

Crime

Building a safer community incorporates both actual incidents and trends in criminal offences, and a community's perceptions and feelings of safety. This priority area aims to make Cardinia a safer place by decreasing crime rates, improving social inclusion, increasing community participation and addressing antisocial behaviour. Perceptions of safety may not always be linked to recorded incidents of crime, but feelings of safety are integral to community wellbeing and are therefore an important consideration for the Cardinia Safer Communities Strategy.

Crime in Cardinia:

Upon review of the 2014 – 2015 Victoria Police data supplied by the Victorian Crime Statistics Agency (2015) the following crime data was noted as occurring in Cardinia Shire from the period April 2014 to March 2015:

- Crime against the person – 1064.2 per 100,000
- Property and deception offences – 3242.3 per 100,00
- Drug offences – 425.9 per 100,000
- Public order and security offences – 428.1 per 100,000.

Crime rates have remained relatively steady over the past three years with slight increases and decreases across categories over years; however the number of overall offences in Cardinia in 2014 - 2015 were lower than the Victorian average.

Anti-social behaviour can be defined as any behaviour that annoys, disturbs or interferes with a person's ability to go about their normal activities. It is recognised that there are a vast range of behaviours that are considered anti-social; however the two that will be detailed here are hoon driving and vandalism (graffiti).

Hoon driving

During the 2014 Social Health Telephone Survey it was found that:

- Traffic/speeding and antisocial behaviour/hoons were listed in the top three things that residents would like to see less of in their estates (11.9% and 8.1% respectively)
- Hoons contributed to 6.3% of respondents experiencing sleepless nights
- 8.1 per cent of respondents reported that they would like to see less antisocial behaviour/hoons within their estate which was the third highest response (Lethborg, 2015).

In 2013 the rate of vehicle impounds was 7.4 per 10,000 population in Cardinia Shire. Victoria Police can impound a vehicle for high risk driving, dangerous driving or hoon behaviour (VicRoads, 2015). Cardinia Shire was ranked 14th of all LGAs in Melbourne for the number of vehicle impounds (Victoria Police, n.d).

Graffiti

A graffiti audit was conducted over a four week period over February and March 2014 which found that there was a total of 3506m² of graffiti in Cardinia Shire. This included 1899m² on private property, 914m² on council property and 693m² on commercial property (CREM, 2014).

During the 2014 Social Health Telephone Survey, 14% of all residents who participated in the survey stated that they would like to see less vandalism/graffiti in their estate – this was the top response (Lethborg, 2015).

Perceptions of safety

Perceptions of safety are important to consider as areas which are perceived to be safe foster community participation and connectedness, encourage physical activity and improve the health and wellbeing of those who live, work and play in the area (Community Indicators Victoria, 2011). Anecdotally, it is understood that people will act on their perceptions as their perception is their reality.

The 2011 VicHealth Indicators Survey found that 97.5% of adults in Cardinia Shire felt safe walking alone during the day which is on par with the Victorian average of 97%, however this dropped to 71.7% when participants were asked how safe they felt walking alone at night which is slightly about the Victorian average of 70.3% (Victorian Health Promotion Foundation, 2012).

The 2014 Social Health Telephone Survey conducted by Cardinia Shire Council, returned lower results than that of the VicHealth Indicators Survey. 74.9 per cent of residents surveyed reported that their estate is a safe place to live during the day; however, only 58.8% of the same sample reported that their estate is a safe place to live at night.

Mental health related issues

Mental health has a two-fold link to safety. Firstly, mental health acts as a major contributing factor for intentional injury insofar as self-harm and suicide are concerned and secondly, the community can at times, perceive people with a mental health issue as unsafe to be around. Having access to affordable and accessible mental health and community services is essential to community safety and wellbeing. Given the geographically dispersed placement of Shire residents and the relatively sharp increase of people moving into the growth corridor regions over a short amount of time there is an evident lack of accessible mental health services available throughout Cardinia. This priority area will focus on addressing this service gap and working to improve the mental health outcomes and levels of social connectedness for all residents.

Mental Health related issues in Cardinia:

According to the 2011-2012 Victorian Population Health Survey, lifetime prevalence of depression and anxiety amongst residents of Cardinia Shire was slightly lower than the Victorian average (15.6% and 19.9% respectively). Women had significantly lower levels of lifetime prevalence of depression and anxiety compared to the Victorian average (17.4% and 25% respectively) (Department of Health, 2014a).

