

INTRODUCTION

Barwon Health is committed to improving health over a full spectrum of care. Barwon Health's Healthy Communities Unit (HCU) develops, implements and evaluates health promotion initiatives that promote health and prevent poor health before it occurs.

Our work aligns to priorities and outcomes in the *Community Health - Health Promotion Guidelines 2021-25* and the *Victorian Public Health and Wellbeing Plan 2019-23*, focusing on action to:

- Increase healthy eating
- Increase active living
- Reduce tobacco (& e-cigarette) related harm
- Prevent violence against women
- Increase mental health and wellbeing through a co-benefits approach
- Address climate and health through a co-benefits approach

We have continued to implement the following statewide programs in our local region:

- Achievement Program
- Healthy eating focused programs including; Healthy Eating Advisory Service, Healthy Choice Guidelines, Vic Kids Eat well, and the Victorian Menu Planning Guidelines for Long Day Care
- Quit Programs

ABOUT THIS REPORT

This report outlines the major achievements over the 2021-2022 reporting period and includes:

- A summary of the way we work, the settings we reach and the ways in which we have applied key practice principles to our work
- Key achievements and impacts across the 2021-22 reporting period
- Lessons learnt and future directions for each of our priority areas
- Our response and impacts resulting from the ongoing challenges of the COVID-19 pandemic

ACKNOWLEDGMENT OF COUNTRY

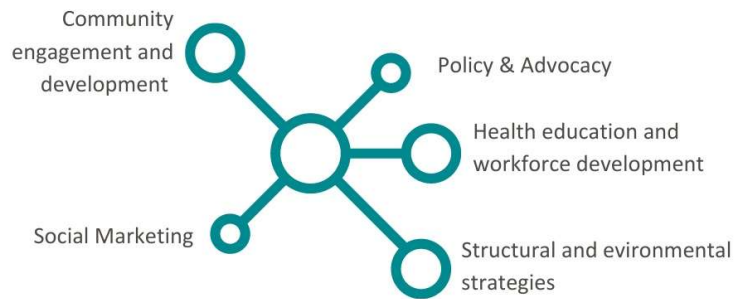


We, Barwon Health, acknowledge the Traditional Owners of the land, the Wadawurrung people of the Kulin Nation. We pay our respects to the Elders both past and present. We thank the Traditional Owners for custodianship of the land and celebrate the continuing culture of the Wadawurrung people, acknowledging the memory of honourable ancestors.

THE WAY WE WORK

The Healthy Communities Unit (HCU) applies a place-based approach to optimise our reach and engagement with the community in the places that they live, learn, work and play.

“ Together with our community we build healthier lives



OUR SETTINGS AT A GLANCE



EDUCATION & EARLY YEARS

- Healthy Eating
- Active Living
- Prevention of Violence Against Women

- Active Living
- Prevention of Violence Against Women

SPORT & RECREATION



- Healthy Eating
- Active Living
- Mental Health and Wellbeing
- Prevention of Violence Against Women
- Reducing Tobacco Related Harm



COMMUNITY

- Healthy Eating
- Active Living
- Mental Health and Wellbeing
- Prevention of Violence Against Women
- Reducing Tobacco Related Harm

HEALTH



- Healthy Eating
- Active Living
- Mental Health and Wellbeing
- Prevention of Violence Against Women
- Reducing Tobacco Related Harm



WORKPLACES



HEALTHY EATING

Healthy Choices program

The Healthy Choices Guidelines have been developed by the Victorian Government to help organisations, including Health Services, offer and promote healthier food and drink options¹. The HCU has been working on implementing these guidelines since 2013.

In April 2021, the Victorian government published the new *Healthy Choices policy directive for Victorian public health services*, requiring public health services to provide and promote healthier foods and drinks through all in-house retail, vending machines and catering services. Based on the existing Healthy Choices guidelines, the policy directive includes a new requirement that no high sugar (RED category) drinks are sold or promoted and that artificially sweetened (AMBER category) drinks are a maximum of 20% of total drinks displayed.

PROGRESS

- A comprehensive audit of food and drinks supplied through in-house retail and vending machines was completed. Planograms and recommendations were prepared to comply with the policy directive by Department of Health’s deadline of 30th September 2022.
- A Barwon Health staff survey was conducted to evaluate the existing Healthy Choices marketing materials at University Hospital Geelong (UHG). The findings will inform the development of new marketing materials to encourage increased consumption of healthier food and drink options.



Sample planogram for UHG drinks fridge

Barwon Health UHG cafeteria in educational video – Healthy Choices: Understanding Drinks Targets by HEAS



Screen shots from HEAS video production ¹ filmed at UHG cafeteria April 2022.

¹ <https://www.health.vic.gov.au/preventive-health/healthy-choices>

KEY MEASURED IMPACTS

Results from an internal food and drinks audit in March 2022 highlighted considerable progress in the reduction of access to RED category drinks in both retail outlets and vending machines across UHG sites (see Figures 3 & 4). A priority focus on increasing availability of GREEN foods and drinks is now required in order to meet Healthy Choices compliance requirements by September 2022.

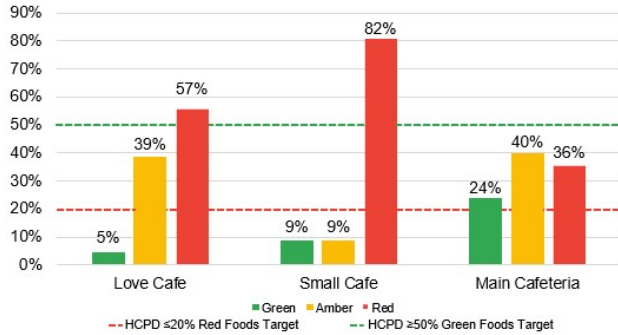


Figure 1: Classification of food items at individual retail outlets at UHG (March, 2022)

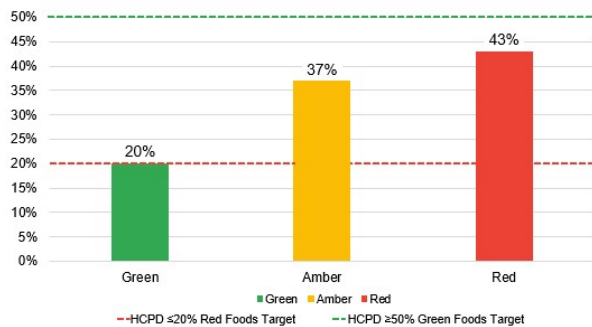


Figure 2: Total GREEN, AMBER and RED foods at all UHG retail outlets (March, 2022)

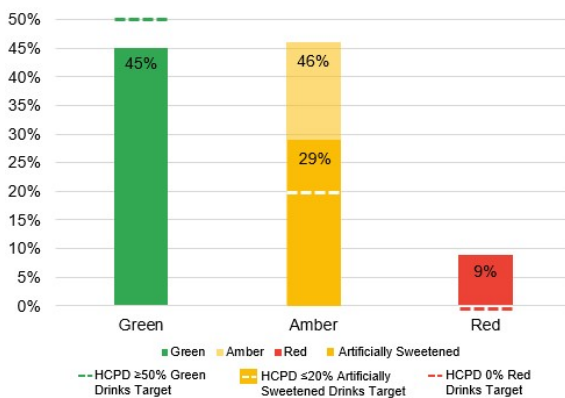


Figure 3: Total GREEN, AMBER and RED drinks at all UHG retail outlets (March, 2022)

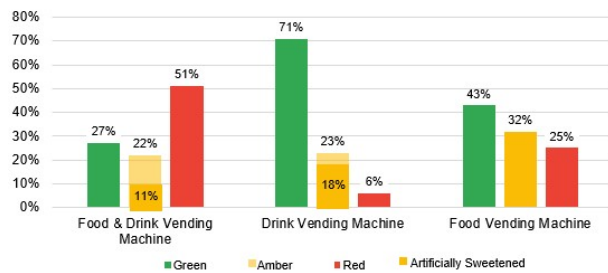


Figure 4: Classification of vending machines in UHG (March, 2022)

OVERVIEW 2021 - 2022

KEY ACHIEVEMENTS

- Completion of audit for entire supply of in-house retail food and drink at UHG through Deakin University dietetic student project
- Completion of a staff-wide survey (n= 151 responses), evaluating effectiveness of the existing Healthy Choices marketing materials
- Barwon Health was selected by the Healthy Eating Advisory Service to participate in an instructional video on how to implement the Healthy Choices policy directive
- Journal article published in the Health Promotion Journal of Australia on prior work to remove sugar sweetened beverages from Barwon Health
- Recognition by the Victorian Healthy Eating Enterprise for contribution to research during their December 2021 forum

CHALLENGES

- Retirement of UHG Cafe Manager and resignation of Food Service Manager resulted in staff absences for 3-months and led to slower progress. Further, food service staff turnover made communication of key changes challenging.

COVID-19 IMPACTS

- The Barwon Health Healthy Choices working group meetings were difficult to recommence due to COVID-19 challenges
- Unable to capture public opinion of Healthy Choices marketing material due to retail outlets being closed to patients and visitors
- Reduced onsite presence of Health Promotion Dietitian impacted engagement & relationships with food service staff.

LEARNINGS AND FUTURE DIRECTIONS

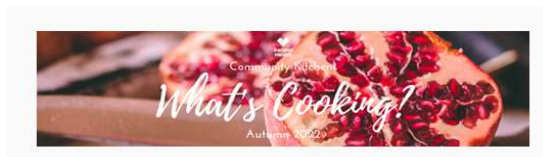
- Key focus areas moving forward will include - alignment with Healthy Choices policy directive; completing an audit of the in-house retail food and drink supply at McKellar Centre; and developing new marketing materials based on findings from the staff survey
- Recommence Healthy Choices working group to ensure consistent communication of the Healthy Choices policy directive and to improve engagement and relationship building with food service staff.

Community Kitchens initiative

The HCU continues to oversee the implementation of the Community Kitchens (CK) initiative in our region. This initiative works with participants in a range of settings to support social connections and access to healthy food. It aims to improve participant’s knowledge and skills in planning, budgeting and cooking nutritious meals.

PROGRESS

- Evaluation of the CK online communication and marketing strategies completed.
- Re-engagement and capacity building of community organisations and CK facilitators to host and support the running of community kitchens in the region.



What's Cooking? Autumn eNewsletter screenshot



Screenshot Geelong Advertiser Article – Community Kitchen (March 2022)

KEY MEASURED IMPACTS

An evaluation of the CK online communications and marketing strategies was conducted over a six month period (Nov 2021 - April 2022). The evaluation aimed to understand the reach and engagement levels of the ‘What’s Cooking?’ eNewsletter and the Community Kitchen website, and if any changes to these communication strategies are warranted.

The evaluation concluded that:

1. The ‘What’s Cooking?’ eNewsletter has a stable and high level of reach, however engagement could be improved.
2. The CK website showed a period of decreasing reach although during April 2022, the website reach started to improve. Across the data collection period, website engagement was low but wide-spread across a range of countries.

