



Colac Otway  
SHIRE

Colac Otway Shire  
**MUNICIPAL PUBLIC  
HEALTH AND  
WELLBEING PLAN**

**2013-17**





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Colac Otway Shire acknowledges the traditional owners and custodians of the lands in our region and pays respect to their Elders both past and present.

# Executive SUMMARY

The purpose of the Municipal Public Health and Wellbeing Plan 2013-2017 (this Plan) is to clearly describe the context and content of how Colac Otway Shire will work to support the health and wellbeing of the Colac Otway community, in some important issues, over the term of this Council.

This Plan has been developed to meet the legislative requirements of the *Victorian Government Public Health & Wellbeing Act 2008* and the *Climate Change Act 2010*. To achieve this, Council needs to prepare and adopt a Municipal Public Health and Wellbeing Plan within twelve months of a new Council being elected which must have regard to climate change. This Plan is closely aligned to the recently adopted Colac Otway Shire Council Plan 2013–2017 and actions are linked to the Council Plan themes.

Actions in this Plan have been developed through evidence based research on health and wellbeing issues that identify Colac Otway compared to other municipalities, as being disadvantaged or less healthy. This is supported by local and regional workshops, meetings with stakeholders and an on-line survey.

The Victorian Public Health and Wellbeing Plan 2011-2015 provides a model on which to strengthen the prevention system and has identified the following key enablers which need to be embedded into the functions of Council as they relate to public health and wellbeing issues.

- Governance and leadership
- Information systems and the use of evidence based data
- Financing and resource allocation
- Partnerships
- Workforce development
- Community capacity

It is recognised that partnerships provide better opportunities for health and wellbeing outcomes. For Colac Otway these partnerships are with the G21 Geelong Region Alliance, through the development of a G21 Region Health and Wellbeing Plan and with local health and community service providers.

The G21 Region Health and Wellbeing Plan has been developed concurrently with this Plan and has provided direction on health and wellbeing processes. Regional priorities will focus on Community Connectedness and Social Isolation, Physical Activity and evidence based planning and practice. These regional priorities will be supported by an evidence based approach to develop a new G21 Region Health and Wellbeing Profile. This Plan will form part of the regional strategy.

Guiding principles developed out of the Council Plan and Council's Access, Equity and Inclusion Plan 2010–2013 provide the core values and philosophy to improving local health and wellbeing.

Using information from research and local conversations, and themes in the Council Plan, a number of health and wellbeing priority interventions have been developed. These are to:

- Embed key health and wellbeing enablers.
- Plan for an ageing population.
- Reduce significant levels of disadvantage in early years.
- Increase levels of physical activity.
- Protection through public and environmental health.

- Support healthy eating and food security.
- Support mental health and wellbeing.
- Prevention of violence against women and children.
- Support healthy behaviours.
- Reduce harm from alcohol, tobacco and other drugs.

For each of these health and wellbeing priorities, a brief description of the issue is provided. This is supported by evidence based information and supporting documents. An 'Action Guide' for each of these priorities has been prepared which outlines the goal, its link to the Council Plan, and a number of actions. Key partners are identified with Council for many of these actions.

Although these health and wellbeing priorities are individually actioned, undertaken together they provide multiple strategies which complement each other. It is intended that this approach will assist Council and its partners to improve the health and wellbeing outcomes for the life of this Plan and beyond.

We would like to acknowledge all of the representatives from local and regional agencies, organisations, departments, services, community houses and community members who have contributed to the development of this Plan.

## INTRODUCTION

**This Plan has been developed to meet the legislative requirements of Council as defined under the *Public Health & Wellbeing Act 2008*, which is to produce a Municipal Public Health & Wellbeing Plan that:**

- examines data about health status and health determinants in the municipal district;
- identifies goals and strategies based on available evidence for creating a local community in which people can achieve maximum health and wellbeing;
- provides for the involvement of people in the local community in the development, implementation and evaluation of the Public Health & Wellbeing Plan; and
- specifies how the Council will work in partnership with the Department of Health and other agencies undertaking public health initiatives, projects and programs to accomplish the goals and strategies identified in the Public Health and Wellbeing Plan.

**This Plan will meet the following three requirements:**

- Prepare a Municipal Public Health and Wellbeing Plan that is finalised within twelve months of the new Council being elected and as such reflects the new Council Plan and the subsequent Operational and Business Plans within Council.
- Prepare a Regional G21 Public Health & Wellbeing Strategy which incorporates the municipalities of Colac Otway Shire, City of Greater Geelong, Golden Plains Shire, the Borough of Queenscliffe and Surf Coast Shire. The regional plan will focus on two regional priorities.
- Work closely with health services such as Colac Area Health, Hesse Rural Health, Otway Health and Community Services and other service providers such as Glastonbury and St. Laurence to develop partnerships in health and wellbeing activities, and share ideas, research, resources and training opportunities.



# Preparing THIS PLAN

## This Plan has been informed by the following processes:

- Review of the demographic and health profile data for the Colac Otway Shire.
- The direction of the Colac Otway Shire Council Plan 2013-2017.
- The development of a G21 Region Health and Wellbeing Plan and its key priorities.
- The development of a Geelong/Colac Otway Region Physical Activity Strategy.
- The development of the G21 Public Transport Strategy.

This Plan needs to outline enabling strategies and actions to increase Council's capacity across all of its functions to improve the public health and wellbeing of people within the municipality. A health and wellbeing impact lens needs to be applied to all of Council's plans, strategies and activities to promote health for all and reduce health inequality.

To this end, it is fundamental that Council understands the systems thinking approach and supports positive factors that are beneficial to promoting determinants of health such as universally accessible open spaces and infrastructure, urban design, sustainability, liveability, sanitation, active transport and reducing disadvantage.

Where actions can be planned and implemented across the G21 and Great South Coast regions in which Colac Otway exists, they will be. Where priorities are unique or significant to Colac Otway, local planning and actions will occur. The priorities identified in this Plan are divided into the following themes:

- Embed key health and wellbeing enablers
- Plan for an ageing population
- Reduce significant levels of disadvantage in early years
- Increase levels of physical activity
- Protection through public and environmental health
- Support healthy eating and food security
- Support mental health and connectedness
- Prevention of violence against women and children
- Support healthy behaviours
- Reduce harm from alcohol, tobacco and other drugs.



There are a number of local and regional documents to be prepared over the next 12 months that will have a regard to supporting health and wellbeing within Colac Otway. This Plan recognises the importance of these documents and the finer detail that they will provide to a number of this Plan's goals. These will include the:

- Colac Otway Shire Early Years Plan.
- Colac Otway Shire Positive Ageing Strategy.
- Colac Otway Shire Access, Equity and Inclusion Plan.
- Colac Otway Shire Alcohol & Other Drugs Plan.
- Colac Otway Shire Active Transport Strategy Plan.
- Colac Otway Shire/City of Greater Geelong Physical Activity Strategy.
- G21 Public Transport Strategy.
- G21 Region Health and Wellbeing Plan.
- Integrated Health Promotion Plans – Local and Regional Health Services.

### There have been three G21 regional priorities developed for the G21 Region Health and Wellbeing Plan 2013-2017.

#### 1. Improve the opportunities for increased access and uptake of physical activity

- Progress towards a region-wide physical activity strategy
- Work with partners and connect with healthy promotion, health literacy, service coordination and Integrated Chronic Disease Management activities
- Advocate for increased accessibility for people of all abilities in built and natural environments
- Advocate for improved amenities and safer public spaces
- Community wide supports to connect to service coordination and chronic disease management
- Workforce/professional development with the Planning Institute of Australia and the Municipal Association of Victoria about environmental design
- Develop resource information and local community leaders
- Collaborate on social marketing strategy and directory development.

#### 2. Strengthen our advocacy for increased community connectedness and social inclusion

- Support the Addressing Disadvantage project through policy, evidence and funding
- Investigate regional governance models
- Strengthen regional volunteering profile and strategy
- Support key strategies ie: family violence strategy, public transport, growth plan.