The 2015 Communities that Care survey results indicated that depressive symptoms are high in school children who are in years 6, 8 and 10 (31% in year 6 and over 50% in years 8 and 10). Compared to year 8 Australian students, year 8 students in Cardinia Shire report significantly higher levels of depressive symptoms (Cardinia Shire 51% and Australia 41%).

The Department of Education and Early Childhood Development (2011) Adolescent Profiles which draws on data from the 2009 Adolescent Health and Wellbeing Survey also collect data on the mental health of young people which can be used to support some of the Communities that Care survey results. The following mental health indicators were higher in Cardinia Shire than the Victorian average:

- 43.2% of adolescents do not have positive psychological development² (Victorian average – 38.9%)
- 17.2% of adults do not have someone to turn to for advice when they have problems (Victorian average – 13.9%)
- 25.9% of adolescents are not satisfied with their quality of life (Victorian average – 22.9%).

However when it came to the number of adolescents who report experiencing high levels of psychological distress, adolescents in Cardinia Shire experienced distress at levels 2.8% lower than the Victorian average (8.3% and 13% respectively).

² Positive psychological development refers to an adaptive and healthy state of social and emotional functioning. Positive psychological development is indicated by perceptions of autonomy (sense of personal agency), relatedness (positive connection with others) and competence (feeling capable or masterful).

The 2015 Youth Forum Survey indicated that the top 5 issues of concern for young people in the Shire all related to mental health. They were school or work related stress, stress, being unhappy, anxiety and body image.

Body image

4.3 per cent of adolescents in Cardinia were reported as having an eating disorder which was higher than the Victorian average of 2.4% and SMR average of 2.7% (Department of Education and Early Childhood Development, 2011). As mentioned above, body image along with being overweight were listed within the top 10 issues of concern for young people within the Shire. This was higher amongst females and those who identify with a gender other than male or female.

Intentional injury is usually reserved for describing self-harm, suicide, violence and homicide whereas unintentional injury can be used to describe a far broader range of incidents such as falls, drowning, poisoning, DIY injuries and road traffic accidents.

Intentional injury

Injury can be categorised into intentional and unintentional. Intentional injury refers to those which are self-inflicted or purposely inflicted upon another, whereas unintentional injury refers to those which are accidental and where no harm is premeditated (World Health Organisation, 2015).

Intentional injury is usually reserved for describing self-harm, suicide, violence and homicide whereas unintentional injury can be used to describe a far broader range of incidents such as falls, drowning, poisoning, DIY injuries and road traffic accidents.

From the period 2001 – 2005 the suicide rate across all age groups in Cardinia Shire was 13.6 per 100,000 persons which was the highest rate in the SMR and the third highest rate in Melbourne (Victorian Health Information Surveillance System, 2014). Two people per 1000 population were treated in hospital for intentional injury (Department of Health, 2014b).

In July 2015, a coronial investigation was commissioned after a number of suicides were reported amongst youth aged 13 – 24 in Cardinia Shire. It was found that over a three year period there were ten suspected suicides which met the definition of a suicide cluster according to the Centres for Disease Control and Prevention (Jamieson, 2015).

Hospitalisation due to self-harm amongst young people aged under 24 was reported as 107.9 per 100,000 in 2010 and 116.6 per 100,000 in 2011. However, since 2011 the rates of hospitalisations due to self-harm have reduced in this age category (Jamieson, 2015).

Bullying

The 2010 Adolescent Profile indicates that 46.5% of adolescents reported being bullied recently in Cardinia Shire which is higher than the Victorian average of 44.6% and the SMR average of 42.4% (Department of Education and Early Childhood Development, 2011).

Data collected internally also shows a concern for bullying amongst young people within the Shire. According to the 2015 Communities that Care survey, over one quarter of all students in years 6, 8 and 10 reported that they had been bullied recently (year 6 – 35%, year 8 – 45%, year 10 – 26%). The results of the 2015 Youth Forum Survey undertaken around the same time showed that bullying was in the top 10 issues of concern overall but was of particular concern for those aged 12 – 14 and 15 – 17 years. Gender was not shown to effect experiences of bullying. Importantly to note; bullying has been identified within the top ten issues of concern for young people for the past six years.

In the same survey young people were asked what one thing would be that they would like to see change to help young people in Cardinia Shire, 'stop bullying' was the 5th top response.

Young people stated that social media was a cause of bullying which indicates that the form bullying takes may have adapted over time, as social media has become more common³.

³ Further investigation into the role that social media plays in the social, psychological and physical health and wellbeing of young people may be warranted.

