

Introduction

Barwon Health is committed to improving the health and wellbeing of our community through the delivery of primary prevention action. The Barwon Health, Healthy Communities Unit (HCU) is part of the Barwon South West Public Health Unit and is funded by the Victorian Department of Health through Community Health – Health Promotion (CH-HP) program.

- We work with our community and local organisations to lead and support delivery of place based prevention initiatives that improve the health and wellbeing of people who live, learn, work and play in our region.
- We develop, implement and evaluate prevention initiatives using a range of strategies including community engagement, capacity and knowledge building, health policy, advocacy, social marketing and through encouraging structural and environmental changes.
- We have an equity approach where we provide more support to settings and population groups that experience disadvantage.
- We work collectively with local partners in our region to achieve larger scale change, aligning efforts to achieve greater impact in improving the health of our community.

Our plan

The Barwon Health, Community Health – Health Promotion (CH-HP) plan aligns our work directly with the *Victorian Public Health and Wellbeing Plan 2019-2023*, local *Municipal Public Health and Wellbeing Plans* and the *Transitional CH-HP Program Guidelines 2022-23*. The development of our priority areas and subsequent plans were shaped by considering previous needs assessments completed by the Healthy Communities Unit (HCU), local governments, Primary Health Networks and advice from the Victorian Department of Health for CH-HP funded services.

During 2022-23 we will work to support the Local Public Health Unit to develop and implement our regional population health catchment plans that enable place-based approaches aligned to the CH-HP health priority areas.

Our region and reach

Our region covers the five local government areas of City of Greater Geelong, Colac Otway Shire, Golden Plains Shire, Borough of Queenscliffe and Surf Coast Shire, also known as the G21 region. Approximately 350,000 people currently live in the G21 region¹



Map of the G21 Region

Image sourced from <http://www.g21.com.au/about-g21>

Acknowledgement of Country



We acknowledge the Traditional Owners of the lands that span the G21 region where we work, the Wadawurrung and Eastern Maar people. 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 and Eastern Maar people, acknowledging the memory of honourable ancestors.

Vision

Together with our community we build healthier lives

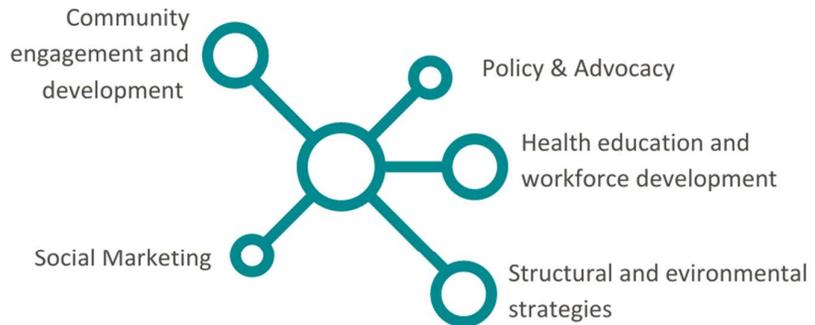
Underpinning our work



Settings



Multi-level Strategies



Prevention of Violence Against Women

Active Living

Reducing Tobacco (and e-cigarette) Related Harm

Healthy Eating

Mental Health and Wellbeing

Practice principles

Our health promotion planning, implementation and decision making is guided by a set of practice principles. The principles align with the Victorian Department of Health *Community Health – Health Promotion (CH-HP) Program Guidelines* and contemporary health promotion practice.

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| Local collaboration | We work with local partners to ensure a coordinated prevention effort, reduce duplication and achieve greater impact in improving the health and wellbeing of our community. |
| Community engagement | We consult and engage with our community so we can understand their health needs and so they can help us decide what health promotion actions will work best for them. |
| Intersectional health equity lens | We apply an intersectional health equity lens to identify overlapping or intersecting aspects of marginalisation and disadvantage (incl. gender, Aboriginality, age, disability, ethnicity and social economic status). Applying this lens enables us to identify which settings and population groups are experiencing the most disadvantage and where we should direct our work. |
| Place based approaches | We recognise that people and places are inter-related and that the places where people spend their time plays an important role in shaping their health and wellbeing. A place based approach considers local needs and priorities. |
| Prevention scale | Prevention initiatives are developed and delivered at a scale that can impact on the health and wellbeing of large numbers of the population in places where they spend their time. |
| Whole of community and whole of systems approach | We focus our work on changing the local context in the long term, addressing underlying causes of ill health across communities, delivering multiple interventions and ‘joined- up’ action and cross-sector efforts. |

These approaches allow us to understand the needs of our community and to deliver a range of interventions where people live, work, learn and play.

Overview of our health priority areas for 2022-23

We align our health priority areas with the *Community Health – Health Promotion (CH-HP) Program Guidelines 2021-25* and the *Victorian Public Health and Wellbeing Plan 2019-23*.

Our main priority areas are:

- Healthy eating
- Active living
- Reducing tobacco and e-cigarette related harm

Our minor priority area is:

- Prevention of violence against women (PVAW)

Integrated across our priority areas using a co-benefits approach are:

- Mental Health Promotion (MHP)
- Climate and health

Our work in PVAW will focus on a transition to supporting other agencies and initiatives within the region.

While MHP is funded through a different source, it is integrated throughout our health promotion priority areas in order to maximise co-benefits and create change across the whole system.

Climate and health initiatives will be considered holistically to deliver positive health and social environmental outcomes, particularly through healthy eating and active living initiatives.

We will continue to implement the following state-wide programs in our local region:

- Healthy Workplaces Achievement Program (AP)
- Healthy eating focused programs including; Healthy Eating Advisory Service, Healthy Choices Guidelines, Vic Kids Eat Well (VKEW), and the Victorian Menu Planning Guidelines for Long Day Care
- Quit Programs

Our strategies



Social marketing and health information

We use social marketing strategies to provide health messaging and to engage our community, understand their needs and drive change in awareness, attitudes and behaviour.



Develop skills and provide health education

We provide health education and skill development with the aim to improve knowledge, attitudes, self-efficacy and individual capacity to change behaviour.



Building community capacity to take local action

(Individuals and organisations)

We build community capacity to take local action by encouraging and enabling communities to develop and sustain improvements in their social and physical environments. This includes community engagement and co-design of health promotion initiatives.