#### 3. Collaborate on building our evidence based planning and practice

- Update community data profile
- Commission systematic reviews for identified priorities
- Integrate child – adolescent data sets into region wide profile
- Create a Health and Wellbeing web based clearinghouse, regional fact sheets and workforce development tools
- Promote gender and diversity lens across member organisations
- Develop core set of Health and Wellbeing Indicators for evaluation over life of strategy.

# Policy CONTEXT

## International

In March 2005, the World Health Organisation (WHO) established the Commission on the Social Determinants of Health to support countries and global health partners in addressing the social factors leading to ill health and health inequities.

### Social Determinants of Health

The social determinants of health are the conditions in which people are born, grow, live, work and age. These circumstances are shaped by the distribution of money, power and resources at global, national and local levels. The social determinants of health are mostly responsible for health inequities - the unfair and avoidable differences in health status seen within and between countries.

*World Health Organisation*

In October 2011, Member States adopted the Rio Political Declaration at the World Conference on Social Determinants of Health, calling upon them to act in five areas:

- Adopt improved governance for health and development

- Promote participation in policy-making and implementation
- Further reorient the health sector towards promoting health and reducing health inequities
- Strengthen global governance and collaboration
- Monitor progress and increase accountability.

This was reinforced at the 66th World Health Assembly held in Geneva in May 2013. During the opening of this assembly Member States were reminded that *"factors that contribute to good health at low cost include a commitment to equity, effective governance systems, and context-specific programmes that address the wider social and environmental determinants of health."*

## National

In Australia there are a range of strategic policy reforms being administered through legislative reform and a set of Health Partnership Agreements with their corresponding national health agencies. One national body integral to this work is the Australian National Preventive Health Agency which oversees major investments in policy and program changes to impact more on priority areas such as tobacco, alcohol consumption, healthy eating and physical activity.

There are multiple policies and strategies within the Commonwealth Government that focus on national health and wellbeing initiatives.

Those that provide direction for this Plan include:

- *The Australian Government's National Food Plan* - sets the direction for government policy on food into the future. It is one of the key pillars for achieving the goals of the Australia in the Asian Century white paper.
- *The Roadmap for National Mental Health Reform 2012-2022* - is for a society that values and promotes the importance of good mental health and wellbeing, maximises opportunities to prevent and reduce the impact of mental health issues and mental illness and supports people with mental health issues and mental illness, their families and carers to live full and rewarding lives<sup>1</sup>.
- *The Australian Early Years Development Index* - identifies the level of vulnerability within children.
- *The Australian Government Social Inclusion Framework* - identifies where effort is required and what successes can be built upon.
- *Department of Education, Employment and Workplace Relations, National Quality Framework for Early Childhood Education* - has developed the Early Years Learning Framework for early childhood education and care and is a key component of the Australian Government's National Quality Framework for early childhood education and care.
- *Department of Health and Ageing* - is introducing nationwide its *Live Longer Live Better* program.



## State

The *Public Health and Wellbeing Act 2008* is the principle State Government legislation to promote and protect the health and wellbeing of Victorians. As a requirement of this Act, the Victorian Public Health and Wellbeing Plan 2011-2015 was developed to improve the health and wellbeing of all Victorians by engaging communities in prevention, and by strengthening systems for health protection, health promotion and preventive healthcare across all sectors and levels of government.

The three other Victorian acts of parliament that impact directly on themes in this Plan are the:

- *Food Act 1984*
- *Tobacco Act 1987*
- *Climate Change Act 2010*

The *Environments for Health Municipal Public Health Planning Framework* was developed in 2001 to assist local governments to consider the impact on health and wellbeing of factors across any or all of the built, social, economic and natural environments.

The State Plan is one in a suite of relevant plans and frameworks that govern health reform in Victoria such as the Victorian Health Priorities Framework 2012-2022 and the Rural and Regional Health Plan 2012.

Throughout the material reviewed it was reinforced that *'health-planning efforts must focus on the creation of structures and processes that actively work to dismantle existing health inequalities and create economic, political, and social equality'*. (Schulz & Northridge, 2004).



## Regional

In 2012 the five municipalities in the G21 region including Colac Otway, Golden Plains and Surf Coast Shires, City of Greater Geelong and the Borough of Queenscliffe agreed to collaborate on the 2013-17 public health and wellbeing planning process.

A public health planning framework was developed and adopted. It enabled a common and consistent approach for Municipal Public Health and Wellbeing Plan (MPHWP) development in each municipality and across the region.

This process was designed to enable each Council to develop a MPHWP to reflect place based community needs and meet the requirements of the *Public Health and Wellbeing Act 2008*. In addition, the common and consistent approach through the agreed public health planning framework has resulted in identification of a small number of regional priorities and the establishment of a Regional Health and Wellbeing Plan to support local MPHWP implementation.

A Steering Group including all Councils, the Department of Health and Barwon Medicare Local was established and all Councils contributed funds to resource this innovative regional collaboration. This investment was matched by the Regional Office of the Department of Health. The Department was particularly interested to strengthen the capacity of local governments within the G21 region to strengthen partnerships and enhance health protection, promotion and prevention.

As Council MPHWP took shape, a Regional Health and Wellbeing Plan developed in response.

While Council MPHWP are a statutory requirement under the Act the Regional Health and Wellbeing Plan is not. But it does form an agreed support strategy for common issues across the region including physical activity, social connectedness and inclusion and evidence based planning and practice. Actions in the Regional Health and Wellbeing Plan have been developed to support the implementation of Council MPHWP. Implementation of the Regional Health and Wellbeing Plan will provide resources to projects of mutual interest to Councils where a collective effort from a myriad of agencies across the region that contribute to improved health and wellbeing outcomes is required.

It will be requested that Councils consider formally supporting the Regional Health and Wellbeing Plan by October 2013. It is planned that the G21 Board will be presented with the outcomes of Council decision making processes later in 2013.

Both the Health and Wellbeing Pillar and the Sport and Recreation Pillar are undertaking regional planning processes that are closely connected to the development of this Municipal Public Health and Wellbeing Plan.

### G21 Region Health and Wellbeing Plan 2013-2017

The aim of the *G21 Region Health and Wellbeing Plan 2013-2017* is to improve the health and wellbeing of communities through the G21 region.

## Geelong and Colac Otway Region Physical Activity Strategy

The aim of the *Geelong and Colac Otway Region Physical Activity Strategy* is to provide an evidence base to guide policy and decision making at a regional and municipal level to create environments that support physical activity. The strategy is intended to complement the work being done in the health and wellbeing area, whilst maintaining a distinct focus on physical activity.

This Strategy is due for completion in late 2013.

## G21 Public Transport Strategy (draft)<sup>2</sup>

The G21 Public Transport Strategy has the overall goal of **increasing utilisation of public transport**, and in turn reducing traffic congestion, improving the environment, and overcoming social isolation.

This Strategy (draft) has established four strategic objectives:

1. **Access for All:** a base level of service should be available to all across the region, and that all services should be accessible to potential users.
2. **A well connected Region:** public transport will serve the need for access to and between the region's centres.
3. **Urban public transport for an Urban Centre:** a 'go anywhere' public transport network will be developed in Geelong by reshaping and simplifying the current network.
4. **Improving information, planning and partnerships:** The G21 Region will take a leadership role in finding new ways to implement better public transport, sooner.

## Local

The Colac Otway Shire's Council Plan 2013-2017 is the key document that will guide direction and activities during the four year term of our current Council. It sets out our Shire's vision and identifies the themes, priorities and strategies we will pursue.