Alcohol and Other Drugs

In order to build a safer community for Cardinia this priority area will work towards minimising the harmful impacts of alcohol and other drugs. Local governments are often confronted with the consequences of alcohol misuse and illicit drug use; these can include alcohol-related assaults, injuries, car crashes, property damage and other forms of anti-social or illegal behaviour (Australian Drug Foundation, 2012). Alcohol consumption is widely accepted and celebrated in Australian culture, yet its misuse continues to be one of the world's top public health issues. In 2012, the World Health Organisation estimated that 5.1% of the global burden of disease was due to the harmful use of alcohol. Problem alcohol and other drug use in our community is a complex issue, with many factors contributing to the continued abuse and misuse of these substances. Prevention efforts must be multifaceted, take a coordinated approach and work to address these contributing factors to have any hope of success.

Alcohol and other drug related issues in Cardinia:

Alcohol related harm is a term that is used to describe the range of effects caused by alcohol consumption including individual harm, social impacts and economic impacts (Planisphere, 2013). Alcohol consumption has obvious implications for an individual's health including risks to personal safety from alcohol related injury and death; however there are also significant social impacts.

According to Planisphere (2013, p.8) the social impacts of alcohol consumption include:

- Crime and disorder caused by intoxicated persons
- Public safety implications
- Family violence and the impacts on children, including underage drinking
- Road trauma when alcohol consumption contributes to car crashes.

The economic cost of alcohol related harm was estimated to be \$4.3 billion in Victorian in 2007 – 2008 (Planisphere, 2013).

Drinking is described using either short or long term risk. Short term risk refers to the effect that alcohol has immediately following consumption, whereas long term risk refers to the more permanent effects of sustained patterns of alcohol consumption over time (Department of Health, 2014a).

Short term risk of alcohol related harm

According to the 2011-2012 Victorian Population Health Survey (Department of Health, 2014a):

- 33.6 per cent of the Cardinia Shire population who drank at low risk levels were at risk of short term harm and 49.9% who drank at risky or high risk levels were at risk of short term harm (Victorian average – 35.8% and 45.3% respectively)
- 30.3 per cent of men who drank at low risk levels were at risk of short term harm (Victorian average - 33.2%)
- 56.8 per cent of men who drank at high risk levels were at risk of short term harm (Victorian average – 52.6%)
- 36.2 per cent of women who drank at low risk levels were at risk of short term harm (Victorian average – 38.4%)
- 43.8 per cent of women who drank at risky or high risk levels were at risk of short term harm (Victorian average – 38.3%).

Long term risk of alcohol related harm

According to the 2011-2012 Victorian Population Health Survey (Department of Health, 2014a):

- 79.8 per cent of the Cardinia Shire population who drank at low risk levels were at risk of long term harm (Victorian average – 35.8%)

- 3.5 per cent⁴ of people who drank at risky or high risk levels were at risk of long term harm (Victorian average – 3.3%).

According to Turning Point (2015), in 2012 – 2013 men represented the highest number of presentations to the emergency department and call outs for ambulance attendance due to alcohol related harm in Cardinia Shire, however the rate still remains below the Victorian average (16.1 and 17.2 per 10,000 respectively). Women in Cardinia Shire were more likely to be hospitalised at a rate of 36.17% higher than the Victorian average due to alcohol harm (50.6 and 35.1 per 10,000 respectively).

Men in Cardinia Shire presented to the emergency department for illicit drug related harm at higher rates than women and at a rate of 25.81% higher than the Victorian average (3.5 and 2.7 per 10,000 respectively). Although women presented at lower rates than men, they presented at rates 52.63% higher than the Victorian average (1.2 and 0.7 per 10,000 respectively).

Of concern are the rates of alcohol and drug use amongst Cardinia Shire's younger population.

According to the same data provide by Turning Point (2015) those aged 15 – 24 in Cardinia Shire are overrepresented in drug and alcohol statistics. In 2012 – 2013 rates of presentation to the emergency department due to alcohol related harm amongst this cohort was 25% higher than the Victorian average (32.4 and 25.2 per 10,000 respectively).

Young people aged 15 – 24 in Cardinia Shire presented to emergency departments for harm caused by illicit drugs at a rate of 190.07% higher than the Victorian average (9 and 4.3 per 10,000 respectively) however rates of hospitalisations were 20.99% lower (16.2 and 20 per 10,000 respectively).

This supports the Adolescent Profiles provided by the Department of Education and Early Childhood Development (2012), which reports the following figures for 15 – 17 year olds within Cardinia Shire:

- 56.5 per cent reported drinking in the past 30 days (Victorian average - 24.7%)
- 13.9 per cent reported ever using marijuana (Victorian average - 10.9%)
- 6.9 per cent admitted to using other illegal drugs (Victorian average - 3%).