Create healthy settings and supportive environments

We work to create healthy settings and environments within local organisations such as schools, workplaces and other community settings. It involves: Ensuring that policies and practice align with health promotion principles; Advocacy; and, Implementation of regulatory activities: i.e. Healthy Choices policy directive for health services.



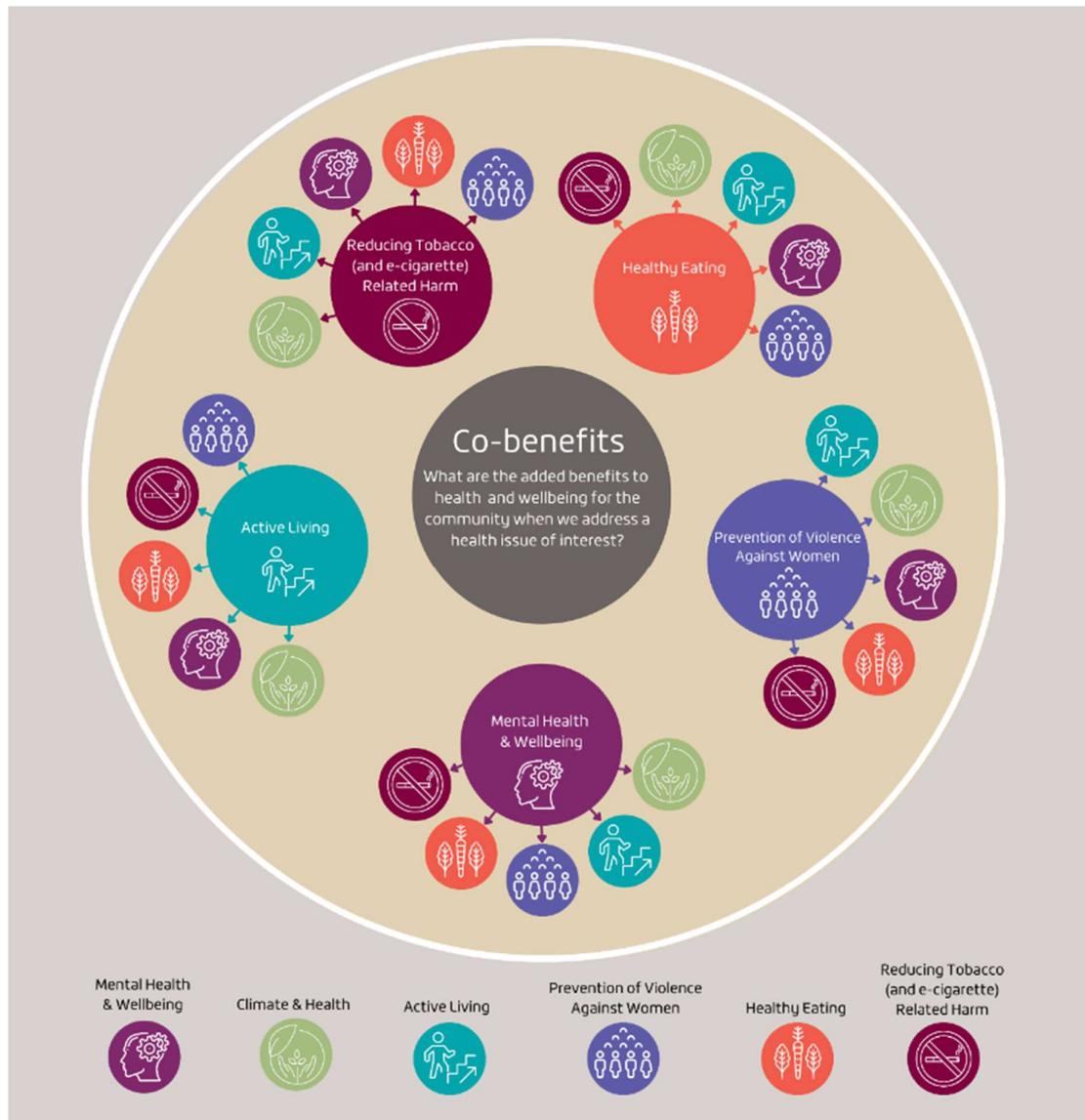
Work in partnership with key stakeholders and organisations

We work in partnership with the local community and other organisations to increase reach, share expertise and maximise impact of investment by delivering mutually reinforcing interventions.

Co-benefits approach

We will consider and address co-benefits to health and wellbeing in the planning and implementation of all of our health promotion initiatives.

The term co-benefits relates to the additional benefits related to improved health and wellbeing outcomes beyond a primary health issue of interest. A co-benefits approach is important as it may support with achieving multiple health and wellbeing outcomes, demonstrates a holistic approach to improving health and improves engagement in the focus areas by partners and the community.



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.

Implementing and measuring a co-benefits approach

| Objective | Strategies | Outcomes |
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| Action to improve health and wellbeing in an identified health priority area contributes to improving other health areas. | Build capacity of the health promotion workforce to understand how to apply a co-benefits approach. | Increased understanding and confidence to apply a co-benefits approach has informed practice. |
| | Consider and address co-benefits to health and wellbeing in the planning and implementation of health and wellbeing initiatives. | Related health priorities have been considered by applying co-benefits approaches/lenses to health promotion practice. |
| | Understand and explore the added benefits of improving a primary health area to other health and wellbeing priorities. | Multiple health and well-being outcomes are achieved by addressing a primary area of interest. |

Co-benefits approach to climate and health



We recognise that climate change is a significant public health issue and we commit to delivering initiatives that make positive change in the community, with benefits for health and wellbeing and climate mitigation. Climate change co-benefits will be integrated into our focus areas of healthy eating, active living and reducing tobacco and e-cigarette related harm.

Specific interventions with a focus on climate and health for the 2022-23 planning year include:

Increasing healthy eating – Through our healthy eating initiatives we commit to actions that aim to increase access, sale and consumption of fresh, local produce and reduce access, sale and consumption of packaged food and drink. Increasing consumption of fresh, plant based foods that are locally sourced and decreasing consumption of processed packaged foods and drinks, reduces carbon emissions and reduces food waste.

Increasing active living – Through our active living initiatives we commit to actions that increase use of active travel and public transport, thereby reducing number of car trips and related carbon emissions. We will also promote initiatives that increase urban green space, and shading and cooling strategies that enable communities to continue using their environments for active living.