The four key themes or 'pillars' in the Council Plan are:

1. **Good Governance**
2. **A Planned Future**
3. **A Place to Live and Grow**
4. **A Healthy Community and Environment**

Other local documents sourced for this Plan include:

- Colac Otway Shire Public Health Plan & Wellbeing Plan 2010-2013
- Colac Otway Shire Access, Equity and Inclusion Plan 2010-2013
- Colac Otway Shire Public Open Space Strategy
- Colac Otway Shire Environment Strategy 2010-2018
- Colac Otway Shire Early Years Plan 2010-2013
- Colac Otway Shire Positive Ageing Strategy 2008-2012
- Colac Area Health – Integrated Health Promotion Plan 2012-2013
- Otway Health & Community Services – Integrated Health Promotion Plan 2012 - October 2013
- Colac Otway Shire Health & Community Services Business Plan 2013-2014
- Colac Area Health – draft Youth Health and Wellbeing Report 2013
- Colac Otway Shire Municipal Emergency Management Plan
- Colac Otway Shire Apollo Bay and Colac - Elliminyt Commuter Footpath Strategies
- Barwon Regional Drug Action Plan
- Community Food Security Needs Assessment for Colac Otway Shire (draft) 2013



# Our Shire

## PROFILE

### Location and History

Colac Otway Shire is located in Victoria's south west within a two hour drive of Melbourne, and approximately an hour to the large regional cities of Geelong to the east and Warrnambool to the west.

The Shire contains the major urban centre of Colac, the coastal resort towns of Apollo Bay and Skenes Creek, the rural townships of Birregurra, Beeac, Cressy and Forrest, and a large rural hinterland. A large proportion of the Shire is made up of Forest Park and National Park.

Development in the Shire dates from the 1850's when pastoralists and timber-getters established themselves in the areas around Colac. Colac experienced significant growth in the first half of the 20th century as it became the major service centre to the agricultural areas to the north and the timber getting areas to the south. Apollo Bay was established in the 1860s as a port for the timber being harvested in the Otway Ranges. The construction of the Great Ocean Road in the 1930s opened up the coastal strip for development and in more recent years Apollo Bay has established itself as a holiday destination.

### People

Our estimated population for 2013 is 20,973. The forecast through to 2031 is for a growth of approximately 1% per annum. We expect this to increase once the dual highway to Geelong is completed as it will open up the region making commuting an attractive option for both the local population and for those seeking a lifestyle change.

Growth over the coming 18 years is also predicted to be steady, however with an increasingly ageing population.

### Age Structure

Age structure is an important indicator of an area's residential role and function and how it is likely to change in the future. The age structure of a population is usually indicative of an area's era of settlement and provides key insights into the level of demand for services and facilities, as most services and facilities are age-specific. The current age structure of Colac Otway is:

- 0–4 years 6.2%
- 5–19 years 19.4%
- 20–34 years 14.8%
- 35–59 years 34.0%
- over 60 years 25.6%



## The Shire at a Glance

**Area:** 3,427 sq kilometres

**Length of local roads:**  
1,632 kilometres

**Coastline:** 95 kilometres

**Forest and National  
Park:** 110,000 hectares

**Estimated population:**  
20,973

**Population born  
overseas:** 7.5%

**Population growth rate:**  
1.2%

**Employment rate:** 97%  
(full time, 57%)



## Education and Employment

Young people in Colac Otway Shire tend to leave school earlier and are less inclined to go to university, compared with regional Victoria. Overall, 41.9% of the population left school at Year 10 or below, and 31.9% went on to complete Year 12 or equivalent, compared to 39.0% and 35.6% respectively for regional Victoria. On the other hand, our Shire experiences a higher employment rate, 97% (full time, 57%; part time, 40%) than for regional Victoria, at 94.8%.

The five major industry sectors are:

- Health Care and Social Assistance (1,133 persons or 13.7%)
- Manufacturing (1,048 persons or 12.7%)
- Agriculture, Forestry & Fishing (993 persons or 12.0%)
- Retail Trade (843 persons or 10.2%)
- Tourism (693 persons or 8.4%)

In combination, these five industries employed a total of 5,220 people or 63% of the employed resident population.

## Housing

The housing market in our Shire shows distinct variations. Colac and the rural areas primarily provide housing for families, with rural areas recording some population decline in recent years due to ongoing structural change in agriculture and the ageing of its population.

By contrast, our coastal areas have a dual housing market focussed on families and retirees. However, the vacancy rates are extremely high, reflecting their role and function as holiday destinations. It is expected that demand for housing in the coastal areas will predominantly come from further afield, such as Geelong and Melbourne.

There are significant differences in the supply of residential property within the Shire, which will have a major influence during the next five to ten years due to changing needs. New development opportunities have been identified in Elliminyt and the coastal areas, while the established areas of Colac and the rural areas have relatively low numbers of new dwellings expected over the forecast period.

Sources  
Australian Bureau of Statistics Census 2011  
.id Consulting, Melbourne 2013  
REMPAN 2012

## Our VISION

The Colac Otway Shire Council Plan 2013–2017 was adopted by Council in June 2013. Its vision for this term of Council is to work towards:

### Vision: A sustainable community with a vibrant future



### Council Plan Pillars

Our Council Plan is structured around four key themes or ‘pillars’. These are:

#### 1. Good Governance

means we care about and are responsive to the community, encourage democratic participation and involve people in decisions that affect them. We strive for excellence in financial management and council services, and always look for better ways to do things.

**Our Goal:** Ensure transparency of governance practices, the capability of our organisation and effective resource management.

#### 2. A Planned Future

creates an attractive shire with quality buildings and spaces, accessible travel and transport, and a community that has the services and facilities it needs now and in the future; supports a prosperous economy where trade, manufacturing and business activity flourishes.

**Our Goal:** Facilitate the growth, liveability and development of the shire and encourage innovation and efficiency in the local economy.

#### 3. A Place to Live and Grow

is a community where people feel cared for and supported; where buildings and spaces facilitate creativity, social activity and enrichment of life, and people have access to gain the skills and education needed to reach their potential.

**Our Goal:** Improve access to buildings, spaces, services and education to support and enable quality of life.

#### 4. A Healthy Community and Environment

actively connects and includes people of all ages and backgrounds and promotes a healthy and vibrant community life in a clean, safe and sustainable environment.

**Our Goal:** Respect cultural differences, support a diverse range of healthy and creative activities, foster community safety and promote environmental sustainability.



It is the intent of this Municipal Public Health and Wellbeing Plan for 2013–2017 to respond to the four pillars within a health and wellbeing context by enhancing health and wellbeing and the quality of life for Colac Otway communities. Figure 1 shows the connection between this Plan and the four pillar of the Council Plan.

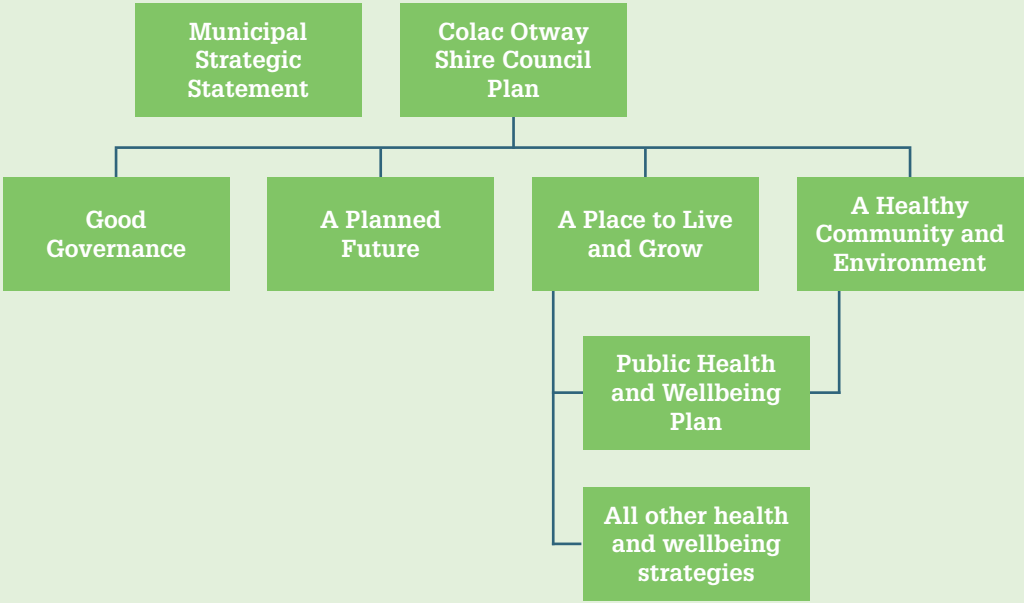


Figure 1: Council Plan structure where this Public Health and Wellbeing Plan and associated pillars of the Council Plan are linked

# Guiding Principles AND APPROACH

## Public Health Analysis and Planning

Some key points to note about the current approach to public health and wellbeing analysis and planning are:

- Leadership in public health thinking emphasises that it is complex, it is ongoing, and it is costly to undertake what is required, yet it is more costly to not act.
- Defining the intervention or action appears to be increasingly based on assumptions about population equity and the impacts of health inequalities on equity.
- Equality, across and for all, of a population is a core value and dealing with inequities is a commitment that most countries adhere to and acknowledge the direct relationship of reducing inequalities to building healthier communities.
- Escalating costs of health care continue to drive change in health promotion and preventive health, as well as pursue ways to improve primary health care per se.