OVERVIEW 2021 - 2022

KEY ACHIEVEMENTS	<ul style="list-style-type: none">• CK online communication and marketing strategies evaluated• Management of the CK website, including updates to the online training materials for facilitators• Delivery of the quarterly 'What's Cooking?' eNewsletter with an average reach of 97 subscribers• Supported CK facilitators, including recruitment, training, and coordination of the CK facilitator network meetings. Four facilitator training sessions held (n= 7 participants) and two network meetings held (n= 6 participants)
CHALLENGES	<ul style="list-style-type: none">• Recruiting volunteers to the CK facilitator role• Management/ staff turnover in host organisations
COVID-19 IMPACTS	<ul style="list-style-type: none">• COVID-19 lockdowns caused host organisation closures and prevented running of CK's particularly during July - Dec 2021• Barwon Health staff redeployment and working from home directives impacted on capacity to coordinate the CK initiative.
LEARNINGS AND FUTURE DIRECTIONS	<ul style="list-style-type: none">• Continue to support the re-establishment of CK's to meet community needs• Continue to improve online engagement and marketing strategies;<ul style="list-style-type: none">○ CK Coordinator to improve understanding of the target audience of the 'What's Cooking?' eNewsletter and review the eNewsletter content based on their needs○ CK Coordinator to work with the HCU Communications team to develop a CK website engagement strategy that improves engagement with CK's in the G21 region

Victorian Menu Planning Guidelines program for early learning centres

The *Victorian menu planning guidelines* assist education and care services to plan and provide nutritious food to children and meet certain requirements of the National Quality Standard, helping children to get the best start in life^{2,3}. During 2021-22, the HCU established a new pilot program aiming to review and update a menu with one early learning centre. This pilot program will inform future directions for supporting early learning centres across the G21 region to implement the Victorian menu planning guidelines and improve the health and safety of children across the region.

PROGRESS

- Early learning centre (ELC) key contacts and locations were mapped within the region.
- Successfully implemented the pilot program, including:
 - Program flyer developed and provided to pilot ELC
 - Facilitated training sessions with ELC staff including an introduction to the Victorian menu planning guidelines
 - Staff were provided access to, and completed, the Healthy Eating Advisory Service (HEAS) training portal menu planning course
 - Menu revised and updated by the pilot ELC with support from a Barwon Health Health Promotion Officer
 - ELC menu assessed using HEAS FoodChecker database to ensure requirements were being met



Program flyer – Menu planning ELCs

As a result, the pilot ELC menu now meets the Victorian menu planning guidelines and the ELC can use their FoodChecker report to assist in meeting National Quality Framework standards.



Health Promotion Officer working alongside chef and manager at ELC pilot site

² <http://heas.health.vic.gov.au/sites/default/files/ECS-Menu-planning-guidelines-LDC-2020.pdf>

³ <https://www.acecqa.gov.au/nqf/national-quality-standard/quality-area-2-childrens-health-and-safety>

KEY MEASURED IMPACTS

As a result of successfully implementing the Victorian menu planning guidelines with the pilot ELC, 108 children are now being provided 50% of their nutritional requirement needs during the days they attend the ELC.

OVERVIEW 2021 - 2022

KEY ACHIEVEMENTS	<ul style="list-style-type: none">• Developed, promoted and implemented a Victorian menu planning guideline pilot program with one ELC• Facilitated face to face and online training with the pilot ELC• Pilot program reached 108 children, who are now receiving 50% of their nutritional requirements on the days they attend the ELC
CHALLENGES	<ul style="list-style-type: none">• ELC staff availability resulted in delayed response times/meetings, which impacted the pilot program implementation roll out
COVID-19 IMPACTS	<ul style="list-style-type: none">• COVID-19 restrictions and Barwon Health staff redeployment resulted in a delayed program roll out
LEARNINGS AND FUTURE DIRECTIONS	<ul style="list-style-type: none">• Leveraging off existing programs and resources (eg. HEAS FoodChecker database and online training portals), has enabled program implementation. It has also supported increased ELC staff uptake, training and support networks• We will continue to evaluate the pilot program by facilitating focus group discussions with staff, to investigate program effectiveness and help inform decision making to roll out the Victorian menu planning guidelines more broadly across ELC's in the City of Greater Geelong

CASE STUDY: Lessons learned from a pilot menu review program at an early learning centre in the City of Greater Geelong

The Healthy Communities Unit (HCU) takes a place-based approach to improve health and wellbeing outcomes across key settings in the G21 region. During 2021-2022 the HCU implemented the Victorian menu planning guidelines program for early learning centres. This is a statewide initiative that aligns to strategic actions in the *Victorian public health and wellbeing plan 2019-2023*⁴ and the *Community Health - Health Promotion Guidelines 2021-25*⁵, focusing on the acceleration of healthy food and drink supply policy in a key public setting, increasing access to healthy foods in the community, and supporting healthier environments.

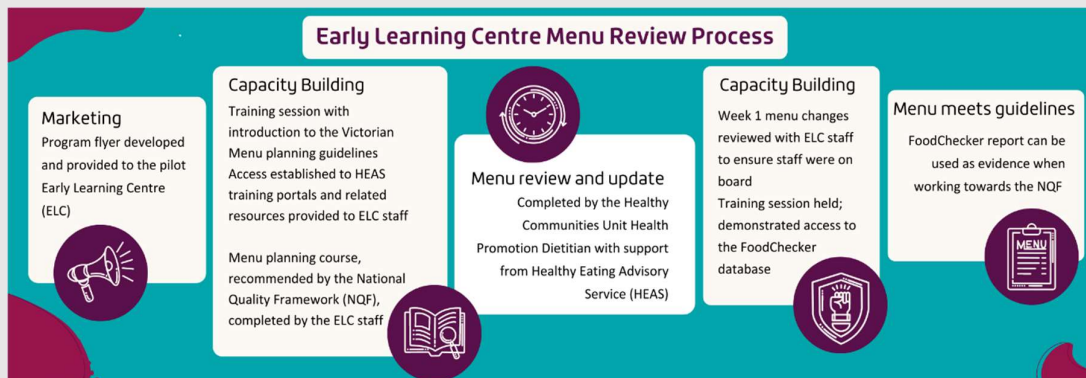
Nutrition in early childhood influences both short and long term health, including growth and development and risk of overweight and obesity and related chronic disease^{6,7,8}. Food preferences and dietary patterns are developed in early childhood and can influence later dietary habits^{9,10}.

In Victoria, early childhood services are recommended to use the Healthy Eating Advisory Service (HEAS) menu planning guidelines for long day care when developing menus. Following these guidelines can help long day care services meet the National Quality Framework (NQF); a national approach to regulation, assessment and quality improvement for early childhood education and care across Australia¹¹.

In order to understand how to best support early learning centres (ELC's) in the City of Greater Geelong, to review and update their menus and ensure compliance against the *Victorian Menu Planning Guidelines*, a pilot program was completed with one local centre.

Implementing a pilot program with early learning centres in the Geelong region

There are thirteen ELC's in the Geelong region working towards meeting the NQF. After engaging with these ELC's, one centre was chosen to participate in the pilot program after being identified as highly motivated and committed to improving their healthy food and drink provision.



⁴ Victorian State Government Department of Health, 2019. *Victorian public health and wellbeing plan 2019-23*. Available: <https://www.health.vic.gov.au/publications/victorian-public-health-and-wellbeing-plan-2019-2023>

⁵ Victorian State Government Department of Health, 2021. *Community Health - Health Promotion 2021-25*. Available: <https://www.health.vic.gov.au/publications/community-health-health-promotion-2021-25>

⁶ World Health Organization, 2016. *Report of the Commission on Ending Childhood Obesity*; World Health Organization: Geneva, Switzerland.

⁷ Sanders, R.H.; Han, A.; Baker, J.S.; Cobley, S., 2015. *Childhood obesity and its physical and psychological co-morbidities: A systematic review of Australian children and adolescents*. *Eur. J. Pediatr.*, 174, 715-746.

⁸ Liberali, R.; Kupek, E.; de Assis, M.A.A., 2020. *Dietary patterns and childhood obesity risk: A systematic review*. *Child. Obes. (Print)*, 16, 70-85.

⁹ Gillman, M.W., 2010. *Early infancy - A critical period for development of obesity*. *J. Dev. Orig. Health Dis.*, 1, 292-299.

¹⁰ Ventura, A.K.; Worobey, J., 2013. *Early influences on the development of food preferences*. *Curr. Biol.*, 23, R401-R408.

¹¹ Australian Children's Education and Care Quality Authority, 2021. *National Quality Framework*. Available: <https://www.acecqa.gov.au/national-quality-framework>

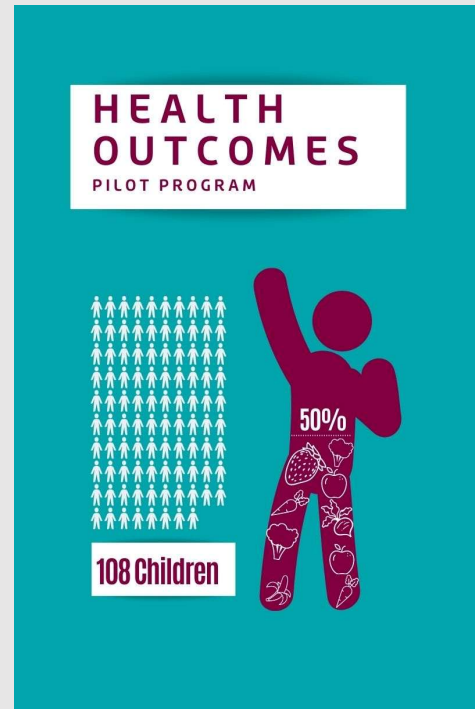
Outcomes of the pilot program

We were able to successfully implement the *Victorian menu planning guidelines* at the pilot ELC and as a result, this ELC is now meeting the guideline recommendations. The ELC can now also utilise the HEAS FoodChecker compliance report to assist them in meeting the NQF. By reviewing and updating the ELC's menu we were able to reach 108 children that attend the centre.

As a result, 108 children are now receiving 50% of their nutritional requirement needs during the days they attend the ELC.

Lessons learned

- 1) **Recruitment** is critical to the success of this program. Through the use of motivational interviewing techniques we were able to get key stakeholders within the centre on board with the pilot program.
- 2) **Capacity building** is strengthened and more effective when completed face to face. In person on-site recipe discussions and food service database training resulted in staff being able to access their own recipes and make changes to the database as required.
- 3) **Clear and transparent communication** to ensure ELC kitchen staff are driving the changes and selecting recipes that are practical within the centre. Working alongside the staff and identifying what is already working well and what small achievements can be made (e.g. modifying recipes already being used by the centre) is a successful method.
- 4) **Relationship building** is important for ongoing implementation of the program. Working with HEAS to ensure the correct menu guideline recommendations and methods for implementation are provided will assist in scaling up the program to other ELCs.



Next steps

The HCU will continue to work with the pilot ELC to investigate program effectiveness and help inform decision making to roll out the *Victorian menu planning guidelines* more broadly across ELC's in the City of Greater Geelong. The long-term aim is to ensure all ELC's within the region are meeting the *Victorian menu planning guidelines* and ultimately, ensure the provision and promotion of healthier food and drink across key public settings.

Vic Kids Eat Well initiative

Vic Kids Eat Well (VKEW) is a new state wide movement delivered by Cancer Council Victoria's (CCV's) Achievement Program in partnership with HEAS. It harnesses the power of community and aims to transform food and drink environments where children live, learn and play¹². Since the roll out of VKEW in October 2021, the HCU has been building networks and engaging with key settings to establish strong relationships that will enable future implementation of VKEW in the G21 region. The aim of our VKEW initiative is to encourage primary schools and out of school hours care to take small, achievable actions that will support improvements in healthy food and drink supply and access.

PROGRESS

- Schools and out of school hours care (OSHC) services mapped within the region.
- After the VKEW website went live in October 2021, began active marketing using the VKEW stakeholder kits, resources and program plan outline.
- Engagement opportunities were identified and partnerships formed with City of Greater Geelong, Bellarine Community Health and Colac Area Health.
- Key stakeholder meetings held with CCV's VKEW Coordinator regarding local marketing strategies, and draft local marketing resources have been developed.
- In May 2022 successfully recruited one school and one OSHC service, with initial VKEW roll out to occur in June - July 2022.