Our priority areas

Healthy eating

Access to nutritious food improves our health and wellbeing. Many people in the G21 region do not meet the healthy eating guidelines and this is contributing to high rates of obesity and a range of chronic diseases including heart disease, cancer and diabetes ²

55% Of adults in the G21 region are obese. Victorian average is 51% ²



Around 1 in 10 adults eat the recommended daily 5 serves of vegetables, and in some areas of the G21 region, it's around 1 in 20 adults ²



Less than 10% of young people and children in the G21 region eat the recommended minimum serves of daily fruit and vegetables ²



60% of Geelong residents drink the recommended 1-2 litres of water per day ³



In some areas of the G21 region adults consume 7% more sugary drinks than the rest of Victoria ²

We will take a multi intervention and co-benefits approach to increasing healthy eating. Our interventions will be delivered across various settings and target groups. In 2022-2023 Barwon Health is working towards improving healthy eating in our region by:

- **Local delivery of state-wide prevention initiatives;** Victorian Menu Planning Guidelines for Long Day Care, Healthy Choices Policy Directive for Health Services, Vic Kids Eat Well and the Healthy Workplaces Achievement Program.
- **Healthy retail;** Influence food systems to improve health through strategies that minimise environmental impact and increase healthy and sustainable food procurement, distribution and consumption.
- **Community kitchens;** Increase capacity to access, prepare and share healthier food by supporting community organisations to host community kitchens.
- **Population wide initiatives;** Amplify and localise state-wide social marketing campaigns and advocacy initiatives.

Active living

Leading an active life improves our health and wellbeing. Many people in the G21 region do not meet the Australian physical activity guidelines, and this is contributing to high rates of obesity and a range of chronic diseases including heart disease, cancer and diabetes ²

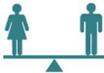
We will take a multi intervention and co-benefits approach to increasing active living. Our interventions will be delivered across various settings and target groups. Our interventions will be delivered in the context recognised by the Department of Health, that active living strategies are less defined and that during 2022-2025 we will explore evidence informed and promising practice in this space.



In Australia, 49.4% of people aged 18-64 years who were employed described their day as mostly sitting, with standing (18.8%) and walking (17.5%) the next most common activities ⁴



In G21 region only 41%-51% adults meet the PA guidelines ⁵



Men in Australia are more likely than women to meet the physical activity guidelines (27.0% compared to 22.3%) ⁴



Only 12% of Australian children and 2% of adolescents are meeting the guidelines for both physical activity and screen time ⁶



Half of Victorian school students are not active enough to gain health benefits ⁶

In 2022-2023 Barwon Health is working towards improving active living in our region by:

- **Implementing community activation and engagement approaches with priority cohorts;** Deliver initiatives to increase physical activity of women and girls in the G21 region.
- **Active travel;** Build capacity of our community to increase active modes of travel.
- **Active at work;** Build capacity of workplaces in the G21 region to develop and implement active living initiatives that increase physical activity and decrease sedentary behaviour.
- **Local delivery of state-wide prevention initiatives;** Healthy Workplaces Achievement Program, amplify and localise state-wide social marketing campaigns e.g. 'This Girl Can'.

Reducing tobacco and e-cigarette related harm

Tobacco use is a major, but avoidable, cause of disease and death. Smoking increases the risk of lung cancer, cardiovascular disease, respiratory disease and many other illnesses. The health burden doesn't just affect smokers but breathing in smoke from other people's cigarettes is also a serious health burden⁷. Although smoking rates in Victoria have decreased over the past few decades, due to tobacco control efforts, recent data suggests that this trend is slowing⁸. In addition to issues around tobacco, use of e-cigarettes (vaping) is unsafe and the long term health effects are unclear. The use of e-cigarettes is rapidly increasing, particularly among young people.

14.7% Of employed people (aged 14 years and older) in Australia are current smokers⁹



Based on City of Greater Geelong 2017-18 data, the Corio-Norlane area has about 33% of adults who are smokers (the second highest rate in Australia)¹⁰



Smoking rates among people from low socioeconomic groups, those who are unemployed, homeless, and those with a mental illness or other drug or alcohol dependency are much higher than for the general population¹¹



2021 data showed a 2-point increase in daily smokers in Greater Geelong from 2017 data¹²



Among 12 to 17 year old students, around 13% indicated they had used an e-cigarette at least once, and 32% of these students had used one in the past month¹³

In 2022-2023 Barwon Health is working towards reducing tobacco and e-cigarette related harm in our region by:

- **Smoke and vape free environments;** Decreasing the number of environments in which people smoke or vape, or are exposed to second and third hand smoke.
- **Knowledge and self-efficacy;** Increase community capacity to stop smoking and vaping, and access stop smoking services and supports.
- **Local delivery of state-wide prevention initiatives;** Healthy Workplaces Achievement Program.

Prevention of violence against women (PVAW)

Violence against women is a serious and prevalent health issue. In Victoria, it is the leading contributor to death, disability and illness in women aged 15-44 years. ¹⁴ Violence against women has enormous individual and community impacts and social costs however this problem is ultimately preventable.

To align with the Community Health-Health Promotion (CH-HP) 2022-23 transitional guidelines a minor portion 5-10% of our CH-HP funding will be allocated to PVAW. The main focus of our work will be to support women's health services, who are the lead agency in delivering activities for these priorities.



Family violence in Victoria is increasing: 'Family incidents' recorded by Victoria Police increased by 6.7 per cent from 82,651 in 2018–19 to 88,214 in 2019–20 (an increase of 5 per cent in the rate of incidents per 100,000 people) ¹⁵



On average, 1 woman a week in Australia is killed by her current or former partner ¹⁶



Family violence incidents in the Geelong region increased from 3201 matters reported to police in 2018 to 4289 in the year ending March 2022 ¹⁵

In 2022-2023 Barwon Health is working towards improving preventing violence against women in our region by:

- **Work in partnership to support local community initiatives;** Provide support to local and regional initiatives that promote gender equality and prevention of gender-based violence.

Mental health

Mental health promotion is also included in our plan. Whilst we receive funding from a different source for the Mental Health priority area and are not obligated to include it in this context, it will provide a more inclusive overall picture of how Barwon Health is working in health promotion across the prevention system.