The 2015 Communities that Care survey results also indicated that adolescent alcohol use is common amongst young people in Cardinia Shire:

- Lifetime alcohol use is high in each year level (year 6 - 22%, year 8 - 36%, year 10 - 52%)
- Recent alcohol use (past 30 days) is reported by 29% of year 10 students
- Binge drinking in the last two weeks is reported by 2% of students in year 6, 6% in year 8 and almost one fifth of students in year 10 (19%).

These young people reported that the main supplier of alcohol is parents (year 6 – 60%, year 8 – 58%, year 10 – 36%).

Compared to year 8 Australian students, year 8 students in Cardinia Shire report significantly lower levels of lifetime and recent alcohol use and solvent use (Hall, Smith & Toumbourou, 2015).

⁴ Estimate has a relative standard error (RSE) of between 25 and 50 per cent and should be interpreted with caution.

Emergency Management

The economic, social and environmental effects of emergencies including loss of life, destruction of property and dislocation of communities are inevitable. Cardinia Shire has been subjected to emergencies that have resulted in damage to property and disruption to the community. Hazards exist within all communities whether they are recognised or not. Coping with their associated risks and the subsequent consequences of those risks should they be realised is the purpose of emergency planning (MEMP, 2015). Given Cardinia Shire's vast and varying geographical region, almost all natural hazards that can affect a community are present in the Shire. This includes bushfires, grassfires, floods, storms and heatwaves. Typically the 'hills' areas of Gembrook, Cockatoo, Emerald and surrounds are at risk of bushfire while those suburbs which lie south of the Princes Highway are located in a flood-prone area.

Goal: To implement the agreed arrangements for the prevention of, the response to, and the recovery from, emergencies that could occur within Cardinia Shire.

Objectives:

- Implement measures to prevent or reduce the causes or effects of emergencies;
- Manage arrangements for the utilisation and implementation of municipal resources in response to emergencies;
- Manage support that may be provided to or from adjoining municipalities; regional, state and or federal instrumentalities;
- Assist the affected community to recover following an emergency; and
- Complement other local, regional and State planning arrangements.

(Cardinia Shire Municipal Emergency Management Plan 2015)

Natural Hazards in Cardinia:

Cardinia Shire has a long history of flooding and bushfires which has resulted in property loss and damage, stock loss and even loss of life. Through recorded history Cardinia Shire has witnessed many significant emergency events which, from the 1930's onwards) include;

Year	Location	Incident	Impact
1934	Koo Wee Rup	Flooding	Major flooding
1935	Koo Wee Rup	Flooding	Major flooding only five months after previous
1937	Koo Wee Rup	Heavy rainfall	Excess rainfall over 600 points Koo Wee Rup flooding
1939	Eastern Victoria	Bushfire (Black Friday)	2 million hectares/71 deceased
1956	Cardinia Shire	Heavy rainfall	Heavy rain and flooding
1959	Cardinia Shire	Heavy rainfall	Widespread flooding / upper catchments
1971	Swamp area	Flooding	Significant flooding
1978	Pakenham	Heavy rainfall	Widespread flooding in Pakenham CBD

Year	Location	Incident	Impact
1983	Cardinia Shire	Bushfire(Ash Wednesday)	180 homes destroyed/21 deceased
1991	Koo Wee Rup	Extensive flooding	Flooding of the Koo Wee Rup swamp
1996	Koo Wee Rup	Widespread flooding	Damage to crops, riverbanks overflowing Iona
2009	Bunyip State Park	Bushfire (Black Saturday)	45% of park burnt by wildfire
2009	Lakeside/Pakenham	1/100 year storm event	180 mm rainfall in 24 hours 4-5 Feb 2009
2011	Pakenham/Officer	Heavy rainfall	Over 150mm in eight hours causing extensive flooding
2012	Koo Wee Rup area	Heavy rainfall/flooding	Widespread flooding Koo Wee Rup and surrounds

In 2015, Council's CREM Unit undertook consultations in Kooweerup, Maryknoll and Emerald to establish the hazards that the community perceived to be the greatest risk to their community. Floods and fires were identified as the main natural hazards that were of concern to the community.

- Flood was highlighted as the number one concern for those in Kooweerup
- Flood was rated as the second major concern for Maryknoll after bushfire
- Bushfire was rated as the main concern for the community of Emerald
- Storm was considered to be in the top five priorities for these communities
- Heatwave was also a concern to communities

Related Documents

[Cardinia Safer Communities Consultation Report](#)

Cardinia Shire Municipal Emergency Management Plan 2015 - [INT1618323](#)

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