## Public Health and Wellbeing Planning Principles

The G21 Region Health and Wellbeing Plan steering group determined that a set of guiding principles was required and has agreed on the following to underpin the proposed framework. They are:

### Create the vision

Set a vision with the community that relates health and wellbeing to broader economic, social, physical and environmental goals and future prospects.

### Address fundamental inequities

Population-based social or health inequities and reduce illness.

### Deal with complexities

Imperative to respond to the impact of complex problems by using systems approach.

### Reorient leaders

Develop leadership and governance that can rise to challenges of collaborative change.

### Actively engage

Build collaboration through informed public involvement in decision-making and shared responsibility.

### Map and measure

Build knowledge to influence resource challenges with clear planning, review and outcomes based evaluation.

A review of many public health and wellbeing planning frameworks identified supported these key planning principles and are summarised as:

- The adoption of a whole of systems approach embedding plans across the broader municipal policy landscape;
- Collaborative planning with broad community consultation;
- Acknowledging and encouraging cross sectoral action;
- Supporting local government to facilitate and enable from a position of strong participatory leadership; and
- Data driven decision making to ensure latest intelligence informs decisions.





## Best Practice Principles

Although the best practice principles identified by the Grattan Institute for contemporary and sustainable planning focussed on city and urban planning and are somewhat generic in nature, they can provide a strong, clear set of core principles of which to be mindful in developing a specific population based planning framework for health and wellbeing such as planned for G21. The principles outlined are that:

- Residents must be involved in decisions.
- Usually a trigger emerges to give impetus for will to have sustained change/improvement.
- Collaboration must be across government, business, community and civic organisations – building alliances.
- Changing governance structures does not, of itself, result in success.
- Long-term consistency in the strategic direction must survive political cycles and leadership.

Regional collaboration is essential for effective decision making on reforms.

## Colac Otway Principles

Principles adopted by Council for its Access Equity and Inclusion Plan 2010–2013:

- All people will be respected and have the same rights to participate fully in community life.

- All people will be treated with dignity and supported to make their own choices.
- All people will be valued and not discriminated against in any way.
- New residents will be welcomed into the community and given appropriate support.
- Difference and diversity in the community will be embraced and celebrated.
- Colac Otway Council will lead the way and set an example for the rest of the community by being responsive, fair and inclusive in all its practices.

### Statements of principles from the Council Plan 2013-2017 that can guide this Plan include:

- We care about and are responsive to the community, encourage democratic participation and involve people in decisions that affect them. We strive for excellence in financial management and council services, and always look for better ways to do things.
- Colac Otway is a community where people feel cared for and supported; where buildings and spaces facilitate creativity, social activity and enrichment of life, and people have access to gain the skills and education needed to reach their potential.
- Colac Otway Shire actively connects and includes people of all ages and backgrounds and promotes a healthy and vibrant community life in a clean, safe and sustainable environment.

# G21 Public Health and Wellbeing

## PLANNING FRAMEWORK



**The aim of the G21 Region Public Health and Wellbeing Planning Framework is to provide a planning framework that:**

- facilitates a collaborative effort to municipal public health and wellbeing planning for the communities in the G21 region;
- enables a regional strategy to address identified priorities;
- aligns local action plans to govern municipal level priorities and interventions; and
- develops evidence-based knowledge through planning, implementation, monitoring and evaluation processes in both regional and local settings.

**Listed below are common drivers which research has shown to be critical for an effective and sustainable framework:**

- Adopt a systems approach and embed it in evidence-led decision making.
- Shift the mental (conceptual) model to collaborative planning processes, not unilateral consultation.
- Develop and sustain participatory processes that involve key stakeholders in all phases.
- Acknowledge the need for cross-sectoral action and shared measures.
- Redesign the role of local government to be more of a facilitator/enabler, and stronger leader rather than independent decision maker.
- Establish data driven knowledge to inform decisions, and deliver transparency and accountability in performance.

## Systems Thinking and Approach

If we know through evidence that a health and wellbeing issue exists, let's say obesity, we know that research around obesity shows it to be a contributing factor to a number of other health complications including Type2 Diabetes, heart attack and dementia. We also know the contributing factors that can lead to obesity. These include poor nutrition, overeating and lack of physical activity.

Each of these factors is important to understand but only contribute to a small part of what makes us who we are and our health and wellbeing status.

The elements that support us to be healthy and well are found all around us. They are found in all parts of our natural, built, economic and social environments. They include loved one's who are family and friends, workplace employees and colleagues, educators, health practitioners and coaches to name a few. Built and natural environments provide opportunities to support health and wellbeing whether they are for physical activity, and emotional uplifting and connection with others as long as they are safe, welcoming and accessible.

To consider any of these settings, connections and supports in isolation fails to provide a whole picture. As a community, and a Council working with our community, we have the capacity to influence better health and wellbeing opportunities, reduce or overcome barriers and support initiatives that enhance health and wellbeing outcomes.

As part of planning for health and wellbeing we need to consider a framework or key enablers that support our goals. These include governance and leadership, information systems, financing and resource allocation, partnerships and workforce development. These will be described in more detail later in this document.

### Consultation Process

The consultation process to develop this Plan has involved a number of approaches to gain a clear understanding of health and wellbeing within our communities and stakeholders.

Firstly, we needed to recognise the local understanding and knowledge of people within the Colac Otway Shire, local health agencies, organisations, networks and alliances. These are people who on a daily basis meet with, support, provide interventions, counsel and serve the local communities. Health and wellbeing issues and needs are regularly discussed amongst these people. It is through these ongoing discussions that the local context is well understood.

Importantly, there are a number of State Government agencies representatives that attend these meetings and networks which provides them with clarity on health and wellbeing within Colac Otway. In most cases these agencies provide funding to local health and wellbeing initiatives and services. Working in this relationship contributes to developing focussed place based strategies.

Workshops have been held with Councillors and the Executive Management Team to develop a level of understanding and an opportunity for discussion prior to this Plan being released in draft form into our communities. Consultation to develop the draft Council Plan has provided a significant level of context to this Plan.

There have been workshops with local and regional stakeholders to help prioritise health and wellbeing issues within our communities. These have been documented in the *S. Allender, Deakin University G21 Priority Consultations Summary – An overview of G21 public health and wellbeing proprieties in the current and future settings-using systems perspectives and insights, May 2013.*

Validation sessions were conducted with local stakeholders to ensure that the draft plan was understood and accurate.



## Colac Otway Workshop

On 21 March 2013 a workshop was conducted with 32 participants from the community and local agencies that provide health and wellbeing services and support. Through a process of considering a number of local health and wellbeing issues the following three were seen as the key priorities.

Participants were asked to consider the current issues and practices for each priority and then to consider the ideal future approach to enhance these priorities to provide better services and outcomes.