Certain groups are at higher risk of poor mental health and mental illness; they include people who have experienced violence and discrimination, socio-economic disadvantage and those with limited social supports. Mental ill-health is the number one issue facing young people worldwide. At every age and stage of life individuals, families and communities may be vulnerable to challenges to mental wellbeing.

Mental health prevention strategies include building resilience, enhancing community connections and social supports, promoting healthy eating and active living, reducing discrimination and stigma and encouraging active participation in the community.



Over 2 in 5 Australians aged 16-85 years have experienced a mental disorder at some time in their life ¹⁷



One in five Australians aged 16-85 have a mental disorder in any 12 month period ¹⁷



About 15% of adult Victorians have high or very high levels of psychological distress. In some areas of the G21 region it is 5% higher than the Victorian average ¹⁷



Anxiety disorders were the most common mental disorders (16.8% or 3.3 million people) in the 12 month period ¹⁷



53.5% of Australian workers experienced a mental health condition in the last 12 months, the proportion is much higher for workers who are based in Victoria (56.6%) ¹⁸

In 2022-2023 Barwon Health is working towards improving mental health and wellbeing in our region by:

- **Community capacity;** Increasing community participation in mental health and wellbeing initiatives.
- **Partnerships;** Building partnerships to promote young people's mental health and wellbeing.
- **Knowledge and self-efficacy;** Increasing community awareness of factors that promote social and emotional wellbeing.

Healthy Communities Unit chart



Note: The Mental Health Promotion Officer position (1.0 FTE) has a separate funding source and guidelines. All other Healthy Communities staff are funded via CH-HP funding.

Current operating environment

Transitional CH-HP Guidelines, ongoing pandemic disruptions and changes in the Victorian prevention system will impact on our operating environment for 2022-23. The implementation of our last two annual plans were significantly impacted by COVID-19 and we anticipate that we will continue to operate in a disrupted way during 2022-23. Being located within our Local Public Health Unit and the extension of their role to include prevention will also influence the local prevention system in which we operate. In addition, the transitional nature of the CH-HP guidelines will have ongoing impacts on our service delivery.

Monitoring and evaluation

Monitoring and evaluation are core components of our work. We have developed a range of immediate, short and medium term measures to help us to track progress against our objectives and which align to outcomes in the *Victorian Public Health and Wellbeing Outcomes Framework*. Over the 2022-23 reporting year we will continue to monitor the progress of the development of the CH-HP shorter term progress measures that will demonstrate impact for healthy eating, active living and reducing tobacco and e-cigarette related harm at scale across Victoria.

Action Plan 2022-23

Healthy Eating



| Our objectives | Target group(s) and settings | Our strategies | Our measures of progress for 2020-23 |
|---|--|---|---|
| <p>Increase capacity to access, prepare and consume healthier food and drinks by supporting Early Childhood settings (ECS) to meet the Victorian menu planning guidelines for long day care (LDC).</p> | <p>Target group Children (aged 0-5).</p> <p>Settings Early Childhood settings (ECS) – long day care (LDC).</p> | <p>Social marketing and health information Increase program reach and marketing of the <i>Victorian menu planning guidelines for long day care</i> to encourage healthy food provision in ECS in the Geelong region.</p> <p>Develop skills and provide health education Provide education to develop the skills of ECS staff to use the HEAS resources including FoodChecker tool for menu planning.</p> <p>Work in partnership with key stakeholders and organisations Build partnerships and networks to support the delivery of healthy eating environments in ECS.</p> | <p>Number of long day care services that are engaged through social marketing campaigns and receive health information.</p> <p>Number of ECS that are actively supported to implement Victorian <i>Menu planning guidelines for long day care</i>.</p> <p>Increase in confidence and skills of ECS - LDC staff to use HEAS resources including FoodChecker for menu planning.</p> <p>Number of ECS long day care providers that achieve or are working towards compliance with the <i>Victorian menu planning guidelines for long day care</i>.</p> |
| <p>Increase capacity to access, prepare and consume healthier food and drinks through local delivery of the Vic Kids Eat Well initiative.</p> | <p>Target group Children (aged 5-18).</p> <p>Settings Primary and secondary schools. Outside School Hours Care. Sports clubs. Sport and recreation facilities.</p> | <p>Social marketing and health information Promote the VKEW initiative to encourage settings in the Geelong region to implement healthy food and drink initiatives.</p> | <p>Number of schools, OHSC and sport and recreation settings that are engaged in VKEW through social marketing campaigns and receive health information.</p> |

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| | | <p>Develop skills and provide health education Provide education to develop the skills of settings to use the VKEW resources to achieve healthy eating action areas and incremental changes.</p> <p>Building community capacity to take local action Build the capacity for schools, OHSC and sport and recreation settings to implement VKEW interventions.</p> <p>Work in partnership with key stakeholders and organisations Engage with local and state-wide partners to support and drive the VKEW initiative.</p> | <p>Number of schools, OHSC and sport and recreation settings actively supported to meet VKEW action areas and incremental changes.</p> <p>Number of VKEW action areas and incremental changes achieved.</p> |
| <p>Support the implementation of the Healthy Choices: policy directive for Victorian public health services across all Barwon Health retail and vending sites.</p> | <p>Target group Barwon Health staff, volunteers, patients and visitors.</p> <p>Settings Health Services - Barwon Health.</p> | <p>Social marketing and health information Deliver and continually improve the communication and marketing initiatives supporting healthy eating initiatives and <i>Healthy Choices: policy directive for Victorian public health services</i> at Barwon Health.</p> <p>Building community capacity to take local action Build capacity of internal Barwon Health stakeholders to support the creation of a healthier and more sustainable food environment aligned with the <i>Healthy Choices: policy directive for Victorian public health service</i>.</p> | <p>Reach and satisfaction of Healthy Choices communication and marketing material.</p> <p>Barwon Health vending, catering and retail outlets meet <i>Healthy choices: Policy directive for Victorian public health services</i> for drinks by September 2022.</p> <p>Barwon Health vending, catering and retail outlets are working towards meeting <i>Healthy choices: Policy directive for Victorian public health services</i> for food by September 2023.</p> <p>Number and proportion of public health services that are actively supported by</p> |