Image on left–
Vic Kids Eat Well
Facebook page

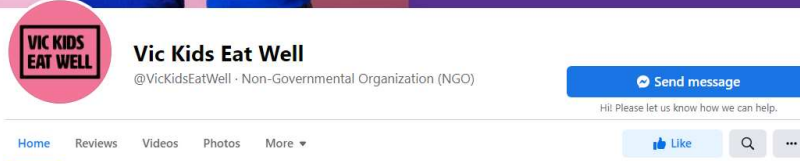


Image below -
Vic Kids Eat Well
Webpage



¹² <https://www.vickidseatwell.health.vic.gov.au/>

OVERVIEW 2021 - 2022

KEY ACHIEVEMENTS	<ul style="list-style-type: none">• VKEW engagement opportunities identified - new network formed and database of local schools/OSHC created• Partnerships formed with organisations also working with schools and OSHC settings in the region• On-boarded one school and one OSHC service to commence the VKEW program
CHALLENGES	<ul style="list-style-type: none">• As a new setting within the HCU healthy eating priority area, creating school/OSHC databases was an extensive process• Networking and gaining access within these settings has also been challenging, particularly with ongoing impacts of COVID-19
COVID-19 IMPACTS	<ul style="list-style-type: none">• Delayed VKEW campaign (due to closure of schools)• Delayed HCU program roll out due to COVID-19 restrictions and Barwon Health staff redeployment
LEARNINGS AND FUTURE DIRECTIONS	<ul style="list-style-type: none">• Will continue with local marketing strategies to encourage increased uptake of schools and OSHC to join the VKEW movement

Healthy Retail initiative

This new initiative aims to develop a healthy retail intervention in an environment in which people buy their food and beverages to promote healthier diets. The intervention will include a focus on minimising environmental impact and reducing diet-related chronic health conditions.

PROGRESS

- Completed literature reviews and scoping to inform a project plan that will continue to be built upon during the next reporting period 2022-23.

Literature review evidence was gathered primarily from international sources with evidence emerging from recent interventions in Australia. Studies which look at improving healthy eating through interventions targeting supermarkets, focus on in-store marketing, shelf nutrition labels, price promotions, modifications to store architecture and point-of-sale interventions. Studies which examine retailers promoting sustainability and climate change mitigation, focus on sustainable consumption/green retailing, consumer perceptions/behaviours, marketing/advertising, packaging/product labels, meat production/consumption/alternatives and organic food. These findings will inform the development of a protocol for a healthy retail intervention, with a focus on minimising environmental impact.

OVERVIEW 2021 - 2022

KEY ACHIEVEMENTS	<ul style="list-style-type: none">• Formed connections and networks with individuals and organisations working in the healthy retail space. This included attendance at two VicHealth Healthy Supermarket Community of Practice events• Completed three literature reviews; healthy retail interventions and climate change, healthy retail interventions and sustainable food systems, and healthy retail interventions and population health outcomes• Analysis of local, state and national data relating to nutrition, chronic disease and climate change statistics
CHALLENGES	<ul style="list-style-type: none">• This is a new initiative and will take time to build towards implementation of the initiative during the next reporting year
COVID-19 IMPACTS	<ul style="list-style-type: none">• As a result of Barwon Health staff redeployment, staff capacity was diverted from this initiative
LEARNINGS AND FUTURE DIRECTIONS	<ul style="list-style-type: none">• Findings from the literature review will inform program planning, including development of a project plan with background, evidence, objectives, timelines and budget and commencing engagement of key stakeholders (i.e. universities, community health services and supermarkets).

INFANT program

INFANT is a program designed by Deakin University to help parents and families. The program promotes healthy eating, increased active play and reduced screen time for babies from birth until two years of age and consists of four group sessions for parents/caregivers, which are led by an INFANT facilitator.

PROGRESS

- Completed training to become an INFANT program facilitator.
- An initial partnership was formed with Surf Coast Shire (SCS) to support facilitation of the INFANT program within the Surf Coast Shire. Support withdrawn after guidance received from Victorian Government Department of Health on an updated role of CH-HP funded organisations in implementation of INFANT.
- Also explored a partnership with City of Greater Geelong (CoGG), however there is currently limited capacity for CoGG to commit to INFANT service delivery.

OVERVIEW 2021 - 2022

KEY ACHIEVEMENTS	<ul style="list-style-type: none">• Completed training to become an INFANT facilitator• Explored partnership opportunities within the G21 region• Co-development of presentations for SCS INFANT sessions• Attended one state-wide INFANT Community of Practice meeting
CHALLENGES	<ul style="list-style-type: none">• SCS adapted the INFANT delivery model to suit local population needs; this presented challenges as the adapted model did not align with the INFANT training program• Limited capacity from CoGG Maternal Child Health Nurse and Barwon Health Community Dietitian to implement the INFANT program in the region
COVID-19 IMPACTS	<ul style="list-style-type: none">• Capacity to support facilitation of SCS INFANT sessions was restricted due to COVID-19 government restrictions
LEARNINGS AND FUTURE DIRECTIONS	<ul style="list-style-type: none">• INFANT delivery model and session content may need to be adapted to suit the needs of specific local populations and to increase parent and caregiver enrolment/engagement• Future directions will be to support referral pathways and promotion of INFANT rather than in delivery of the program as per CH-HP guidelines



ACTIVE LIVING

The HCU is working to increase active living of community members engaging with G21 workplaces and routine healthcare services. Working with our partners, we are creating Active Workplaces and exploring ways to increase awareness of healthy lifestyle counselling programs that target active living.

Being physically active is not only important for our physical health, it is also critical in supporting strong mental health and wellbeing. Physical inactivity can increase the risk of developing cardiovascular diseases, diabetes, cancer and poor mental health¹³.

PROGRESS

In the first year of our four year plan, HCU's Active Living work has focused on building on established partnerships and networks targeting workplace settings. We are working to enhance capacity of workplaces to develop and implement a whole of organisation approach to increase physical activity at work through the uptake of the Healthy Workplaces Achievement Program (WAP), providing learning opportunities, and raising awareness of the physical, social and emotional benefits of being more active.

*Image below –
Active Geelong partnership
event*



*Image on right –
Post shared on
Barwon Health's Facebook
page promoting
National Close the Gap Day*



¹³ Commonwealth of Australia Department of Health (2021). National Preventive Health Strategy 2021–2030. Available from: <https://www.health.gov.au/sites/default/files/documents/2021/12/national-preventive-health-strategy-2021-2030.pdf>

Ride to Work Day is on October 20

Ride to Work day is on the horizon, and for those who are working on site, it is a chance to consider making the commute to work for part of or the whole of your journey. Regular cycling commuters will have experienced the mental and physical health benefits that come from actively travelling to and from work. And it is a great way to impact climate change too.



OVERVIEW 2021 - 2022

<p>KEY ACHIEVEMENTS</p>	<ul style="list-style-type: none"> • Strengthened partnerships with local agencies on strategies to increase Active Living in workplace settings • Delivery of capacity building event “Active Geelong and Barwon Health are proud to be helping workplaces get back on their feet in 2022” • Workplace Health eNewsletters and social media increased awareness of active living and associated co-benefits to mental health, cultural awareness and health equity
<p>CHALLENGES</p>	<ul style="list-style-type: none"> • Initiatives need to be more adaptive & flexible to cater for evolving workplace practices including on site, off site and work from home conditions • Workplace engagement diminished due to staff turnover and role changes
<p>COVID-19 IMPACTS</p>	<ul style="list-style-type: none"> • HCU staff redeployment and reduced capacity has impacted delivery of preventative health initiatives, workplace engagement and exploration of partnership opportunities • Workplace operations continue to be impacted by COVID-19
<p>LEARNINGS AND FUTURE DIRECTIONS</p>	<ul style="list-style-type: none"> • The prioritisation of mental health & wellbeing at a national, state and local level is an opportunity to effectively engage workplaces by emphasising the co-benefits of active living on mental, social and emotional wellbeing • Collaboration with Active Geelong to develop the Active Geelong Active Workplaces awards for Dec 2022 will align with the Physical Activity benchmark of WAP and provide an opportunity for workplaces to achieve benchmark recognition • Re-engage and explore opportunities with local routine healthcare services to increase awareness & promotion of referrals to healthy lifestyle programs • The impacts of COVID-19 on physical activity levels of workers is an emerging field of research that requires further investigation



REDUCING TOBACCO (AND E-CIGARETTE) RELATED HARM

The HCU has begun work to inform the community of the risks of tobacco and e-cigarettes, encourage those addicted to tobacco to seek support to quit, and prevent further uptake of tobacco and e-cigarettes.

As there is strong evidence showing the uptake of these behaviours is linked with mental health concerns, and Australians living with mental illness are five times more likely to smoke¹⁴, we are applying a mental health lens to this work.

PROGRESS

Changing the environment

The Global Network for Tobacco Free Healthcare Services (GNTFHS) awarded Barwon Health with Gold forum membership in 2020. To achieve this, Barwon Health implemented policies and pathways across our organisation to reduce tobacco use and harm. These are now being reviewed with support from the Healthy Communities Unit to include e-cigarettes.

We are working with the Mental Health teams within Barwon Health as they commence implementation of the [Equally Well in Victoria](#) framework that, along with other health practices, guides mental health services to address the high rates of smoking in their client population.

To increase workplace capacity to support workers who wish to quit smoking, and to develop smoke-free environments, the HCU presented a webinar on 'World No Tobacco Day' May 31st. This webinar provided information on the association of smoking to stress and mental health issues, and encouraged workplaces to complete the Smoking Benchmark of the Workplace Achievement Program.

Building capacity

We commenced reviewing our training resources and clinical pathways for health staff. However, updated guidance from the Department of Health for CH-HP funded organisations was to take a 'support' rather than 'lead' role, and thus, this objective will not carry over to future planning. The work has enabled us to forge strong connections with our clinical community and mental health staff that has contributed to progress in developing appropriate workplace and community messaging. We will continue to contribute to this work by facilitating consumer consultation to the development of care pathways.

¹⁴ Greenhalgh, EM., Jenkins, S, Stillman, S., & Ford, C. (2018) Smoking and mental health. In Greenhalgh, EM, Scollo, MM and Winstanley, MH [editors]. *Tobacco in Australia: Facts and issues*. Melbourne: Cancer Council Victoria; 2018. Available from <http://www.tobaccoinaustralia.org.au/chapter-7-cessation/7-12-smoking-and-mental-health>

Engaging the community

In line with directions proposed by Cancer Council Victoria (CCV), the HCU developed a month-long campaign: 'Give Smoking Away this May'. Working closely with consumers (see case study below), a media release and series of seven social media posts were developed that acknowledged the components of mental health and addiction when trying to quit smoking, and supported the community to persist in efforts to quit smoking through seeking the support of Quitline, Be Smokefree clinicians, and other qualified health specialists.

KEY MEASURED IMPACTS

The media campaign resulted in two known self-referrals to the Be Smokefree clinics. We continue to ask new referrals for knowledge of the campaign to monitor effectiveness.

Bay FM radio interviewed a Be Smokefree clinician and posted extracts from this interview throughout the day on 31st May. This achieved a reach of 51,800 people.

The webinar reached organisations across the state as well as the G21 region. Of note was the number of health organisations that attended seeking guidance for their work in the tobacco space. Feedback was positive and indicated they were taking further actions. The webinar was recorded and has been shared through the 'Healthy Workplaces Newsletter' and is available through our webpage and upon request.

OVERVIEW 2021 – 2022

KEY ACHIEVEMENTS	<ul style="list-style-type: none">• Give Smoking Away this May webinar was successfully presented to 16 attendees, and is now publically available online.• Media campaign achieved a large reach and facilitated increased uptake of clinical services to quit smoking.• Re-invigorating Barwon Health's Gold Standard of the GNTFHS• Embedding a mental health lens to our work to reduce smoking
CHALLENGES	<ul style="list-style-type: none">• The CH-HP guidelines changed to shift the focus, which was initially on internal clinical pathways, to one of community actions. The guidelines also have a new a focus on e-cigarettes• The inclusion of e-cigarettes has necessitated substantial learning and new target groups.
COVID-19 IMPACTS	<ul style="list-style-type: none">• The first six-months of this reporting period were impacted by redeployment and inability to reach workplaces or the community
LEARNINGS AND FUTURE DIRECTIONS	<ul style="list-style-type: none">• Mental Health messaging linked to tobacco is getting a good community response• Use of e-cigarettes does not appear to have the same drivers as tobacco.• We are continuing discussions with other organisations to explore a shared, cohesive regional response to e-cigarette use.