### Priority 1 – Mental Health/Connectedness

#### Current:

- Participants described the current mental health connectedness situation as focussed on the adult mental health service system.
- Connections between the community and mental health were lacking, and where they existed, stigmatisation affected engagement with clients.
- Referral pathways were also unclear.
- Governance was perceived to be occurring across several bodies, with influence from government, private sectors, service providers and internal council planners. The only information source identified was state government health databases.
- Finance and resource allocations were focussed on Psychiatric Disability Rehabilitation and Support Services, DHS programs across adult/adolescent and children's services with some funds through the Beyond Blue organisation.
- Neighbourhood houses were viewed as an important partner.

#### Future:

- Descriptions of future practice outlined a system that was accessible, de-stigmatised, had improved referral pathways and free for the community.
- Governance and leadership under this vision included schools, sporting clubs and other external organisations, local employers, GP's and other key health providers.
- Information systems should be expanded to include data on assessment and referral, in a unified database, which is up to date and accessible.
- Funding to achieve this model would be achieved through flexibility of state and federal government arrangements, philanthropic funding, private health providers and health insurance organisations.

## Priority 2 – Nutrition/Food Security

### Current:

- Food security and nutrition revolved around evidence that the community was not consuming enough fruit and vegetables, and that opportunities for healthy nutrition such as the community garden were being underutilised.
- Participants also noted that a high percentage (above state average) of residents within the area had experienced food insecurity in the last year.
- Governance was shared between managers within the Local Government Authority, as well as St Laurence Community Services, community stakeholders and other community services.
- Key sources of information were community consultations, needs assessments and G21/Australian Bureau of Statistics data.
- Finance and resources behind food security were broad and extensive, including community resources (such as food banks and community gardens), community organisations (such as general stores, food co-ops and St Laurence) as well as private organisations and transport.
- Workforce development programs included the Smiles for Miles program, as well as an achievements program.
- Equity issues for Colac included lack of transport, the cost of healthy foods and food knowledge and skill.
- The Infographic program and developing an ongoing needs assessment were raised as important avenues for engagement.

### Future:

- Participants described the future of nutrition and food security as featuring a reduction in food insecurity, increases in consumption of fruit, vegetables and water, improvements in oral health, nutrition knowledge and food skills, and healthy food affordability.
- Governance and leadership was described as community centric, with knowledge and capacity building embedded in school curriculums, council action plans and public health priorities. Information and data resources would be improved in terms of size and coverage of community needs and food resources available.
- Participants stated that more funds should be directed to prevention measures from public health organisations, and that the community kitchen model could be expanded to build food education and support community members in growing more healthy food.
- Workforce development should be expanded to areas beyond Council, through supporting organisations to develop nutrition policies, and provide educators to better inform the community. Participants proposed the formation of an Active Food Network to engage the community directly, and promote community ownership of food initiatives.





### Priority 3 – Healthy Behaviours

#### Current:

- The healthy behaviours strategies currently involve a range of programs including sports access and healthy ageing, as well as infrastructure development such as the Beechy Rail Trail and Gellibrand streetscape upgrade.
- Healthy behaviour programs are largely governed by initiatives within Council, but included a community led representative group.
- Information came from within Council through GIS data, and communities through consultation and interviews.
- Finance and resource allocations were through both state and federal government, grants, donations, and volunteered human resources.
- Council, community and the volunteer community ambassador program were all considered important partnerships integral to local workforce and supported by training and workshopping.

#### Future:

- Future practice revolves around the extension of and improved access to current programs and strategies.
- The Men's Shed program was a model for developing an equivalent for women, youth sports programs could be extended and the trail network could be both expanded with existing elements linked.
- Governance to be centralised into a body comprised of local and state government, local business, and recreation/leisure networks.
- Information could be sourced from project reports, trials, reports, and strategy documents, and asset management would feed information back into health behaviour efforts to inform resource allocations.
- Finance should be provided through all levels of government as well as clubs and associations. Businesses and volunteers could also contribute to resources to sustain funding at the local level.
- G21 was listed as a potential additional support.

## Online Survey Results across G21

An online survey was conducted to identify health and wellbeing priorities. The results from this survey are available in the G21 PHWB summary report of the 'Understanding Health & Wellbeing In your Community' survey 3 April – 20 May 2013.

The top three priorities from the survey have been grouped into the four environments for health – natural, social, built and economic and are provided in Table 1.

Table 1	Natural	Social	Built	Economic
<b>Priority 1</b>	Pollution and vegetation loss	Access to affordable and nutritious food	Access to public & community transport	Local employment opportunities
<b>Priority 2</b>	Access to parks, reserves and open spaces	Social isolation experienced by some residents	Pedestrian safety and wellbeing	Local education and training
<b>Priority 3</b>	Effective recycling in the community	Incidence of family violence	Access to affordable housing	Locally grown food

It is important to acknowledge that each of these health and wellbeing priorities within the G21 region are being addressed or will be addressed in Council strategies and activities. Priorities in the Natural Environment are being actioned through Council's Environment Strategy and the Public Open Space Strategy.

There are actions in this Public Health and Wellbeing Plan to address the Social Environment priorities. The proposed G21 Public Transport Strategy, Council's Commuter Footpath Strategies and the Council Plan either address or highlight the need to address priorities in the Built Environment.

Finally, the development of local Trade Training Centres and the Advancing County Towns project to develop a Green Industry Feasibility Plan - Local Produce Directory are exciting advancements that will complement the work being proposed in this Plan to develop a food strategy and action plan to address issues around nutrition and food security. This should reflect a local response to the recently released Nation Food Plan 2013.<sup>3</sup>

<sup>3</sup> Department of Agriculture, Fisheries and Forestry, 2013, National Food Plan, Our food future, Department of Agriculture, Fisheries and Forestry, Canberra. [daff.gov.au/nationalfoodplan](http://daff.gov.au/nationalfoodplan)

# Health and CLIMATE CHANGE

Climate change will alter global and local climates.



In Victoria, this means warmer average temperatures, more frequent and severe heatwaves, more very high fire danger days, reduced average and more variable rainfall, increased incidence and extent of drought, reduced snow cover, and sea level rise. Observed trends in Victoria's climate and estimates for Victoria's future climate are discussed in the Victorian Government's *Report on climate change and greenhouse gas emissions in Victoria (2012)*.<sup>4</sup>

The *Climate Change Act 2010* outlines local government's duty, as a decision maker and action implementer, is to have regard to climate change in any Act mentioned in its Schedule 1. This includes the preparation of a Municipal Public Health and Wellbeing Plan by a council under section 26 of the *Public Health and Wellbeing Act 2008*.

To better understand the local impacts of climate change Council is a lead member of the Climate Resilient Communities of the Barwon South West project. This is a joint collaboration between 10 local governments, the Victorian Department of Environment and Primary Industries and a range of statutory agency partners. The project aims to help communities throughout the Barwon South West region understand what risks or opportunities might be presented by future extreme weather events.<sup>5</sup>

This information will provide evidence based data to help Council and communities to better understand and consider how climate change may impact on various aspects of health and social activities, economic viability, infrastructure security and modification, public transport, water consumption and the natural environment.

Following these considerations we will be in a position to adapt to changing climatic conditions. Adaptation can take many different forms which include:

- education and training about climate change.
- planning emergency responses for more severe extreme weather events.
- revising planning standards for vulnerable areas.
- developing technical and scientific solutions, such as increasing thermal performance standards for buildings or modifying sports fields and open spaces to better cope with drought conditions.

Adaptation also involves actively managing our environment to improve the resilience of key natural resources like water catchments.