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| | | <p>Create healthy settings and supportive environments Support the implementation of <i>the Healthy Choices: policy directive for Victorian public health services</i> across all Barwon Health retail and vending sites.</p> <p>Increase healthy and sustainable food procurement, distribution and consumption at Barwon Health food retail outlets including strategies that minimise environmental impact.</p> <p>Work in partnership with key stakeholders and organisations Collaborate with local, regional and state-wide networks/partners to support in the implementation of <i>Healthy Choices: policy directive for Victorian public health services</i> at Barwon Health.</p> | <p>CH-HP program providers to implement <i>Healthy choices: Policy directive for Victorian public health services</i>.</p> |
| <p>Influence food systems to improve health through strategies that minimise environmental impact and increase healthy and sustainable food procurement, distribution and consumption (Healthy Retail).</p> | <p>Target group G21 community.</p> <p>Settings Retail settings – Supermarkets.</p> | <p>Build capacity to take local action Develop an evidence based, localised healthy eating intervention targeting food retail outlets in the G21 region.</p> <p>Work in partnership with key stakeholders and organisations Explore partnerships to support the implementation of pilot healthy retail intervention.</p> | <p>Pilot program implementation plan developed.</p> <p>Number of supermarkets piloting healthy retail intervention.</p> <p>Number and type of partnerships formed.</p> <p>Improve community access to healthier and more sustainable food and drink options.</p> |

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| <p>Increase capacity to access, prepare and share healthier food by supporting community organisations to host Community Kitchens (CK).</p> | <p>Target group Community (with a focus towards vulnerable and isolated groups).</p> <p>Settings Community organisations including Neighbourhood houses, schools.</p> | <p>Social marketing and health information Deliver and continually improve the community kitchen communication and marketing initiatives.</p> <p>Health education and skill development Build the capacity of facilitators to support community kitchen and healthy eating initiatives.</p> <p>Building community capacity to take local action Support host organisations in planning to establish new CK's considering locations of disadvantage and priority cohorts.</p> <p>Work in partnership with key stakeholders and organisations Participate in networks to build relationships and cross promote community kitchens and healthy eating initiatives.</p> | <p>Number and reach of; CK newsletters, social media posts and CK webpage.</p> <p>Engage with host organisations and facilitators to better understand what content would be useful and engaging for eNewsletter.</p> <p>Number of facilitator training sessions held.</p> <p>Number of network meetings held.</p> <p>Recipe audit/survey/case study exploring healthy food options and changes in social connection.</p> <p>Number of Community Kitchens supported.</p> <p>Number and type of place based networks, communities of practice and partnerships.</p> |
| <p>Deliver community-wide healthy eating promotion and advocacy initiatives.</p> | <p>Target group G21 community.</p> <p>Setting Community.</p> | <p>Social marketing and health information Amplify and localise state-wide social marketing campaigns by championing the campaign messages in the local community.</p> <p>Create healthy settings and supportive environments</p> | <p>Number and reach of social media posts.</p> <p>Number of advocacy initiatives.</p> |

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| | | <p>Advocate on behalf of the local community to support healthy eating policy and funding.</p> <p>Work in partnership with key stakeholders and organisations Participate in placed based healthy eating networks, and partnerships to collaborate on shared local priorities.</p> | |
| <p>Workplace Health Initiative Support workplaces as a setting for action to create healthy food environments.</p> | <p>Target Group Workers in the G21 Region.</p> <p>Settings Workplaces.</p> | <p>Social marketing and health information.</p> <p>Develop skills and provide health education.</p> <p>Create healthy settings and supportive environments.</p> | <p>Number and reach of WPH newsletters and social media posts targeting healthy eating.</p> <p>Increase in knowledge and self-efficacy to change healthy eating behaviour.</p> <p>Progression toward AP healthy eating benchmark including healthy eating policies.</p> |
| <p>Co-benefits approach Action to improve healthy eating contributes to improving other health priorities, including mental wellbeing, gender equity, active living, reducing tobacco (and e-cigarette) related harm and climate and health.</p> | <p>Target group Children aged 0-18 and their families. Workers in the G21 Region. Community.</p> <p>Settings</p> <ul style="list-style-type: none"> • Early Learning centres • Primary and secondary schools • Outside School Hours Care • Workplaces • Council and community-run facilities • Sport and recreation facilities • Health services • Community organisations including Neighbourhood houses. | <p>Build capacity of the health promotion workforce to understand how to apply a co-benefits approach to healthy eating.</p> <p>Consider and address co-benefits to health and wellbeing in the planning and implementation of healthy eating initiatives.</p> <p>Understand and explore the impact of improving healthy eating on co-benefits to health and wellbeing.</p> | <p>Increased understanding and confidence to apply a co-benefits approach has informed practice.</p> <p>Related health priorities e.g. climate and health, mental wellbeing, gender equity, active living and reducing tobacco (and e-cigarette) related harm have been addressed by applying co-benefits approaches/lenses to healthy eating.</p> <p>Multiple health and well-being outcomes are achieved by addressing healthy eating.</p> |



Active Living

| Our objectives | Target group(s) and settings | Our strategies | Our measures of progress for 2020-23 |
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| <p>Support and implement active living initiatives to increase physical activity of women and girls in the G21 region.</p> | <p>Target Group Women and girls who are less active due to their life stage. Including priority cohorts: Mothers of young children (0-4). School aged (5-18).</p> <p>Settings Community settings.</p> | <p>Social marketing and health information Amplify and localise state social marketing campaigns targeting active living for women and girls e.g. This Girl Can.</p> <p>Building community capacity to take local action Consultation with local stakeholders and literature scan re: barriers and enablers and local need. Design and implement active living initiatives tailored to local context and target group.</p> <p>Work in partnership with key stakeholders and organisations Identify local partners engaging with women/girls across different life stages. Map current active living initiatives targeting identified priority cohorts. Participate in networks to collaborate, share knowledge and contribute to actions targeting active living.</p> | <p>Number and reach of campaigns promoted via social marketing, webpage, eDM platforms, events/forums.</p> <p>Active living initiatives developed and/or promoted. Increased awareness of how to be more physically active within their family context. Increased knowledge of health benefits of being more active.</p> <p>Local actor mapping completed. Key stakeholders/partners identified. Gaps and opportunities for action identified. Number and type of networks and partners.</p> |
| <p>Build capacity of our community to increase active modes of travel.</p> | <p>Target group School aged children (5-18 years). Workers in G21 region. General community.</p> | <p>Social marketing and health information</p> | <p>Number and reach of campaigns promoted via eNewsletters, events, meetings and social media posts.</p> |