CASE STUDY: Embedding a mental health lens into the ‘Give Smoking Away this May’ social media campaign

Tobacco use is the leading contributor to disease and death burden, being responsible for nine per cent of disease burden, and almost 13 per cent of deaths in Australia.

In Victoria, smoking claims about 4,400 lives each year [14].

20.1% of Greater Geelong residents are smokers. However the 3214 region has the second highest number of smokers in Australia with 32.8% of resident's smoking [15].

Tobacco use is the leading contributor to disease and death burden in Australia, being responsible for nine per cent of disease burden and almost thirteen per cent of deaths. In Victoria alone, smoking claims about 4,400 lives each year¹⁵. 20.1% of Greater Geelong residents are smokers and the 3214 region has the second highest number of smokers in Australia with 32.8% of resident's smoking¹⁶.

Bringing a mental health lens to our work

Smoking has been linked to mental health concerns. Some people smoke as ‘self-medication’ to ease feelings of stress¹⁷. Job stress has been found to be positively related to smokers continuing to smoke¹⁸. However, research has shown that smoking actually increases anxiety and tension¹⁹. Australians living with mental illness are five times more likely to smoke²⁰.

Intervention

The HCU developed a month-long campaign in partnership with the mental health team and smoking cessation services in Barwon Health that produced several messages through multiple channels, with the intention of encouraging people in our community to stop smoking. Called “Give Smoking Away this May” it featured a core message of the link between stress and addiction with a kinder approach where we understand that, for most people, quitting smoking may take many attempts. The campaign encouraged people who wish to quit smoking to seek support to help them through their quit journey.



In order to ensure our media release and social media messages conveyed appropriate-to-audience information we sought oversight by smoking cessation clinical experts and our mental health education team.

The Barwon Health Mental Health team includes a Lived Experience workforce available to advise on actions and information. We engaged two individuals with a lived experience of anxiety who were current smokers; one aged in their 20's and one in their 50's and both had made several attempts to quit smoking. Their (paid) role was to examine the content for readability and potential triggering content, logical sequencing of the messages, as well

¹⁵ Department of Health Victoria (2022). Online. <https://www.health.vic.gov.au/chief-health-officer/tobacco-free-living>

¹⁶ VicHealth Indicators survey (2015). Online https://www.vichealth.vic.gov.au/-/media/VHIndicators/Regional-city/Vic161_GreaterGeelong_indicator_v6.pdf?la=en&hash=FB75BD159755D47A9C1EB9347739D801DB282829

¹⁷ Lawless M, Harrison K, Grandits G, Eberly L, and Allen S. (2015) Perceived stress and smoking-related behaviors and symptomatology in male and female smokers. *Addict Behav.* 2015 Dec; 51: 80–83.

¹⁸ Ayyagari P and Sindelar J. (2010). *The Impact of Job Stress on Smoking and Quitting: Evidence from the HRS* B E J Econom Anal Policy. 2010 Jan 1; 10(1): art27.

¹⁹ Moylan S, Jacka F, Pasco J and Berk M. (2013). How cigarette smoking may increase the risk of anxiety symptoms and anxiety disorders: a critical review of biological pathways. *Brain Behav.* 2013 May; 3(3): 302–326.

²⁰ Greenhalgh, EM., Jenkins, S, Stillman, S., & Ford, C. (2018) Smoking and mental health. In Greenhalgh, EM, Scollo, MM and Winstanley, MH [editors]. *Tobacco in Australia: Facts and issues.* Melbourne: Cancer Council Victoria; 2018. Available from <http://www.tobaccoinustralia.org.au/chapter-7-cessation/7-12-smoking-and-mental-health>

as ensuring the message content was 'hitting the mark' of being understanding and supportive as well as informative.

Outcomes

At the end of the three weeks, both returned thorough responses to all questions reinforcing strengths of the campaign:

- Both agreed that the shift away from physical health concerns of smoking to mental health concerns was appropriate. *"Smokers, in my opinion, understand that they need to reduce and quit their intake of tobacco products, and aren't unaware of the harm it causes - however, aren't necessarily concerned about harm minimisation or quitting fully, without external or internal compulsion, something which this campaign provides."*
- Both valued the multiple messages sequenced in a progressive manner toward action.
- Both valued the 'kinder' approach. *"The emphasis on being kind to one's self might contribute to bettering a smoker's self-esteem, and rightly so, to believe they're worthy of the care needed to quit smoking".*
- Although both stated that they were unaware of Barwon Health Be Smokefree clinical support, they liked the multiple references to supports available. *"The most influential components I found were, firstly, that it doesn't or shouldn't have to be a solitary journey, and that support is essential to success. Secondly, the messaging that Barwon Health is willing and available to provide many different support services, most smokers know about Quit Line, but I don't think many would know the day itself, or what Barwon Health has to offer to assist with the process."*
- Both agreed that the campaign prompted action.



and prompting some significant changes:

- Language use: *"With regard to the media release and social media posts provided, it could be viewed, by some members of the community, as slightly condescending in certain areas."*
- Introducing a discussion on financial concerns adding to anxiety and stress of smoking.
- Identifying that many images needed changing to be as supportive as the text.
- Suggestions of this campaign being further developed to support workplaces are now being advanced by our team. *"If employers could get on board with providing this material and promoting the day itself, I think you would see a greater reduction."*

Lessons learned

1. Clinical experts provide valuable information and have the capacity to shape a campaign, but those with a lived experience provide insights beyond this, identifying both strengths and areas for improvement within our work.
2. The processes implemented by the Barwon Health Mental Health team to engage community representatives with a lived experience were respectful: including the need for a job/task description, a written application process, and payment for time. It highlighted the value of community representatives being experts in their field. It is hoped to extend this work through implementing a population survey and developing a shared 'Group Model Building' approach with our community to develop future initiatives.



WORKPLACE HEALTH

The Workplace Health (WPH) initiative aims to increase healthy eating, improve mental health and wellbeing, reduce harm from smoking, alcohol and other drugs, and increase active living of workers within the G21 region. Through the delivery of a range of multi-level strategies including local implementation of the state-wide Healthy Workplaces Achievement Program (WAP)²¹, the WPH initiative supports development of healthy workplace environments that promote the health and wellbeing of workers.

Barwon Health
Workplace Health

Have your say on your Workplace Health needs!

The Barwon Health Workplace Health Team aims to support local workplaces to achieve better health and wellbeing outcomes for their employees.

The Workplace Health Team is conducting a survey to better understand the health and wellbeing needs of workplaces and if the Workplace Health initiative is meeting these needs. We need your input to help inform how we can best support your workplace health needs.

WPH Needs Assessment Survey e-mailed on April 26 2022

Give Smoking Away This May
FREE WEBINAR: Creating Smoke Free Workplaces

As part of Barwon Health's 'Reducing Tobacco Related Harm Programme', please join us this World No Tobacco Day to:

- Understand the link between stress, anxiety and addiction
- Explore the smoking benchmark of the Healthy Workplace's Achievement Program
- Hear how another workplace has reduced smoking in their setting

Date: Tuesday 31 May 2022
Time: 2pm - 3:15pm
Cost: FREE
To register, please click here: <https://bit.ly/au20v7>

There will be further information on the day about grants available to help support your workplace with stop smoking initiatives.

For more information, please email workplacehealth@barwonhealth.org.au
barwonhealth.org.au

Flyer for Give Smoking Away this May Webinar on May 31 2022

PROGRESS

- Continued to support opportunities for workplaces to build capacity in developing and implementing workplace health initiatives via:
 - Learning forums
 - Barwon Workplace Health Network meetings
 - Workplace Health eNewsletters
- Strengthened partnerships with key local agencies with a focus on reducing tobacco related harm and increasing physical activity

²¹ <https://www.achievementprogram.health.vic.gov.au/workplaces>

KEY MEASURED IMPACTS

Workplace Health needs assessment survey summary:

The Workplace Health needs assessment survey aimed to understand the health and wellbeing needs of workplaces and the appropriateness of current Workplace Health initiative strategies in meeting these needs. While the response rate was low (n=11), preliminary insights into the current health and wellbeing needs of local workplaces can be made from the data.

Workplaces identified health and wellbeing priorities that aligned to the Achievement Program. The top health and wellbeing priorities for workplaces are Mental Health (58%), Physical Activity (19%) and Healthy Eating (11%).

OVERVIEW 2021 -2022

<p>KEY ACHIEVEMENTS</p>	<ul style="list-style-type: none"> • Delivery of capacity building event, May 2022: Give Smoking Away this May: Workplaces Webinar, presented in conjunction with Smoking Cessation clinicians and two workplaces • Conducted WPH initiative needs assessment. Responses provided feedback on current WPH priorities, and WPH initiative engagement / satisfaction • Give Smoking Away Workplace Grant program developed to encourage uptake of the Smoking Benchmark of the WAP • Hosted 3 online WPH Network meetings • Four Workplace health eNewsletters issued to an average distribution of 280
<p>CHALLENGES</p>	<ul style="list-style-type: none"> • As a result of increased staff turnover within workplaces and following two years of disruption, maintaining engagement with workplace settings has been challenging • Understanding the wellbeing priorities for workplaces in our region coming out of two years of COVID-19 related disruptions
<p>COVID-19 IMPACTS</p>	<ul style="list-style-type: none"> • Barwon Health staff redeployment impacted staff capacity within the WPH initiative • COVID-19 public health restrictions impacted face to face forums/meetings leading to ongoing use of virtual platforms • Response to COVID-19 restrictions in workplaces is variable and continues to change e.g. onsite working, working from home or hybrid working models.
<p>LEARNINGS AND FUTURE DIRECTIONS</p>	<ul style="list-style-type: none"> • Workplaces are still managing impacts of COVID-19. Survey results identified mental health as high priority. Future engagement needs to emphasise the co-benefits to mental wellbeing • Continue developing skills in utilising online platforms to improve online based initiatives/support • WPH Network members continue to value opportunities to networking and learn from each other



PREVENTION OF VIOLENCE AGAINST WOMEN

In line with new directions within the Community Health - Health Promotion guidelines, Barwon Health has transitioned from a lead role to supporting initiatives within our region that align with the Victorian Government's *Free From Violence* strategy and underpin the Our Watch, VicHealth and ANROWS *Change the Story* primary prevention frameworks. Our work focuses on young people across all regional schools, newly arrived refugees, and settings that enable active bystander roles to be enhanced such as workplaces and health settings.

PROGRESS

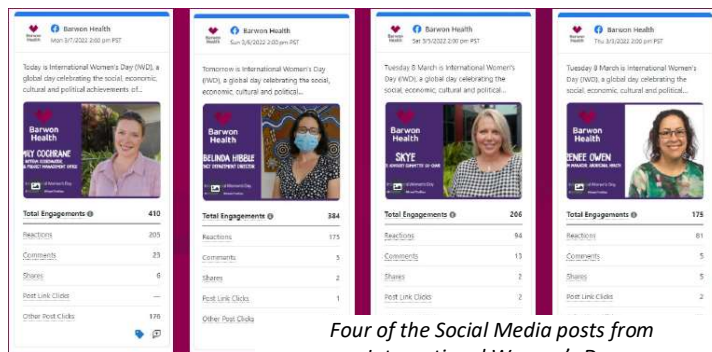
Creating community messaging

We completed the *Health Literate Messages Toolkit for the Prevention of Violence against Women*. This now includes a social media component consisting of 15 Facebook messages and over 20 twitter posts, and is publicly available through our webpage. All agencies and individuals who participated in the survey distributed in 2019 have been contacted to make them aware of this revised version.