<sup>4</sup> [http://www.climatechange.vic.gov.au/\\_data/assets/pdf\\_file/0005/136490/DSE\\_Greenhouse-Report\\_online.pdf](http://www.climatechange.vic.gov.au/_data/assets/pdf_file/0005/136490/DSE_Greenhouse-Report_online.pdf)

<sup>5</sup> Climate Resilient Communities of the Barwon South West, Fact Sheet 1



## Supporting Documents

- The *Liveable and Just Toolkit* developed for the Victorian Local Governance Association provides an integrated approach to considering the social and equity impacts of climate change adaptation. Elements of the International Council for Local Environmental Initiatives *Local Government Climate Change Adaptation Toolkit* may also be useful in supporting integration of climate change activities across local government.
- *Healthy by design*, a resource developed by the Heart Foundation to incorporate health and wellbeing considerations into urban planning also contains integrated planning principles.
- A document to support councils to better understand and cope with extreme weather events is the Victorian Department of Health Municipal public health and wellbeing planning – having regard to climate change, 2012. Available at: <http://docs.health.vic.gov.au/docs/doc/Municipal-public-health-and-wellbeing-planning-having-regard-to-climate-change>



**COLAC OTWAY SHIRE  
MUNICIPAL  
PUBLIC HEALTH  
AND WELLBEING  
PLAN 2013-17**

Priorities



## Priority EMBED KEY HEALTH AND WELLBEING ENABLERS

It is apparent from previous health and wellbeing plans that have been developed by Council that the evidence collected and the strategies determined were appropriate at the time.

What was missing was enabling strategies to ensure that capacity, partnerships and resources were available to achieve the actions within these plans.

A fundamental component of this plan will be to identify the key enablers which support better health and wellbeing outcomes. This Plan will consider five key enablers which provide the building blocks to support actions in this Plan.

An example of how this could be developed is by considering nutrition and food security as a case example proposal within each of the enabling building blocks.

### Governance and leadership

*Governance and leadership involves ensuring strategic policy frameworks exist and are combined with effective oversight, coalition building, the provision of appropriate regulations and incentives, attention to system-design, and accountability. Leadership involves highest levels or representation in an organisation and across any governance structures.*

The inclusion of health and wellbeing planning principles in the way Council operates across all of its services, responsibilities and functions is important to ensure that actions within this Plan and other strategic policy frameworks are equally understood and considered.

An example of how this can be implemented is to include in the template for Council Meeting reports a heading for *social or societal impact*. An understanding of what impact a report has on individuals, cultures and communities is important when aligning Council's reporting processes to its vision of **'A sustainable community with a vibrant future'**.

Over the previous two public health and wellbeing plans there has been an action to create a health and wellbeing alliance. This, in effect, was delivered in 2011 with the development of a Towards Liveable Communities Coordination Committee (TLC3) and the active participation of member organisations with the formation of a health and wellbeing group.

Over a period of time it has become evident that this group needs to consider the whole of the municipal district and form an alliance as partners that reflect the goals of the public health and wellbeing plan of Council and similar activities within each of the other organisations. The Department of Health supports this proposal as a way to improve outcomes, share resources and partner to deliver common strategies. This joined up approach will lead to implementing the best strategic approaches across a number of organisations to provide holistic and sustainable health and wellbeing promotion, prevention and protection programs for our communities and individuals.



### Case Example

Council, Colac Area Health, Otway Health and Community Services, St. Laurence and the Department of Planning and Community Development have developed a joined up approach to plan for and develop a number initiatives to improve nutrition and food security within Colac Otway.



### Information systems (evidence focus)

*A well-functioning health information system is one that ensures the production, analysis, dissemination and use of reliable and timely information on health determinants, health system performance and health status. There is demonstrated uptake of evidence in decision making at policy, strategy, program, intervention and activity levels.*

This requires local evidence based data to be documented and analysed collectively by organisations that deliver health and wellbeing services. Planning based on findings and analysis as an alliance will reduce duplication, eliminate gaps and lead to a focus on priorities specific to our communities.

This proposal is supported through research conducted by the G21 Region Alliance (G21) on the needs of local health service providers which highlighted the need for accurate data to make the best decisions.

### Case Example

Colac Area Health and Otway Health and Community Services, with support from Council, have undertaken 18 months of research to identify local nutrition and food security needs. This has been presented to a range of stakeholders in a forum for consideration and direction.



### Financing and resource allocation

*A system that, based on data, priorities and evidence-based interventions, allocates funds for health and wellbeing related services and programs, as well as analyses how other resource allocations impact either positively or negatively on desired health and wellbeing outcomes.*

Allocation of Council resources for health and wellbeing initiatives is controlled by the strength of the business case presented, the strength of other business cases within Council, and the resources available to support them. To improve the likelihood of receiving the resources required compelling evidence is required. This evidence is also important when looking beyond Council as a fund provider.

A cumulative case presented to the G21 by councils within G21 on a specific health and wellbeing proposal is more likely to be supported by G21 directly or through a G21 regional submission made to other governments for funding. It is important that within G21 there are many health services, community services and companies that are interest in and support well researched health and wellbeing needs and initiatives. Financing and resources by G21 members contribute to committees, joined up contributions, forums and can provide the leverage required for external funds becoming available.

Local partnerships within Colac Otway ensure that each member of the health and wellbeing alliance can bring a set of skills, experience and knowledge that will lead to a more overall understanding of what is required; access to a broad range of settings; and a greater capacity and resources to achieve positive focussed outcomes.

### Case Example

Personnel and financial resources from Colac Area Health, Otway Health and Community Services, St. Laurence and Council have been combined to develop a plan and seek funding to support initiatives to increase eating nutritious food and providing food to people in need. Funding from state government to build a local foodshare facility in Colac is an example of what can be achieved.

## Workforce development

*Establishing capacity to develop and sustain a more integrated practice to health and wellbeing planning as described, requiring an inter-professional approach with planners to contribute to the regional preventive health workforce.*

In the development of the G21 Region Health and Wellbeing Plan, which includes Council's health and wellbeing plan, a set of online training tools will be available on the G21 website to support the development of the local workforce to improve their understanding of health and wellbeing issues and how best to promote and protect health, and prevent illness. In the Barwon South West Region of Victoria the Department of Health and regional training providers have been working on a strategy to provide further education to support the health and wellbeing workforce to best meet future needs around health promotion, treatment and care.

### Case Example

Through research, data collection and conversations within a number of settings the need to increase an understanding of the importance of food security for all people in the Colac Otway region is being developed. This will include courses for Council and health services staff, not just in the health environment but also the built, natural and economic environments.

## Partnerships

*Health and wellbeing interventions are primarily delivered through collaborative relationships and formal arrangements that demonstrate a cross sectoral and integrated approach across the four environments for health.*

It is recognised that the proposed local health and wellbeing alliance is predominantly from the social, community and health sectors. It is fundamental that this alliance engages with Council's economic, infrastructure and environmental programs. It is equally important that the alliance engages with other levels of government, local organisations, businesses and the community through community development action models to achieve the best outcomes.

### Case Example

Colac Area Health, Otway Health and Community Services and Council have worked together to gather local data, research needs, make presentations and convene forums to forward the goal of all people having access to nutritious and affordable food.

## Community capacity

*An engaged, inclusive approach to building community understanding of the inter-related issues, needs and experiences and the current or desired assets needed in the community to improve health and wellbeing outcomes for everyone. This includes community plans, public engagement policy and transparency in decision making.*

An important part of this Plan recognises the need to increase community engagement and inclusion. This mirrors the Council Plan to involve people in decisions that affect them, and to support and enable quality of life across people of all ages, backgrounds and cultures.

### Case Example

This Health and Wellbeing Plan recognises the need for all people to have access to nutritious, affordable and secure food. The work conducted to understand this need and put in place strategies and actions to support food security is highlighted in this Plan under the Nutrition and Food Security.

**Goal:** Council has a systems approach that enables and enhances health and wellbeing outcomes for whole of community

**Council Theme** Pillar 1: Good Governance means we care about and are responsive to the community, encourage democratic participation and involve people in decisions that affect them. We strive for excellence in financial management and council services, and always look for better ways to do things.

