Patterns of Injuries among 0-19 year olds in the Goldfields, 2001-2011

The Goldfields region is WA’s largest region, located in the south eastern corner and covering 770,488 square kilometers. The major population centres include Kalgoorlie, Leonora, Laverton, Norseman and Esperance. The region has a number of Aboriginal communities as well as a large fly-in fly out workforce servicing remote mine sites. Over half of the population lives in Kalgoorlie-Boulder where mining is the sector. In the south of the region agriculture and aquaculture are prominent with tourism also a predominant industry in the region.

Hospital services are available in Coolgardie, Esperance, Kalgoorlie, Kambalda, Laverton, Leonora, Menzies and Norseman. Aboriginal Health Services and the Royal Flying Doctor Service play a vital role in the regions health care and where necessary, patients are flown to Perth for treatment.

Demographics

17,038

Children reside in the Goldfields region on average per year

15%
Aboriginal

85%
Non-Aboriginal

Child Injury Stats

3
Child deaths due to injury each year

3,539
Goldfields children treated each year for an injury

384
Goldfields children hospitalised each year for an injury

Government of Western Australia
Department of Health
The Goldfields region recorded the fourth highest injury death rate (20.1 deaths per 100,000) and the fourth highest hospitalisation rate (2,253.8 per 100,000) among 0 to 19 year olds when compared to all other regions in WA. The Goldfields region also recorded the fifth highest injury hospitalisation rate of Aboriginal children in WA with 3,249.9 per 100,000 compared to 2,074.4 per 100,000 for non-Aboriginal children.

When child injury hospitalisations are broken down by gender, males aged 0-19 years were more likely to be hospitalised for an injury in the Goldfields region accounting for 2,867.8 per 100,000 compared to females with a rate of 1,607.6 per 100,000.

The majority of hospitalisations (88.8%, n=3,170) were due to unintentional circumstances. Causes of unintentional injury resulting in hospitalisation in the Goldfields include:

**Falls (24%)**  **Transport Accidents (22%)**  **Burns & Scalds (5%)**  **Poisoning (5%)**

### PRIORITIES FOR PREVENTION

- Raise awareness within the community of the causes of childhood injury and the extent of the problem.
- Convey to the community that childhood injuries are largely preventable.
- Involve key community stakeholders such as parents, carers, child care services, educators, health professionals and sporting organisations.
- Provide culturally appropriate information with a specific focus on injuries to Aboriginal children, children of low-socio economic status and those living in remote communities.
- Encourage supervision as the most important method in the prevention of childhood injuries.
- Promote the use of child car restraints and direct parents and carers to qualified type 2 child car restraint installers.
- Educate children and young people on how to stay safe on and around roads.
- Encourage community members to keep children away from hot items that could burn or scald such as camp fires, hot tap water and hot food and drink.
- Educate community members on how to keep young children safe in and around water.

For further information on childhood injury prevention and resources that may be useful in your region please visit the Kidsafe WA website: [www.kidsafewa.com.au](http://www.kidsafewa.com.au)

### REFERENCES