Illustration from Health Literate Messages Toolkit



Building community capacity



Four of the Social Media posts from International Woman's Day

'International Women's Day' was celebrated through connecting this with our actions to meet the Gender Equality Act. We utilised social media to highlight women within Barwon Health who have broken through traditional boundaries in work areas dominated by men.

Developed a Gender Impact Assessment toolkit adapted for our health priority areas (Healthy Eating, Active Living and Reducing Tobacco Related Harm), and are utilising this to support the requirements for the organisation to meet the Victorian Gender Equality Act.

We are again working with diverse communities in partnership with Cultura to address understanding of gender-based issues within newly arrived younger communities. This is occurring through a series of community co-designed videos to be translated into language.

Developing skills and knowledge

We continue to support primary and secondary schools to develop skills and knowledge to create gender-equal communities through transitioning the Respect Cup into ongoing, school-based programs available through the City of Greater Geelong.

Updated the online Respect Cup resource to meet the new requirements of schools to introduce consent education by 2023.



The Respect Cup was awarded the VicSport Community Sporting Event of the year 2021. Netball Victoria accepted the award on behalf of all partners.

OVERVIEW 2021 – 2022

<p>KEY ACHIEVEMENTS</p>	<ul style="list-style-type: none"> • The Health Literate Messages Toolkit for the Prevention of Violence against Women was completed and is now available online. • The Respect Cup is an annual event coordinated by Barwon Health and presented in partnership with many other agencies. It provides a day of workshops that promote gender equality and safety and builds the confidence and skills of students to intervene safely in situations of disrespect, inequity, and gender-based violence. The day concludes with a round-robin netball match where participants are judged on the respect they show others. This year the Respect Cup was awarded the VicSport Community Sporting Event of the year 2021. • The development and pilot implementation of a Gender Impact Assessment toolkit within our Healthy Communities Unit has increased awareness within health priority area programs.
<p>CHALLENGES</p>	<ul style="list-style-type: none"> • The change from ‘lead’ to ‘support’ role, at the same time that many partner agencies were also losing their capacity to work in the area, made it difficult to transition much of the work.
<p>COVID-19 IMPACTS</p>	<ul style="list-style-type: none"> • COVID-19 continued to impact delivery of school-based work as remote learning and the inability to gather resulted in cancellation of Respect Cup (and other) events, and we were unable to access schools or engage them in new initiatives until 2022. • The prevalence of violence against women increased throughout the pandemic. The inability to take a lead role means that the health services are not able to address this beyond our current actions.
<p>LEARNINGS AND FUTURE DIRECTIONS</p>	<ul style="list-style-type: none"> • Introducing Gender Impact Assessments to our work has increased the gender awareness of our other health priority areas. Impact measures will be implemented in the future • Strong, collaborative partnerships broadened reach, refined projects and enabled us to adapt our actions from lead to support within our community-based projects



MENTAL HEALTH AND WELLBEING

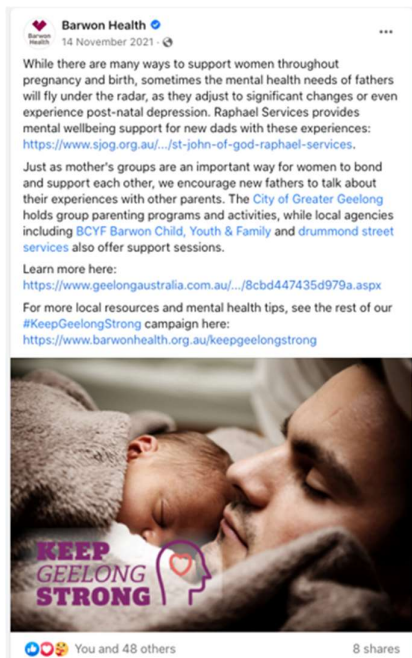
Across Victoria, Mental Health Promotion Officers (MHPO) are funded by the Department of Health Mental Health Division. In the Barwon Region, the MHPO is a member of the Healthy Communities team. This co-location of the MHPO provides a unique opportunity to integrate health promotion priorities with mental health promotion and implement a true co-benefits approach.

Local needs influence the focus of the MHPO's who come together six weekly in a state-wide leadership meeting to share resources and offer consultation to the Department of Health on matters pertaining to mental health promotion activities across the state.

PROGRESS

To better understand what influences healthcare workers from seeking wellbeing help and support, a literature review was undertaken on stigma.

The review highlighted a need for those with lived experience to be educating others on reducing stigma as evidenced in the paragraph below.



Stigma is a well-documented global barrier to health seeking behaviour ... serving to reduce opportunities, fuel social inequities and ... exacerbate poor health²². The Royal Commission into Victoria's Mental Health System²³ recognises that "stigma and discrimination are ever present". Stigma reduction is a linchpin to promoting mental health and wellbeing and preventing mental illness. Griffiths' meta-analysis (2014)²⁴ found that educational interventions including people with lived experience of mental illness were highly effective.

Image on left - Screenshots from 12 week social media campaign "Keep Geelong Strong" posts supported by Mental Health & wellbeing promotion officer – (19 unique posts in total)

²² Stangl Anne L. et al. (2019) *The Health Stigma and Discrimination Framework: a global, cross cutting framework to inform research, intervention development, and policy on health-related stigmas*. BMC Medicine 17:31

²³ State of Victoria, Royal Commission into Victoria's Mental Health System, Final Report, Volume 1: A new approach to mental health and wellbeing in Victoria, Parl Paper No. 202, Session 2018–21 (document 2 of 6)

²⁴ Griffiths KM et al (2014) *Effectiveness of Programs for reducing the stigma associated with mental disorders. A meta-analysis of randomized control trials*. World Psychiatry 13: 161-175

OVERVIEW 2021 – 2022

KEY ACHIEVEMENTS	<ul style="list-style-type: none"> • Lead role in the National Mental Health Promotion Community of Practice in cohort with Prevention United • Lead role in the Mental Health Drugs and Alcohol Services Community of Practice within Barwon Health • ‘Royal Commission Summary from Mental Health Promotion’ perspective document developed and piloted with Bellarine Community Health • Provided background consultation on #KeepGeelongStrong campaign; 12 weeks of daily messages via Barwon Health social media platforms • Mental health promotion lens tool development to support HCU Health Promoters in delivering mental wellbeing co-benefits
CHALLENGES	<ul style="list-style-type: none"> • Lack of clarity in what constitutes mental health promotion • Capacity building required in understanding mental health promotion • Limited investment in mental health promotion to date
COVID-19 IMPACTS	<ul style="list-style-type: none"> • Re-deployment to COVID-19 Contact Tracing roles led to reduced staffing capacity • 2021 Grants Program significantly interrupted due to COVID-19
LEARNINGS AND FUTURE DIRECTIONS	<ul style="list-style-type: none"> • Mental Health Promotion is a unique role and has a unique scope within the Barwon Region, Barwon Health, and the HCU – to develop clear understanding of the offerings of the role within the region



APPLYING PRACTICE PRINCIPLES

SYSTEMS THINKING IN PRACTICE

Systems thinking capacity building

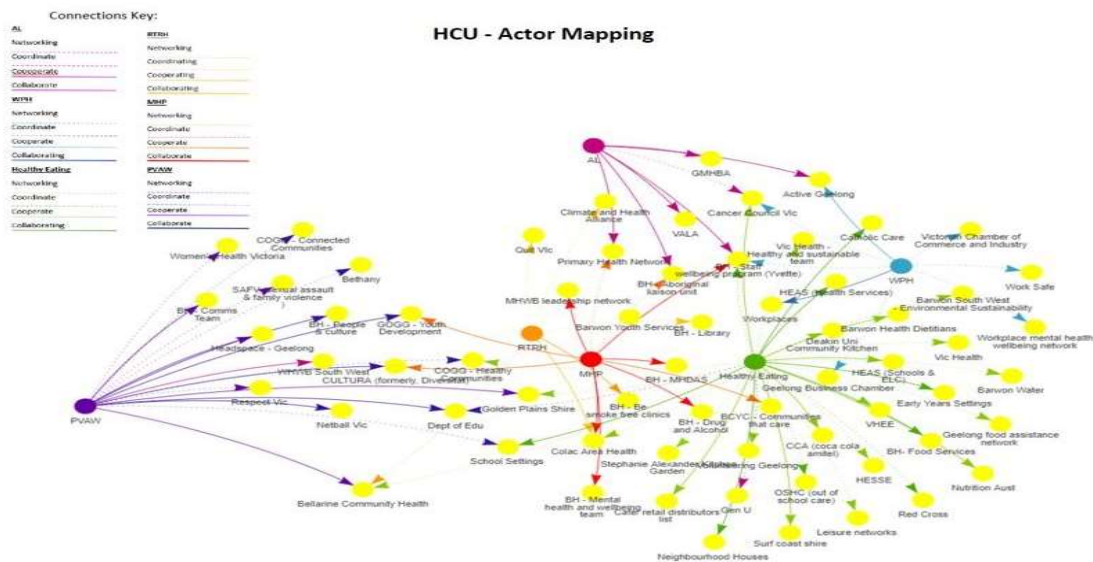
During the 2021-22 reporting period, the HCU delivered two systems thinking capacity building sessions for Barwon Health staff. Thirteen staff attended the training, which built knowledge in systems thinking at the prevention and population health level and supported skill development through applying systems tools in practice. Evaluation showed that 100% of participants agreed or strongly agreed that their awareness of strategies had increased and the training was highly valuable:

‘The session run by the Healthy Communities team is thought provoking and provides tangible tools for systems thinking for participants to take away and apply in their clinical workplace settings. With such engaging, interactive content the team have been asked to increase their presentation time to accommodate the learning needs of the participants.’

The HCU also undertook training to build upon our own systems thinking capacity. An external facilitator from ‘The Systems School’ delivered three tailored training sessions for our team, focusing on *systems thinking key concepts, systems thinking tools and practice, and developmental evaluation.*

Putting system thinking into practice

The HCU is currently developing an Actor Map; a systems tool that visually depicts key organisations that engage in a system of interest. Our HCU Actor Map will show which organisations within the G21 region our team has a relationship with, and what the nature of those relationships are. This will be used as a tool to support engagement, relationship building and identifying new partnership opportunities.



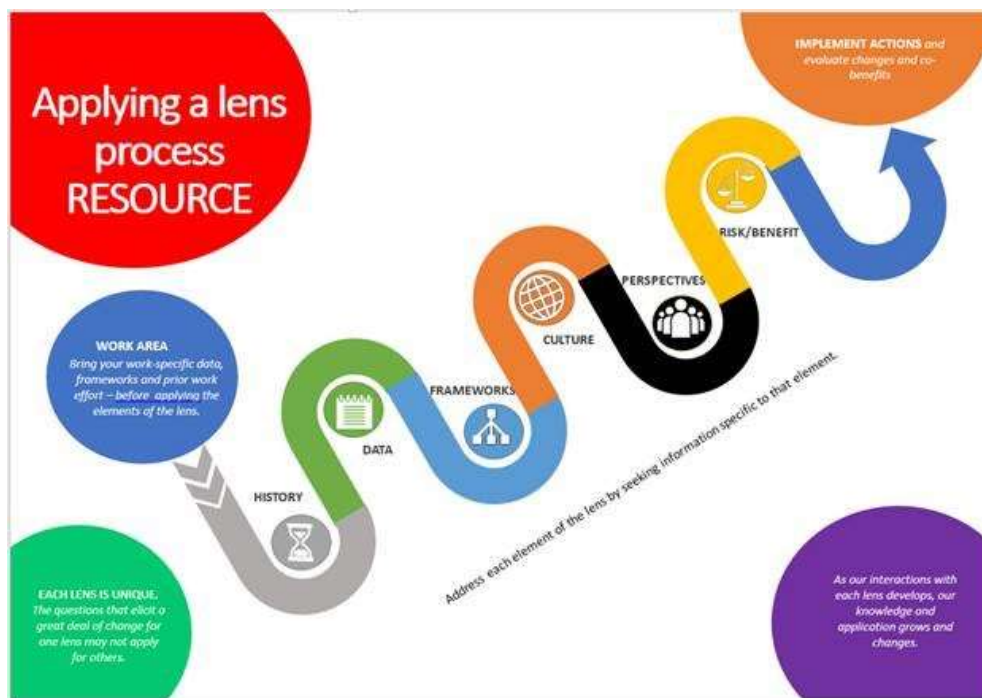
An example Actor Map visually depicting how HCU priority areas have varying types of relationships with different organisations in the G21 region.