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| | <p>Settings Schools. General community. Workplaces in collaboration with the Workplace Health Initiative.</p> | <p>Amplify and localise state social marketing campaigns targeting active travel initiatives.</p> <p>Building community capacity to take local action Tailor and implement active travel initiatives in identified settings.</p> <p>Work in partnership with key stakeholders and organisations Identify local actors and partner to design active travel initiatives tailored to local context and target group.</p> | <p>Active travel initiatives developed and/or promoted. Increased knowledge and confidence in using active modes of travel.</p> <p>Local actor mapping completed Key stakeholders/partners identified.</p> |
| <p>Build capacity of workplaces in the G21 region to develop and implement active living initiatives that increase physical activity and decrease sedentary behaviour.</p> | <p>Target Group Workers in the G21 Region.</p> <p>Settings Workplaces in collaboration with the Workplace Health Initiative.</p> | <p>Social marketing and health information Amplify and localise social marketing campaigns and wellbeing events targeting physical activity in workplaces</p> <p>Building community capacity to take local action Conduct workplace consultation to gain a greater understanding of the barriers and enablers to being more active. Support workplaces to develop and implement workplace health initiatives to increase physical activity.</p> <p>Work in partnership with key stakeholders and organisations Partner with key stakeholders to develop learning opportunities to increase physical activity in G21 workplaces.</p> | <p>Number and reach of WPH newsletters and social media posts targeting active living.</p> <p>Number and type of workplaces supported. Number, type and reach of workplaces receiving individual support. Number, type and reach of workplaces attending learning opportunities. Participant evaluation: changes in attitudes, knowledge, skills confidence. Consultation completed in one workplace to understand barriers and enablers to active workplaces (industry and reach).</p> <p>Number of key partners. Type of collaboration with partners.</p> |

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| <p>Workplace Health Initiative Support workplaces as a setting for action to create environments that support active living.</p> | <p>Target Group Workers in the G21 Region.</p> <p>Settings Workplaces.</p> | <p>Social marketing and health information</p> <p>Create healthy settings and supportive environments.</p> | <p>Number and reach of WPH newsletters and social media posts targeting active living.</p> <p>Progression toward AP physical activity benchmark including Physical activity policies.</p> |
| <p>Co-benefits approach Action to improve active living contributes to improving other health priorities, including mental wellbeing, gender equity, healthy eating, reducing tobacco (and e-cigarette) related harm and climate and health.</p> | <p>Target group School aged children (5-18 years). Workers in G21 region. General community.</p> <p>Settings Schools. General community. Workplaces.</p> | <p>Build capacity of the health promotion workforce to understand how to apply a co-benefits approach.</p> <p>Consider and address co-benefits to health and wellbeing in the planning and implementation of active living initiatives.</p> <p>Understand and explore the impact of improving active living on co-benefits to health and wellbeing.</p> <p>Raise awareness of the health benefits of active travel, including co-benefits to mental wellbeing and climate and health.</p> <p>Create resource pack to support development of pilot initiative targeting physical activity and co-benefits on mental health.</p> | <p>Increased understanding and confidence to apply a co-benefits approach has informed practice</p> <p>Related health priorities e.g. climate and health, mental wellbeing, gender equity, healthy eating and reducing tobacco (and e-cigarette) related harm have been addressed by applying co-benefits approaches/lenses to active living.</p> <p>Multiple health and well-being outcomes are achieved by addressing active living.</p> <p>Number of newsletter articles, social media posts, webpage engagements and infographics.</p> <p>Reach.</p> |



Reducing Tobacco and e-Cigarette Related Harm

| Our objectives | Target group(s) and settings | Our strategies | Our measures of progress for 2020-23 |
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| <p>Decrease the number of environments in which people smoke or vape, or are exposed to second and third hand smoke.</p> | <p>Target Groups Secondary and tertiary students (aged 12-18 +). Workers in the G21 Region. Unemployed people in the G21 Region. Barwon Health staff, volunteers and consumers.</p> <p>Settings Secondary and tertiary education settings. Community agencies working with unemployed people. Barwon Health. Workplaces in collaboration with the Workplace Health Initiative.</p> | <p>Develop skills and provide health education Develop and deliver information and resources to targeted settings that encourages them to adopt smoke and vape free environments.</p> <p>Create healthy settings and supportive environments Support targeted settings to adopt, implement or review smoke- and vape- (e-cigarette) free policies.</p> <p>Work in partnership with key stakeholders and organisations</p> | <p>Number and type of settings engaged. Resources developed. Evidence that resources have been utilised.</p> <p>Number and type of settings that are working towards development, implementation or review of smoke and vape (e-cigarette) free policies.</p> <p>Work is aligned with Quit and the Healthy Workplaces Achievement Program.</p> |
| <p>Increase community capacity to stop smoking and vaping, and access stop smoking services and supports</p> | <p>Target Groups General public with a focus on current tobacco-smokers and young people at risk of or currently vaping in targeted locations (postcodes).</p> <p>Settings Various media channels. Community venues. Secondary and tertiary educational settings.</p> | <p>Social marketing and health information Extend the reach of the <i>Give Smoking Away this May</i> campaign, to provide information on access to smoking and nicotine cessation support and the health risks associated with smoking and vaping.</p> <p>Building community capacity to take local action Implement an e-cigarette community engagement consultation with key stakeholders and community representatives to develop evidence-informed initiatives to reduce 'vaping'.</p> | <p>Number of organisations, venues and media outlets engaged. Number of communication activities developed. Communication reach and engagement.</p> <p>Target audience informed content developed. Reach of messaging. Communication reach and engagement.</p> <p>A community forum is established with key stakeholders and community partners. Priorities identified.</p> |