Objective	Actions	Partners	Indicators	Timelines
<b>Undertake planning and implement practices that promote positive health and wellbeing outcomes for whole of community</b>	Identify strategic, planning and processes of Council that have an impact on health and wellbeing and recommend how health and wellbeing considerations can be embedded into them	<ul style="list-style-type: none"> <li>Council</li> <li>Councillors</li> <li>Executive</li> <li>Managers</li> </ul>	Prepare a report that is accepted by Council's Executive Management Team	June 2014
	Develop a partnership of health and wellbeing providers	<ul style="list-style-type: none"> <li>Council*</li> <li>Health Services</li> <li>Medicare Locals</li> <li>Community Services</li> <li>State Government</li> </ul>	Form an alliance of key health and wellbeing partners that will plan for and oversee health and wellbeing promotion, prevention and protection initiatives	March 2014
	Enhance our workforces understanding of health and wellbeing issues, initiatives, and targets	<ul style="list-style-type: none"> <li>Council</li> </ul>	Level of participation in workforce development training	October 2015
	The health and wellbeing of our communities is considered in all Council reports	<ul style="list-style-type: none"> <li>Council</li> </ul>	An explanation sheet is developed to support an understanding of health and wellbeing issues within Council's workforce	December 2013
			The template used for Council reports will include the need to consider health and wellbeing impacts of a proposal	February 2014

\* Denotes lead partner



## Priority PLAN FOR AN AGEING POPULATION

Our Council Plan has identified that the growing ageing population, will present challenges to future planning for community care services, arts and culture, open space facilities and events, infrastructure to ensure accessibility and associated pressures that will increase needs for access to:

- an age-friendly built environment.
- appropriate housing.
- health services, especially outlying areas.
- transport opportunities throughout the shire.
- internet throughout the shire.
- community events throughout the shire.

An ageing population also has workforce implications, with a potential mass exodus of 'baby boomers' related to retirement and the consequent loss of talent and experience.

### Evidence

Current data shows that Colac Otway Shire's population over 70 years of age is 12.6% of the total population. This is over 28% greater than the Victorian average of 9.8%. Our ageing profile as indicated by *.id, the population experts* shows the age group which is forecast to have the largest proportional increase (relative to its population size) by 2021 is 70-74 year olds, who are forecast to increase by 53.3% to 1,242 persons.

The percentage of persons aged 75+ who live alone is 41.6% compared to the Victorian measure of 35.9%. Of these people 76.4% are female.<sup>6</sup>

The percentage of persons aged 70+ who receive Home and Community Care (HACC) services is 34% of the target population of persons over 70. This is significantly higher than the Victorian measure of 20%.<sup>7</sup>

Aged care places for low care within the eligible population, is 6.2% compared to the Victorian average of 4.6%. High care aged care places are similar to the Victorian average.<sup>8</sup>

### Supporting Documents

- **COS Positive Ageing Strategy 2008 – 2012** considers the various aspects of ageing and summarises them in 6 strategies of the age to be valued, involved, productive, active, consumer wise and cared for.
- **Department of Health and Ageing** – through its *Live Longer Live Better* program creates a flexible and seamless system that provides older Australians with more choice, control and easier access to a full range of services, where they want it and when they need it.

<sup>6</sup> Government of Victoria, Department of Health, 2012, Modelling, GIS and Planning Products Unit: Colac Otway Shire Profile.

<sup>7</sup> Government of Victoria, Department of Health, 2012, Modelling, GIS and Planning Products Unit: Colac Otway Shire Profile.

<sup>8</sup> Government of Victoria, Department of Health, 2012, Modelling, GIS and Planning Products Unit: Colac Otway Shire Profile.



## Goal: An enhanced quality of life for older people

**Council Theme** Pillar 4: Healthy Community and Environment actively connects and includes people of all ages and backgrounds and promotes a healthy and vibrant community life in a clean, safe and sustainable environment.

Objectives	Actions	Partners	Indicators	Timelines
<b>Increase the level of participation by older people in decision making around their needs</b>	Develop a process to include older people in decision making that can enhance their quality of life and inform Council's future plans	<ul style="list-style-type: none"> <li>• Council*</li> <li>• Older people</li> </ul>	Form a steering group of older people to inform of the needs of older people and have input into Council's preparation of strategies and planning for infrastructure	June 2014
	Include older people in determining and organising activities during Seniors Week 2013 and beyond	<ul style="list-style-type: none"> <li>• Council*</li> <li>• ILOP Ambassadors</li> </ul>	Ambassadors from the Improving Liveability for Older People (ILOP) take a lead role in Senior Week for 2013 and beyond	October 2013 to October 2017
<b>Plan for improving the quality of life for older people</b>	Identify the needs and aspirations of older people through conversations, surveys and forums to inform future strategies around our ageing population	<ul style="list-style-type: none"> <li>• Council*</li> <li>• Health Services</li> <li>• Community Services</li> <li>• Older People</li> </ul>	Complete and document findings from the conversations, surveys and forums.	June 2014
			Complete a Positive Ageing Strategy	December 2014
<b>Support and enhance quality of life for older people</b>	Implement the <b>Living Better Living Longer</b> and the <b>Active Service Model</b> programs to improve the quality of life of older people receiving services and support from Council	<ul style="list-style-type: none"> <li>• Council</li> </ul>	Introduce supports for service users that can: <ul style="list-style-type: none"> <li>• Increase their level of physical activity</li> <li>• Promote their mental health</li> <li>• Increase their food security</li> <li>• Promote their connectedness within their communities</li> </ul>	June 2017

\* Denotes lead partner



## Priority REDUCE SIGNIFICANT LEVELS OF DISADVANTAGE IN EARLY YEARS

Our Council Plan has identified the need to address disadvantage in early years.



### Evidence

#### Whole of Community Disadvantage Indicators

Colac Otway Shire's Socio-Economic Indexes for Areas (SEIFA) measures the relative level of socio-economic disadvantage based on a range of Census characteristics. It is a good place to start to get a general view of the relative level of disadvantage in one area compared to others and is used to advocate for an area based on its level of disadvantage.<sup>9</sup>

The index is derived from attributes that reflect disadvantage such as low income, low educational attainment, high unemployment, and jobs in relatively unskilled occupations. A higher score on the index means a lower level of disadvantage. A lower score on the index means a higher level of disadvantage.

The Colac Otway SEIFA score is 965. It breaks down the small areas within Colac Otway and shows the four areas that make up Colac as having the lowest scores with Elliminyt as the highest. The Victorian average SEIFA is 1010.<sup>10</sup>

#### Early Years Vulnerability Indicators

The most recent Australian Early Years Development Index (AEDI) for 2012<sup>11</sup> shows that 5 year old children commencing primary schools in Colac and Apollo Bay are more vulnerable than children in most areas of Victoria. Overall there are 22.4% of children developmentally vulnerable on one or more domains of the AEDI and 12.7% are developmentally vulnerable on two or more domains.

The highest school qualification of both parents is less than Year 12 or equivalent in 32.5 per cent of couple families with children aged 0 to 8 years in Colac-Otway south. This is greater than the percentage of couple families with children in this age group in Victoria (21.2 per cent).<sup>12</sup>

### Supporting Documents

- **Department of Education and Early Childhood Development (DEECD), 2013. The state of Victoria's children report 2011 – A report on how children and young people in rural and regional Victoria are faring'** – identifies discrepancies between rural/regional Victoria and metropolitan areas.
- **COS Early Years Plan 2010 – 2014** – identified a number of local actions to support early childhood development.
- **Department of Education, Employment and Workplace Relations, National Quality Framework for Early Childhood Education** – provides for the Early Years Learning Framework for early childhood education and care and is a key component of the Australian Government's National Quality Framework for early childhood education and care.

<sup>9</sup> Source: Australian Bureau of Statistics, Census of Population and Housing 2011. Compiled and presented in profile.id by .id, the population experts.

<sup>10</sup> Sources: Australian Bureau of Statistics, Census of Population and Housing 2011. Compiled and presented in profile.id by .id, the population experts, accessed 8 July 2013.

<sup>11</sup> Source: Department of Education Employment Workplace Relations School Census 2012.