APPLYING MENTAL HEALTH, GENDER EQUITY AND CLIMATE AND HEALTH LENSES TO OUR WORK

The HCU worked towards building the capacity of our team to apply mental health, gender equity and climate and health lenses to our work. Progress includes:

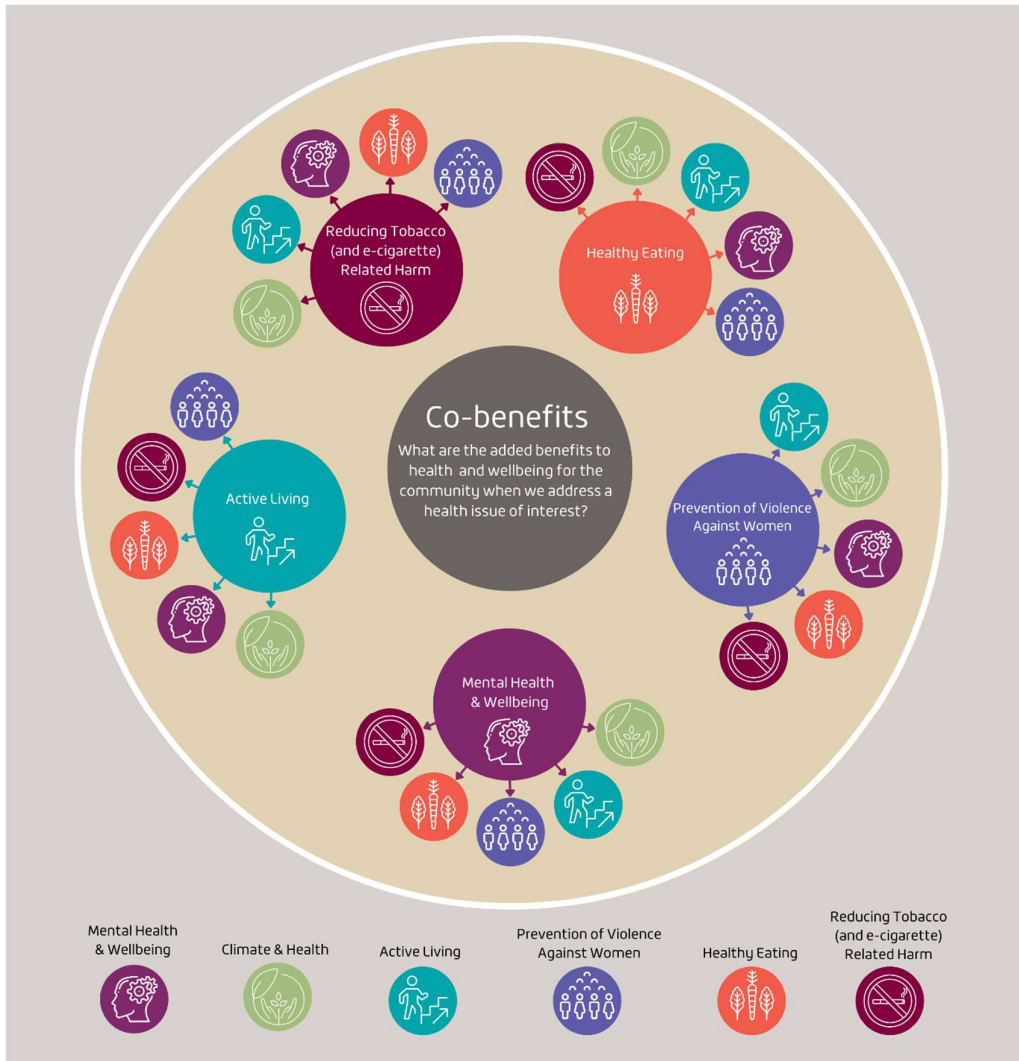
- Completed setting-specific literature reviews to expand knowledge and understanding of applying health lenses.
- Completed capacity building sessions for internal and external health promotion teams to assist in understanding of how to apply gender equity, mental health and wellbeing, and climate change and health lenses to initiatives.
- Developed a lens tool to assist in applying a gender equity, mental health and climate change lens to the priority work areas of the HCU.

Lens tool developed by the Healthy Communities Unit

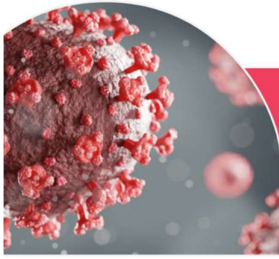


UNDERSTANDING CO-BENEFITS TO INFORM PRACTICE

The HCU has commenced action to integrate a co-benefits approach into our work. A co-benefits approach will support us to achieve multiple health and wellbeing outcomes and demonstrate a holistic approach to improving health. The Healthy Communities team will continue to build our capacity in the application of a co-benefits approach over the next 12 months.



Visual representation of the co-benefits approach taken by the HCU. Co-benefits are the added benefits related to improved health and wellbeing outcomes beyond the primary health issue of interest.



COVID-19 RESPONSE

Continued staff redeployment during the second half of 2021, restrictions on face-to-face engagement and impacts on our operating environment have led to work being deferred, modified or put on hold. This has had significant impacts on our ability to implement our Annual Plan and engage with external partners as intended for a third year. During the COVID-19 pandemic the HCU has demonstrated skill and adaptability to assist with pandemic response while maintaining a focus on prevention. Impacts on our Annual Plan are outlined in the narrative report and COVID-19 response activities are outlined below.

Barwon Health COVID-19 Monitoring and Contact tracing

Between September to December 2021 HCU staff were redeployed to assist in the Barwon Health COVID-19 Monitoring and Contact Tracing services. In 2021 the Monitoring service supported the health and wellbeing of COVID-19 positive clients and screened for medical deterioration. HCU staff supported the Monitoring service by completing data reports and team administration. HCU staff were also redeployed to work as Contact Tracers in the Barwon Health Contact Tracing team.

High Risk Accommodation Response

The High Risk Accommodation Response (HRAR), is a Department of Families, Fairness and Housing program established to prevent and respond early to COVID-19 outbreaks within public housing and other high-risk accommodation settings with shared facilities. From July 2021 - June 2022 management of the HRAR program was moved to the Local Public Health Unit. A portion of HCU staff continued to support HRAR during this time by providing administrative support and visiting high risk accommodation settings to provide COVID-19 care packs to residents.

SUMMARY

Our 2021 -2022 CH-HP plan was delivered in the context of the ongoing challenges and impacts of the COVID -19 pandemic. During the 2021-2022 reporting year we have been able to deliver our CH-HP actions by remaining agile to change and modifying the way we deliver our actions. We have continued to align our work with the new CH-HP draft guidelines and delivered outcomes in our identified health priority areas which we will continue to build on over the next three years of the 2022-2025 planning cycle.

HEALTHY EATING

Healthy Choices



Our objectives	Target group Setting Reach	Our strategies	Our measures of progress	Our progress
Increase capacity to access, prepare and consume healthier food and drinks and decrease capacity to access, prepare and consume discretionary food and drinks	Community members through health services setting	Build the capacity of food service staff to meet the Healthy Choices guidelines and the Healthy Choices policy directive for health services	<p>Food service staff have increased understanding of the Healthy Choices guidelines and the Healthy Choices policy directive for health services</p> <p>Working with suppliers to improve healthier food and drink supply</p>	<p>Capacity building implemented, including discussing the new Healthy Choices policy directive with food service staff and development of food/drink planograms</p> <p>Food and drink supply improved with a reduction of RED products and increase of GREEN and AMBER products at Barwon Health</p>
Increase purchase of healthier food and drinks, and decrease purchase of over-packaged, discretionary food and drinks	Community members through health services setting	Implement the Healthy Choices guidelines at Barwon Health	Proportion of Barwon Health vending, catering and retail outlets meeting the Healthy Choices guidelines	<p>University Hospital Geelong:</p> <ul style="list-style-type: none"> - 37.5% of drink fridges meet the Healthy Choices guidelines and policy directive - 33.3% of vending machines meet the Healthy Choices guidelines and policy directive - 20% of food items are GREEN; 37% are AMBER; 43% are RED <p>McKellar Centre:</p> <ul style="list-style-type: none"> - In Progress

<p>Decrease exposure to marketing of discretionary food and drink and increase exposure to marketing of healthier food and drinks</p>	<p>Community members through health services setting</p>	<p>Implement the Healthy Choices guidelines at Barwon Health</p>	<p>Healthy Choices display and promotion guidelines are met</p>	<p>Healthy Choices audit completed. Results show display and promotion guidelines are being met for drinks at retail outlets, although currently not being met for food at retail outlets or in vending machines</p> <p>Evaluation of the marketing materials at UHG café completed. Survey promoted to Barwon Health staff with 151 responses. Findings revealed</p> <ul style="list-style-type: none"> - Traffic light labelling system is effective - Support for healthier options - Food appearance, taste and price are important - Values-based messaging should be embedded into marketing materials
<p>Action to increase healthy eating creates co-benefits to health and wellbeing (e.g. active living, mental health and wellbeing, gender equity, and climate change and health)</p>	<p>Community members through health services setting</p>	<p>Explore the impact of healthy eating on co-benefits to health and wellbeing</p>	<p>Increased understanding of healthy eating co-benefits has informed practice</p>	<p>Capacity building opportunities for health promotion staff has increased understanding of healthy eating co-benefits to inform future practice</p>

Community Kitchens

Our objectives	Target group Setting Reach	Our strategies	Our measures of progress	Our progress
Increase capacity to access, prepare and consume healthier food and drinks and decrease capacity to access, prepare and consume discretionary food and drinks	Community members through community organisations	Support community organisations to facilitate Community Kitchens	<p>Number of Community Kitchens supported</p> <p>Number of Community Kitchens participants who report increased capacity to prepare healthier food and drinks</p>	<p>Needs assessment of sixteen CK's conducted during Sept-Nov 2021</p> <p>Staggered re-establishment of CK's during 2022; ten established CK's supported and five organisations planning to establish a new CK supported</p>
Increase socio-cultural norms reinforcing healthier eating and healthier drinking	Community members through community organisations	Support community organisations to facilitate Community Kitchens	<p>Number of facilitator training sessions held</p> <p>Number of facilitator network meetings held</p>	<p>Four facilitator training sessions held (n= 7 participants)</p> <p>Two network meetings held; six facilitators attended in November 2021 and 3 in March 2022</p>
Decrease exposure to marketing of discretionary food and drink and increase exposure to marketing of healthier food and drinks	Community members	Support community organisations to facilitate Community Kitchens	<p>Number of social media posts promoted / Reach of social media posts</p> <p>Number of eNewsletters promoting healthier food and drinks</p> <p>Other healthy eating marketing materials promoted</p>	<p>One social media post promoting CK's on Facebook. Potential reach of BH Facebook is approximately 32,000 followers</p> <p>Four 'What's Cooking?' eNewsletters distributed to an average of 97 subscribers. 16 Choose Water Every Day drink bottles and 16 City of Greater Geelong Eat Well Live Well toolkits distributed during CK site visit and CK Facilitator network meeting</p>