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| | | | Evidence-informed initiatives developed. |
| <p>Workplace Health Initiative Support workplaces as a setting for action to create tobacco and e-cigarette free environments.</p> | <p>Target Group Workers in the G21 Region.</p> <p>Settings Workplaces.</p> | <p>Social marketing and health information</p> <p>Develop skills and provide health education</p> <p>Create healthy settings and supportive environments</p> | <p>Number and reach of WPH newsletters and social media posts targeting RTRH.</p> <p>Increase in knowledge and self-efficacy to change smoking and e-cigarette behaviour of workers in the G21 region</p> <p>Progression toward AP healthy eating benchmark including RTRH policies.</p> |
| <p>Co-benefits approach Action to reduce tobacco (and e-cigarette) related harm contributes to improving other health priorities, including mental wellbeing, gender equity, active living, healthy eating and climate and health.</p> | <p>Target group Workers in the G21 Region. Barwon Health. G21 community.</p> <p>Settings Workplaces. Secondary and tertiary education settings. Community organisations.</p> | <p>Build capacity of the health promotion workforce to understand how to apply a co-benefits approach.</p> <p>Consider and address co-benefits to health and wellbeing in the planning and implementation of reducing tobacco (and e-cigarette) related harm initiatives.</p> <p>Understand and explore the impact of reducing tobacco (and e-cigarette) related harm on co-benefits to health and wellbeing.</p> <p>Develop and disseminate information (infographics, posters, social media posts, newsletter articles) that leverage environmental and mental health concerns to reduce or prevent use of tobacco and e-cigarettes.</p> | <p>Increased understanding and confidence to apply a co-benefits approach has informed practice.</p> <p>Related health priorities e.g. climate and health, mental wellbeing, gender equity, active living and healthy eating have been addressed by applying co-benefits approaches/lenses tobacco (and e-cigarette) related harm.</p> <p>Multiple health and well-being outcomes are achieved by addressing reduce tobacco (and e-cigarette) related harm.</p> <p>Communications materials developed that leverage environmental and mental health concerns.</p> |



Prevention of Violence Against Women

| Our objectives | Target group(s) and settings | Our strategies | Our measures of progress for 2020-23 |
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| <p>Provide support to local and regional initiatives that promote gender equality and prevention of gender-based violence.</p> | <p>Target Group Community members.</p> <p>Settings Schools. Media. Local and regional agency settings.</p> | <p>Social marketing and health information Work with local and regional organisations to support social media campaigns/ initiatives in the region and ensure information is shared.</p> <p>Building community capacity to take local action Contribute to the production of video resources for a younger cohort of newly arrived populations to be lawful, safe and respectful in gender-based relationships, with Cultura.</p> <p>Transition the Respect Netball Cup to a model led by local agencies with in-school learning content and sports-based community connections.</p> <p>Work in partnership with key stakeholders and organisations Participate as an active member of the Women’s Health and Wellbeing Barwon South West (WHWBSW) Respect 2040 reference group.</p> | <p>Evidence of shared work on initiatives such as 16 Days of Activism and International Women’s Day. Reach of social media promotion.</p> <p>Contribution to the production of video resources.</p> <p>External agencies lead the Respect Cup and schools adopt actions in their settings. Engagement by schools in a webinar supporting the transition process.</p> <p>Input into the development of a new regional approach and actions. Evidence of support role on regional initiatives.</p> |
| <p>Provide support to Barwon Health departments and staff to promote gender equality and prevention of gender-based violence.</p> | <p>Target Group Barwon Health staff.</p> <p>Settings Barwon Health.</p> | <p>Develop skills and provide health education Building community capacity to take local action Increase the capacity of Barwon Health to promote gender equity practices</p> | <p>Number of people engaging with Barwon Health in-house ‘grand-round’ presentation.</p> |

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| | | within their workspaces through presentations and training. | Percentage of attendees that report intention to act to address gender equitable practices in their workplace. Prevention components evident in contribution to Gender Impact assessment training resources. |
| <p>Co-benefits approach Integrating gender considerations into our work contributes to improving health priorities, including mental wellbeing, active living, healthy eating, reducing tobacco (and e-cigarette) related harm and climate and health.</p> | <p>Target group Community members. Barwon Health staff.</p> <p>Settings Schools. Barwon Health. Community wide. Local and regional agency settings.</p> | <p>Build capacity of the health promotion workforce to understand how to apply a co-benefits approach.</p> <p>Consider and address co-benefits to health and wellbeing through the application of a gender lens in the planning and implementation of health promotion initiatives.</p> <p>Understand and explore the impact of improving gender equality on co-benefits to health and wellbeing.</p> | <p>Increased understanding and confidence to apply a co-benefits approach has informed practice.</p> <p>Gender lens has been applied to health promotion planning and practice.</p> <p>Related health priorities e.g. climate and health, mental wellbeing, active living, healthy eating and reducing tobacco (and e-cigarette) related harm have been enhanced by applying co-benefits approaches/lenses.</p> <p>Multiple health and well-being outcomes are achieved by addressing gender inequalities.</p> |

Mental Health

Mental Health Promotion is also included in our CH-HP plan. Whilst we receive funding from a different source for the mental health priority area and are not obligated to include it in this context, it will provide a more inclusive overall picture of how Barwon Health is working in health promotion and primary prevention across the system. Integrating mental health and wellbeing into our plan in this way enables us to adopt a co-benefits approach across the health priority areas.



| Our objectives | Target group(s) and settings | Our strategies | Our measures of progress for 2020-23 |
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| Build capacity of the health promotion and mental health sectors. | <p>Target Group Barwon Health staff - MHDAS, HCU and People and Culture.</p> <p>Settings Barwon Health.</p> | <p>Building community capacity to take local action (Individuals and organisations) Lead Community of Practice within Mental Health Drug and Alcohol Service (MHDAS), with education partners and champions across MHDAS.</p> <p>Support Healthcare Worker Wellbeing grants program – to address barriers to help seeking.</p> | <p>Contribution to workforce development plan.</p> <p>Number of Community of Practice meetings.</p> <p>Engagement level of participants. Increased mental health promotion literacy of clinical staff.</p> <p>Literature review on stigma reduction and norms around psychological help seeking in healthcare staff achieved and presented to Steering Committee.</p> |
| Increase community participation in mental health and wellbeing initiatives. | <p>Target Group Community members.</p> <p>Settings Community organisations.</p> | <p>Building community capacity to take local action (Individuals and organisations) Review the MHP grants initiative (year 2) and begin planning processes for MHP grants initiative (year 3). Work with community driven MHP initiatives in 2022-2023.</p> <p>Work in partnership with key stakeholders and organisations Review all Royal Commission into Victoria's Mental Health System</p> | <p>MHP grants initiative reviewed. Number and reach of grants provided.</p> <p>Planning documents developed.</p> <p>Partnerships created to deliver MHP initiatives to selected, indicated and broader community.</p> |