Action to increase healthy eating creates co-benefits to health and wellbeing (e.g. active living, mental health and wellbeing, gender equity, and climate change and health)	Community members	Explore the impact of healthy eating on co-benefits to health and wellbeing	Increased understanding of healthy eating co-benefits has informed practice	<p>'What's Cooking?' eNewsletters incorporated healthy eating and climate change and healthy eating and mental health co-benefits messaging</p> <p>eNewsletters also promoted mental health and gender equity events in the region</p>
---	-------------------	---	---	--

Victorian Menu Planning Guidelines program for early learning centres

Our objectives	Target group Setting Reach	Our strategies	Our measures of progress	Our progress
Increase capacity to access, prepare and consume healthier food and drinks and decrease capacity to access, prepare and consume discretionary food and drinks	Early childhood services	Implement the Victorian menu planning guidelines with early childhood services	Pilot implementation of the Victorian menu planning guidelines with one early learning centre	<p>Planned and implemented a pilot program with one ELC. Delivered two 1-hour face to face training sessions on-site at the pilot ELC</p> <p>One staff member at the ELC (head chef) has completed the HEAS online training modules</p> <p>Successfully implemented the Victorian menu planning guidelines in one ELC and, as a result, this ELC is now meeting the guideline recommendations</p>
Action to increase healthy eating creates co-benefits to health and wellbeing (e.g. active living, mental health and wellbeing,	Children through the education and early years setting	Explore the impact of healthy eating on co-benefits to health and wellbeing	Increased understanding of healthy eating co-benefits has informed practice	Discussed co-benefits of healthy food and drinks to ELC staff via capacity building training. For example:

gender equity, and climate change and health)				<ul style="list-style-type: none"> • Improved alertness & interest in activities • Enhanced concentration and learning • Early establishment of healthy eating habits influence lifespan health • Positive influence on healthy eating behaviours in the family home
---	--	--	--	--

Vic Kids Eat Well

Our objectives	Target group Setting Reach	Our strategies	Our measures of progress	Our progress
Increase capacity to access, prepare and consume healthier food and drinks and decrease capacity to access, prepare and consume discretionary food and drinks	Primary schools and OSHC services	Prepare for implementation of the Vic Kids Eat Well initiative	VKEW initiative plan developed, including engagement opportunities identified	<p>Settings mapped and key contacts database created</p> <p>Key stakeholders identified and local network formed. Meetings with key stakeholders; CoGG x4, CAH x2, BCH x1, and Cancer Council Vic x2 meetings</p> <p>Attended three Healthy Education Community of Practice meetings</p> <p>Attended eight online training sessions and seven Q&A session for VKEW</p> <p>On-boarded one school and one OSHC service to commence the VKEW program</p>

Decrease exposure to marketing of discretionary food and drink and increase exposure to marketing of healthier food and drinks	Primary schools and OSHC services Potential reach via BH Facebook, Instagram and Twitter: ~45,000 followers	Prepare for implementation of the Vic Kids Eat Well initiative	Number of social media posts promoted / reach of social media posts	VKEW social media post received 20 total engagements to a reach of 28,964 followers. The post was also shared on LinkedIn to 22,384 followers with seven total engagements. The post discusses the importance of giving kids access to health and delicious food in places where they learn and play
Action to increase healthy eating creates co-benefits to health and wellbeing (e.g. active living, mental health and wellbeing, gender equity, and climate change and health)	Primary schools and OSHC services	Explore the impact of healthy eating on co-benefits to health and wellbeing	Increased understanding of healthy eating co-benefits has informed practice	Disseminated resources that include healthy eating co-benefits. For example: <i>“A great education starts with kids having the energy and focus to learn at school. Boosting healthy and delicious food and drink options at school can improve kids’ concentration, learning, mood and give them the fuel they need to thrive.”</i>

Healthy retail

Our objectives	Target group Setting Reach	Our strategies	Our measures of progress	Our progress
Increase capacity to access, prepare and consume healthier food and drinks and decrease capacity to access, prepare and consume discretionary food and drinks	Community members through the retail setting	Explore opportunities to partner with other organisations to implement healthy food and drink supply and policies, which include practices to minimise environmental impact	Local food retail stores are mapped Understanding of healthy food retail interventions is increased	Database/ mapping of retail supermarkets in G21 region developed Attended two state-wide Healthy Supermarkets Community of Practice events

				Scoping work, including literature reviews and data gathering completed. This work will help to inform HCU's 2022-23 annual plan
Increase purchase of healthier food and drinks, and decrease purchase of over-packaged, discretionary food and drinks	Community members through the retail setting	Explore opportunities to partner with other organisations to implement healthy food and drink supply and policies, which include practices to minimise environmental impact	Opportunities to partner with other organisations are identified	Database of possible partnership organisations created and updated ongoing
Decrease exposure to marketing of discretionary food and drink and increase exposure to marketing of healthier food and drinks	Community members through the retail setting	Explore opportunities to partner with other organisations to implement healthy food and drink supply and policies, which include practices to minimise environmental impact	Understanding of healthy food retail interventions is increased	Scoping work, including research on healthy retail interventions and their marketing strategies, completed
Action to increase healthy eating creates co-benefits to health and wellbeing (e.g. active living, mental health and wellbeing, gender equity, and climate change and health)	Community members through the retail setting	Explore the impact of healthy eating on co-benefits to health and wellbeing	Increased understanding of healthy eating co-benefits has informed practice	Capacity building opportunities for Health Promotion staff have increased understanding of co-benefits to inform future healthy retail interventions.

INFANT

Our objectives	Target group Setting Reach	Our strategies	Our measures of progress	Our progress
Increase capacity to access, prepare and consume healthier food and drinks and decrease capacity to access, prepare and consume discretionary food and drinks	Parents/ caregivers with infants	Support pilot INFANT program in partnership with the Maternal and Child Health Service at Surf Coast Shire Council (SCSC)	Number of INFANT sessions run and number of participants	Two HCU staff members completed INFANT training to become facilitators

			<p>Change in participants' confidence, knowledge and skills identified</p>	<p>Attended three meetings with SCS to discuss program facilitation</p> <p>Attended three meetings with COGG to discuss rollout in the region Attended one state-wide Community of Practice</p> <p>Change in participants' confidence, knowledge and skills was not measured by Barwon Health. SCS is carrying out their own evaluation process</p>
--	--	--	--	---



ACTIVE LIVING

Our objectives	Target group Setting Reach	Our strategies	Our measures of progress	Our progress
Increase capacity of routine healthcare settings to integrate healthy lifestyle counselling and referrals	Healthcare staff within Barwon Health (BH) routine healthcare settings	<p>Conduct an analysis of healthy lifestyle counselling and referrals</p> <p>Partner with routine health care services to develop initiatives that integrate healthy lifestyle counselling and referrals</p>	<p>Analysis completed</p> <p>Number of partners engaged</p> <p>Number of initiatives developed</p>	Unable to complete analysis and develop initiatives due to COVID-19 response and redeployment of health care staff
Build capacity of G21 region workplaces to develop and implement active living strategies that increase physical activity and decrease sedentary behaviour	<p>Workplace staff through workplace settings</p> <p>Potential reach: 170+ workplaces</p>	Determine opportunities to build capacity of workplaces	Opportunities identified	<p>Progressed strategic partnership with local advocacy collaboration Active Geelong (AG) who promote physical activity opportunities to increase participation.</p> <p>Attended 4 AG Knowledge Subcommittee meetings and 3 Advocacy/ Engagement Group meetings advocating for workplace capacity building needs & learning opportunities.</p> <p>Delivered face to face event in partnership with AG. Evaluation results identified: 15 attendees 75% registered with WAP 25% intend to register 100% highly valued presentations</p>

		Increase awareness of campaigns that encourage physical activity (e.g. Ride To Work, Active April)	<p>Number of articles delivered through eNewsletters</p> <p>Number of events promoted</p> <p>Number of social media posts promoted / reach of social media posts</p>	<p>Four Workplace Health eNewsletters distributed to approx. 280 workplaces</p> <p>Ten articles focused on active living topics including Ride to Work, the Life Program, Exercise Right Week and Walk to Work with a local business case study highlighting implementation of a physical activity program</p> <p>Seven workplace active living campaigns promoted via the eNewsletters including 10,000 steps, Steptember, Exercise Right week, Ride to Work and Walk to Work events</p> <p>Active Living and Close the Gap social media posts reaching 29,000 BH Facebook followers.</p>
Promote active living across the G21 region	<p>Community members</p> <p>Potential reach via BH Facebook: ~32,000 followers</p>	Contribute to regional action on shared active living marketing materials, social media messaging and resources	<p>Number of materials and resources developed</p> <p>Number of social media posts promoted / reach of social media posts</p>	'Active Living: Close The Gap' Facebook post focused on cultural awareness, health equity and active living. The post received 86 total engagements to a reach of 28,964 followers.
Action to increase active living creates co-benefits to health and wellbeing (e.g. healthy eating, mental health and wellbeing, gender equity, and climate change and health)	Community members	Explore the impact of active living on co-benefits to health and wellbeing	Increased understanding of active living co-benefits has informed practice	Capacity building opportunities for Health Promotion staff have increased understanding of co-benefits to inform future practice



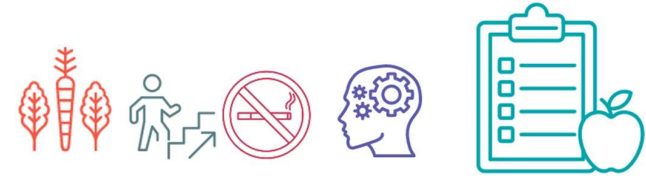
REDUCING TOBACCO (AND E-CIGARETTE) RELATED HARM

Our objectives	Target group Setting Reach	Our strategies	Our measures of progress	Our progress
Decrease the number of environments in which people smoke or are exposed to second and third hand smoke	Community health staff, workplace staff, and community members through health service, workplace and local government settings	Embed no smoking policies and smoke-free environments across Community Health Services	Smoke-free policy, practices and signage are implemented	Smoke-free policy, practices and signage are implemented throughout Barwon Health
		Partner with local councils and community organisations to implement voluntary smoke-free environments at specific locations or community events	Number of local councils and community organisations engaged Number and example/s of decreased environments in which to smoke at council locations and events	No response has been achieved from councils and this action has been ceased at this time 16 attendees participated in a webinar to encourage adoption of the Achievement Program's Smoking benchmark
Increase Community Health Service capacity to support community members to stop smoking and to access stop smoking services and supports	Community Health sector through Barwon Health Community Health Services	Develop a partnership with Quit Victoria to implement creative ways to promote Quitline	Partnership with Quit Victoria developed Opportunities to promote Quitline are identified	The Give Smoking Away this May content aligned with addiction and support services directions for campaigns provided by QUIT VIC. QUIT services are promoted within media releases reaching approximately 29,000 people via BH and 15,000 via BayFM We are in regular communication with QUIT as part of our effort to develop a regional response to vaping
		Develop partnerships with Be Smokefree clinicians to ensure smoking identification and cessation pathways are embedded into routine care	Partnerships established with Community Health clinicians	Current Barwon Health training modules restored and updated with links directly to those available through the Cancer Council of Victoria (CCV)

		Investigate staff attitudes and skills to ensure referrals to care are integrated into routine practice	Smoking identification and cessation pathways reviewed and embedded into routine care Development of measures co-designed with clinicians Current training processes are reviewed and amended as required	All Community Health clinical staff were redeployed to COVID-19 roles and unable to meet until 2022. Since then, three meetings have occurred with clinical staff to commence review of clinical pathways
Engage the community to de-normalise smoking behaviours	Community members, particularly in identified postcodes with high smoking rates (e.g. 3214)	Investigate current messages and marketing tools to reduce smoking	Current messages and tools identified	Past and current campaigns across Australia were investigated Current directions for Victorian campaigns were explored and clarified with CCV
		Develop and disseminate messages relevant to local needs Implement co-designed initiatives in partnership with community agencies and representatives	Local, relevant messages produced and promoted Initiatives identified	A local campaign developed with guidance from smoking cessation and mental health clinicians. This was then run by consumers with a lived experience of anxiety and smoking (<i>see case study</i>)s. The month-long media campaign 'Give Smoking Away this May' was released to media and through our social media avenues. This achieved a reach of 51,800 people

<p>Action to reduce tobacco related harm creates co-benefits to health and wellbeing (e.g. mental health and wellbeing, gender equity, and climate change and health)</p>	<p>Community members, particularly in identified postcodes with high smoking rates (e.g. 3214)</p>	<p>Explore the impact of reducing tobacco related harm on co-benefits to health and wellbeing</p>	<p>Increased understanding of reducing tobacco related harm co-benefits has informed practice</p>	<p>As a result of understanding mental health co-benefits, our initiative has been significantly directed through a mental health lens, and utilised a co-design approach to develop campaign messages and core priorities</p> <p>An investigation of gender impacts was undertaken, and effort applied to ensure disaggregated data will be applied to all survey and community engagement work</p>
---	--	---	---	--

WORKPLACE HEALTH



Our objectives	Target group Setting Reach	Our strategies	Our measures of progress	Our progress
Build capacity of workplaces in the G21 region to develop and implement workplace health strategies	Workplace staff through the workplace setting Potential reach: 170+ workplaces	Develop processes and resources to support individual workplaces to implement workplace health initiatives	Processes and resources developed Number of workplaces receiving individual support	We have continued to support individual workplaces through our Network and providing resources to over 170 local workplaces.
	Potential reach of BH LinkedIn: 21,690 followers	Lead and facilitate the Workplace Health Network	Number of Network meetings held Number of Network members and organisations attending / number of new Network members	Three meetings held: Aug 2021, Nov 2021, and May 2022. 17 representatives from local businesses form the Network membership.
		Deliver Workplace Health capacity building events	Two capacity building events held - number of participants who report change in attitude, knowledge, skills and confidence	<p><i>“Active Geelong and Barwon Health are proud to be helping workplaces get back on their feet in 2022”</i> delivered in Dec 2021. Fifteen attendees: 75% of respondents’ workplaces are registered with WAP, 25% intend to register; 100% highly valued the presentations</p> <p><i>“Give Smoking Away this May: Workplaces webinar”</i> delivered in May 2022 with sixteen attendees.</p>
		Provide and promote education and learning resources to workplaces via newsletters,	Engagement and feedback from workplaces	Completed a workplace needs assessment.

		social media messaging and online	Number of social media posts promoted / reach of social media posts	<p>Implemented the <i>Give Smoking Away Workplace Grant program</i> to engage workplaces to work towards achieving the Smoking Benchmark of the WAP.</p> <p>LinkedIn post from May 2022 "<i>Give Smoking Away this May Workplaces webinar</i>" reached 22,386 followers</p> <p>LinkedIn post from June 2022 "<i>Give Smoking Away Workplace Grants program</i>" reached 22,386 followers.</p>
		Work with partners and industry experts to deliver workplace initiatives	<p>Social network analysis completed</p> <p>Number of partners identified</p> <p>Nature/level of partnership documented</p>	Planning to complete an Actor Mapping exercise to identify partners engaged in WPH initiative and measure changes to the network over time
Support workplace progression through the Healthy Workplaces Achievement Program benchmarks	Workplace staff through the workplace setting	<p>Support workplaces to progress towards achieving the following benchmarks</p> <ul style="list-style-type: none"> - Foundation - Healthy eating - Physical activity - Smoking - Mental health and wellbeing 	<p>Number of workplaces signed up</p> <p>Number of workplaces progressing towards benchmarks</p> <p>Number of workplaces that achieve recognition</p>	<p>Total number of registered workplaces in G21 region: 100</p> <p>61 workplaces working towards benchmarks</p> <p>43 workplaces have achieved benchmark recognition in total</p> <p>One workplace has achieved a benchmark in the last year</p>
Promote the Workplace Health initiative within the G21 region	Workplace staff through the workplace setting	Provide information to workplaces in the G21 region	Number of eNewsletters distributed	WPH eNewsletter distributed Sept and Dec 2021 and Mar and

	Potential reach of BH LinkedIn: 21,690 followers	<p>about the Barwon Health Workplace Health initiative via:</p> <ul style="list-style-type: none"> - Quarterly eNewsletter - Social media - Local case studies - Webpage - External forums 		Jun 2022 to an average of 280 subscribers
		Promote the Healthy Workplaces Achievement Program to increase registrations and engagement	<p>Number of new registrations to Healthy Workplaces Achievement Program</p> <p>Increased engagement of existing Achievement Program registered workplaces</p>	<p>Two new workplaces have registered</p> <p>Limited engagement with workplaces due to COVID-19 disruptions and working from home. However, WPH needs assessment survey conducted May 2022 to identify workplace health and wellbeing priorities and understanding engagement with WPH and WAP initiatives</p>
Action to improve workplace health creates co-benefits to health and wellbeing (e.g. healthy eating, active living, reducing tobacco related harm, mental health and wellbeing, gender equity, and climate change and health)	Workplace staff through the workplaces setting	Explore the impact of improving workplace health on co-benefits to health and wellbeing	Increased understanding of workplace health co-benefits has informed practice	WPH eNewsletters incorporated opportunities for climate action, gender equity, and co-benefits messaging i.e. benefits of active living and reducing tobacco use on mental wellbeing



PREVENTION OF VIOLENCE AGAINST WOMEN

Our objectives	Target group Setting Reach	Our strategies	Our measures of progress	Our progress
<p>Provide support to initiatives that prevent violence against women</p>	<p>Community members within school and the health sector settings</p>	<p>Contribute to the Respect 2040 regional initiative</p>	<p>Representation on Respect 2040 reference group</p>	<p>The Respect 2040 reference group has not progressed during the COVID-19 pandemic</p>
		<p>Partner with regional agencies and local government to support their work and communities to prevent violence against women (e.g. 16 days of Activism, Reclaim the Night)</p>	<p>Input into the development of a new regional approach/ actions and evidence of shared work on Council, Health sector and Community initiatives</p>	<p>Loss of staffing across multiple agencies has prevented progress in the development of a new regional approach. It is hoped this will recommence in 2022-23</p>
		<p>Partner with Cultura on the Safer and Stronger Families project</p>	<p>Safer and Stronger Families project implemented</p>	<p>Commenced work with Cultura and other partner agencies to develop a series of videos reducing gender-based violence in newly arrived communities</p>
		<p>Transition the Respect Cup to a sustainable model in partnership with other agencies and schools</p>	<p>Alternate agencies take on leadership role of Respect Cup or schools adopt actions within their settings</p>	<p>The Respect Cup planning guide has been updated in line with new consent content and is available for all schools online. Lead of the workshops will transition to the 'love bites' program within CoGG, and lead of the netball component will transition to Netball Vic. Now working with partner agencies to develop a series of webinars that support school community awareness and actions to reduce gender-based violence and encourage their uptake of the (CoGG and NV) actions.</p>

Promote a culture of gender equity in which women are safe, equal, respected and valued members of the community	Community members within health sector setting, and all settings targeted within other HCU work areas	Apply a gender lens / gender impact assessment to health promotion work within the Healthy Communities Unit	Gender lens / impact assessment tools applied	Gender impact assessment tool piloted. Currently being adapted into a broader, multi-functional lens tool
		Contribute to social media messaging in the region and ensure consistent key messaging and information is shared	Number of social media posts promoted / reach of social media posts	The Barwon Health 'International Women's Day' campaign to highlight women who 'beat the bias' was consistent across councils (GPS, CoGG) and BCH. Five IWD Facebook posts received 1,293 total engagements to 28,964 followers. Five IWD Instagram posts received 261 total engagements to 7,123 followers. Five IWD LinkedIn posts, 319 total engagements to 22,386 followers.
		Build capacity of health services to promote gender equitable practices	Sectors of the health service have incorporated changes to consider gender equitable practices	Our lens tool is being shared with Barwon Health HR dept. to assist developments within the Gender Equality Action Plan
		Promote the health literate messaging toolkit	Toolkit is finalised and disseminated. Toolkit is utilised within Barwon Health PVAW messaging	The toolkit has been uploaded online with 219 click throughs. It continues to inform our language utilised within social media posts
Action to prevent violence against women creates co-benefits to health and wellbeing (e.g. healthy eating, active living, reducing tobacco related harm, mental health and wellbeing, gender equity, and climate change and health)	Community members through all settings	Explore the impact of preventing violence against women on co-benefits to health and wellbeing	Increased understanding of prevention of violence against women co-benefits has informed practice	Developed a Gender Impact Assessment guideline tool. Applied this tool to HCU programs to inform their co-benefits practice



MENTAL HEALTH AND WELLBEING

Our objectives	Target group Setting Reach	Our strategies	Our measures of progress	Our progress
Support Healthy Eating, Active Living and Reducing Tobacco Related Harm priority areas to optimise mental health co-benefits	HCU team	<p>Explore the impact of mental health promotion on co-benefits to health and wellbeing</p> <p>Develop tools and build workforce capacity to apply a mental health promotion lens to the work in order to enhance mental health co-benefits</p>	<p>Increased understanding of mental health promotion co-benefits has informed practice</p> <p>Lens tools have been developed and/or applied to inform practice</p> <p>Increased understanding and confidence in applying lenses</p>	<p>Mental Health Lens tool has been developed</p> <p>Co-benefits baseline survey of HCU health promoters was conducted. Analysed preferences for means of support, and staff understanding of co-benefits / confidence in applying a mental health lens to their work</p>
Build capacity in mental health promotion with Mental Health Drugs and Alcohol Service (MHDAS) clinical staff	MHDAS staff through the health service setting	Lead Community of Practice within MHDAS to increase mental health promotion capacity of clinical staff	Number of Community of Practice meetings held	<p>Four Community of Practice meetings held, charter developed and plan outlined</p> <p>Training in mental health promotion developed for MHDAS staff</p>
Increase community awareness of factors that enhance social and emotional wellbeing	Community members, including Barwon Health staff, through the health service and community settings	Support the Healthcare Worker Wellbeing grants program to reduce stigma around health seeking	Number of clinical staff who report increased mental health promotion knowledge and skills	Partnership with BH Wellbeing Manager. Ten MHFA facilitators trained and training delivery calendar established

	Reach of social media campaign: 328,000	Implement Mental Health social media campaign Implement Mental Health First Aid (MHFA) training and Applied Suicide Intervention Skills Training (ASIST)	Mental Health social media campaign delivered Number of MHFA and ASIST courses delivered Literature review on stigma reduction completed	#KeepGeelongStrong social media campaign Oct - Dec 2021. 45 posts, reach 328,000 Incorporated cross-promotion of other services Three online MHFA courses and one ASIST course delivered Review highlighted need for those with lived experience to be educating on reducing stigma
Increase community participation in mental health and wellbeing initiatives	Community members through community organisations	Implement the Mental Health Promotion community grants initiative	Partnerships created to deliver Mental Health Promotion grant initiatives Three grants provided Reach of grants	The delivery of this initiative has been interrupted by COVID-19 restrictions and impact No tangible outcomes due to impacts of COVID-19
Build community capacity to promote children and young people's mental health and wellbeing in the region	Children and youth through community organisations	Provide expertise to regional partnerships (e.g. Communities that Care Steering Committee, City of Greater Geelong Youth Development Unit, headspace Colac) Identify focus on children and youth in the Mental Health Promotion Grants initiatives	Number of meetings attended Number of partners engaged Number of grants provided to children and youth	One Youth Council meeting attended and one planned Partners include: <ul style="list-style-type: none"> • Communities that Care • Cultura • Colac Area Health Youth engagement team