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| | | recommendations and continue to liaise with the newly formed Mental Health and Wellbeing Promotion Office and Wellbeing Plan. | Royal Commission planning tracked and applied to MHP planning processes. |
| Build partnerships to promote young people's mental health and wellbeing in the region. | <p>Target Group Young people (aged 12 -25).</p> <p>Settings Community youth organisations.</p> | <p>Work in partnership with key stakeholders and organisations Advising the Communities that Care (CtC) Steering Committee.</p> <p>Work in partnership with City of Greater Geelong Youth Development Unit to deliver local youth mental health initiatives and amplify regional initiatives.</p> | <p>Number of youth council meetings attended.</p> <p>Number of consultations.</p> |
| Increase community awareness of factors that enhance social and emotional wellbeing. | <p>Target Group Whole of population. Barwon Health staff.</p> <p>Settings Community organisations. Barwon Health.</p> | <p>Social marketing and health information Amplify and localise social marketing campaigns and wellbeing events.</p> <p>Develop skills and provide health education Mental Health First Aid (MHFA) training. Applied Suicide Intervention Skills Training (ASIST).</p> <p>Develop a co-designed mental health resource that enables community members to support and enhance their mental health and wellbeing.</p> | <p>Engagement in RUOK? Day, Mental Health Month and other campaigns. Number and reach of social media posts.</p> <p>Number of courses delivered.</p> <p>Resource is developed and distributed. Number of people who access and use the resource.</p> |
| <p>Workplace Health Initiative Support workplaces as a setting for action to create environments that support mental health and wellbeing.</p> | <p>Target Group Workers in the G21 Region.</p> <p>Settings Workplaces in collaboration with the Workplace Health Initiative.</p> | <p>Social marketing and health information.</p> <p>Develop skills and provide health education.</p> | <p>Number and reach of WPH newsletters and social media posts targeting mental health and wellbeing.</p> |

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| | | Create healthy settings and supportive environments | <p>Increase in knowledge and self-efficacy to respond to and support mental health and wellbeing.</p> <p>Progression toward AP mental health benchmark.</p> |
| <p>Co-benefits approach Action to improve mental health and wellbeing contributes to improving other health priorities, including active living, gender equity, healthy eating, reducing tobacco (and e-cigarette) related harm and climate and health.</p> | <p>Target group Young people (aged 12 -25). Workers in the G21 Region. Community members. Barwon Health staff.</p> <p>Settings Community organisations. Community youth organisations. Barwon Health. Workplaces.</p> | <p>Build capacity of the health promotion workforce to understand how to apply a co-benefits approach.</p> <p>Support healthy eating, active living and reducing tobacco (and e-cigarette) related harm work areas in optimising mental health co-benefits.</p> <p>Consider and address co-benefits to health and wellbeing in the planning and implementation of mental health and wellbeing initiatives.</p> <p>Understand and explore the impact of improving mental health and wellbeing on co-benefits to health and wellbeing.</p> | <p>Increased understanding and confidence to apply a co-benefits approach mental health and wellbeing has informed practice.</p> <p>Related health priorities e.g. climate and health, active living, gender equity, healthy eating and reducing tobacco (and e-cigarette) related harm have been addressed by applying co-benefits approaches/lenses to mental health and wellbeing.</p> <p>Multiple health and well-being outcomes are achieved by addressing mental health and wellbeing.</p> |

Workplace Health

We implement evidence-based programs and initiatives (i.e. **Healthy Workplaces Achievement Program**) to support active living, healthy eating and tobacco and e-cigarette free environments in workplace settings.



| Our objectives | Target group(s) and settings | Our strategies | Our measures of progress for 2020-23 |
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| <p>Promote the Workplace Health initiative within the G21 region.</p> | <p>Target Group Workers in the G21 Region.</p> <p>Settings Workplaces.</p> | <p>Social marketing and health information</p> <p>Promote and provide information to workplaces in the G21 region about the Barwon Health WPH initiative via:</p> <ul style="list-style-type: none"> • Quarterly eNewsletter. • Social media. • Local case studies. • Webpage. <p>Procure and/or develop collateral to promote WPH initiative.</p> | <p>Number and reach of eNewsletters. Case studies developed. Number and reach of social media posts. Number of new registrations and increased engagement of existing AP registered workplaces. Number of workplaces receiving information via emails, events, meetings and potential reach.</p> <p>Type of collateral and reach of distribution.</p> |
| <p>Build capacity of G21 region workplaces to develop and implement workplace health strategies.</p> | <p>Target Group Workers in the G21 Region.</p> <p>Settings Workplaces.</p> | <p>Develop skills and provide health education</p> <p>Provide education, resources and external learning opportunities to workplaces targeting key health priorities via newsletters, social media and meetings.</p> <p>Continue to develop resources to support learning for the workplace health audience e.g. educational videos or modules on relevant topics.</p> | <p>Number and type of workplaces engaged.</p> <p>Number and type of 1:1 contacts e.g. face to face meetings, online coaching, and phone support.</p> <p>Number and types of resources/learning opportunities e.g. guidelines/frameworks, training, articles. Number of engagements with resources.</p> |

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| | | <p>Building community capacity to take local action Lead and facilitate the Workplace Health Network (WHN). Deliver Workplace Health capacity building events and resources for local workplaces.</p> <p>Create healthy settings and supportive environments Provide individual support to identified workplaces to develop and implement workplace health programs.</p> | <p>Number of network meetings/events. Number of members and organisations attending and reach.</p> <p>Two events held annually. Participant evaluation to include changes in attitudes, knowledge, skills confidence.</p> <p>Progress towards benchmark achievement including health priority area policies.</p> |
| Develop strategic partnerships to support the delivery of the Workplace Health Initiative. | <p>Target Group Workers in the G21 Region.</p> <p>Settings Workplaces.</p> | <p>Work in partnership with key stakeholders and organisations Map and maintain awareness of industry experts. Work with partners and industry experts to deliver workplace initiatives.</p> | <p>Actor mapping completed. Create spreadsheet resource.</p> <p>Number of key partners and collaborations.</p> |

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- ¹⁶ Australia's National Research Organisation for Women's Safety (ANROWS) (2018). Available from <https://www.anrows.org.au/>
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- ¹⁸ SuperFriend (2021). Indicators of a Thriving Workplace. Available from <https://superfriend.com.au/resources/itw/>