<sup>12</sup> Department of Education and Early Childhood Development, 2010, Early Childhood Community Profile, Colac Otway Shire

## Goal: All Colac Otway children will have the best start in life to achieve optimum health and wellbeing

**Council Theme** Pillar 3: A Place to Live and Grow is a community where people feel cared for and supported; where buildings and spaces facilitate creativity, social activity and enrichment of life, and people have access to gain the skills and education needed to reach their potential.

Objective	Actions	Partners	Indicators	Timelines
<b>Decrease the level of disadvantage and vulnerability of children in their early years</b>	Identify the best way to inform Council on how to reduce vulnerability of children before they enter their first year of school	<ul style="list-style-type: none"> <li>• Council</li> <li>• DEECD</li> </ul>	Documented findings and recommendations from an internal review of the 2012 AEDI results and other data	March 2014
	Prepare a report and recommendations from the recently conducted Maternal & Child Health survey to support improvements within the service	<ul style="list-style-type: none"> <li>• Council</li> <li>• DEECD</li> </ul>	A report and its recommendations are provided to Council	March 2014
	Use the ‘Towards 2016 – Colac Otway Kindergarten Facilities’ and ‘Colac Otway Early Years Facilities Report’ as the basis for assessing future early years facilities needs	<ul style="list-style-type: none"> <li>• Council*</li> <li>• Glastonbury</li> <li>• DEED</li> <li>• CAH</li> </ul>	A future facilities report is prepared and presented to Council	March 2014
	Continually improve early years services	<ul style="list-style-type: none"> <li>• Council</li> </ul>	Document the implemented service improvements	October 2015
	Through the Colac Advancing Country Towns (ACT) Project: <ul style="list-style-type: none"> <li>• map early years services to develop an integrated service model; and</li> <li>• address key AEDI issues from the most recent data for Colac</li> </ul>	<ul style="list-style-type: none"> <li>• Glastonbury*</li> <li>• Council</li> <li>• CAH</li> <li>• Early Years service providers</li> <li>• Schools</li> <li>• DEECD</li> <li>• RDV</li> </ul>	Key Performance Indicators of the ACT project area delivered	June 2015
	Identify and document a plan to promote early years development within children from 0 – 8 years	<ul style="list-style-type: none"> <li>• Council*</li> <li>• DEECD</li> <li>• CAH</li> <li>• Health Services</li> <li>• Community Services</li> </ul>	Complete an Early Years Plan	December 2014
	Continue to support partnerships within the Kids Early Years Services (KEYS) networks	<ul style="list-style-type: none"> <li>• Council</li> <li>• CAH</li> <li>• Early Years service providers</li> <li>• Schools</li> <li>• DEECD</li> </ul>	Council continues its lead role in the continuation of the Early Years networks in Colac Otway	Ongoing

\* Denotes lead partner



## Priority INCREASE LEVELS OF PHYSICAL ACTIVITY



### Physical inactivity is a significant risk factor for poor health in Victoria.

Physical inactivity is associated with an increased risk to ill health and death, and has been significantly linked to increased rates of overweight, obesity, cardiovascular disease (CVD), some cancers and depression. While physical activity can benefit everyone, certain groups are less likely to participate: women, Indigenous Australians, or people that are older, were born overseas, have a lower socioeconomic status or have a disability.<sup>13</sup>

Local Governments can make it easier for people to be physically active by addressing the way that the built environment and public realm is designed. Planning for a healthy built environment puts the needs of people and communities at the heart of council decisions regarding spaces in which people live, work and play.<sup>14</sup>

The seven best investments to increase physical activity<sup>15</sup> are:

1. Whole of school programs.
2. Transport policies and systems that prioritise walking, cycling and public transport.
3. Urban design for equitable and safe access for recreational physical activity and recreational and transport-related walking and cycling across the life course.
4. Physical activity integrated into primary health care systems.
5. Public education to raise awareness and change social norms of physical activity.
6. Community-wide programs involving multiple settings and sectors.
7. Sports systems and programs that promote 'sport for all' across the lifespan.

### Evidence

People described as sedentary in Colac Otway, which is little or no physical activity each week, is well below the Victorian average. The number of people with a sufficient level of physical activity (greater than 150 minutes in five or more sessions each week) is the lowest within the G21, at 65.6% for adults.<sup>16</sup>

Of the adults who do not meet these physical activity guidelines females account for 60% more than males.<sup>17</sup> The percentage of population in Colac Otway near to public transport is 41.2% which is well below the Victorian average of 74.3%.<sup>18</sup>

### Supporting Documents

- **Victorian Public Health and Wellbeing Plan 2011–2015** – Identifies 'physical activity' as a priority to 'keep people well'.
- **VicHealth** – Increasing participation in physical activity is a key priority area.
- **G21 Region Health and Wellbeing Plan 2013–2017** – has identified Physical Activity as a regional health and wellbeing priority.

<sup>13</sup> VicHealth's Participation in physical activity: Research summary at [www.vichealth.vic.gov.au/Publications/Physical-Activity/Sport-and-recreation/Participation-in-physical-activity](http://www.vichealth.vic.gov.au/Publications/Physical-Activity/Sport-and-recreation/Participation-in-physical-activity)

<sup>14</sup> Heart Foundation. Creating heart healthy communities: Working with local government. Accessed 24 June 2013 [www.heartfoundation.org.au/SiteCollectionDocuments/HF-Creating-Communities.pdf](http://www.heartfoundation.org.au/SiteCollectionDocuments/HF-Creating-Communities.pdf)

<sup>15</sup> The British Journal of Sports Medicine. (2012) Investments that Work for Physical Activity. British Journal of Sports Medicine, Volume 46, Issue 10, pages 709-712

<sup>16</sup> Department of Health, July 2013, Victorian Population Health Survey 2011-2012, selected preliminary survey findings, pages 25-30.

<sup>17</sup> Government of Victoria, Department of Health, 2012, Modelling, GIS and Planning Products Unit: Colac Otway Shire Profile.

<sup>18</sup> Government of Victoria, Department of Health, 2012, Modelling, GIS and Planning Products Unit: Colac Otway Shire Profile.

## Goal: To increase health and wellbeing outcomes in the Colac Otway Shire through increases in physical activity

**Council Theme** Pillar 4: Healthy Community and Environment actively connects and includes people of all ages and backgrounds and promotes a healthy and vibrant community life in a clean, safe and sustainable environment.

Objectives	Actions	Partners	Indicators	Timelines
<b>Create a physically and socially supportive environment for walking and cycling</b>	Implement the Active Transport Strategy recommendations	<ul style="list-style-type: none"> <li>• Council</li> <li>• OHCS</li> </ul>	Infrastructural, behavioural, policy promotional and leadership actions are delivered according to the Implementation Plan	October 2017
<b>Support whole of school programs to increase physical activity</b>	Support schools across the shire to sign up and implement the Achievements Program	<ul style="list-style-type: none"> <li>• CAH*</li> <li>• Council</li> </ul>	No. of new schools signed up and implementing the physical activity component of the Achievements Program	October 2017
<b>Provide supportive policies, environments and services to encourage a more active lifestyle</b>	Promote active service opportunities for older people within Council's Older Person's and Ability Support Service (OPASS)	<ul style="list-style-type: none"> <li>• Council</li> <li>• Health Services</li> <li>• Community Services</li> </ul>	An Active Service Plan is developed for each person receiving services	October 2017
	Implement the Open Space Strategy	<ul style="list-style-type: none"> <li>• Council</li> </ul>	Develop an implementation plan and complete within timelines	October 2017
	Develop a regional strategy that will promote and increase physical activity rates	<ul style="list-style-type: none"> <li>• Council</li> <li>• COGG</li> <li>• G21</li> </ul>	Finalise and implement the Physical Activity Strategy to guide the G21 Region Alliance and Colac Otway Shire long term	October 2017
	Provide opportunities for people of all abilities to participate in physical activities	<ul style="list-style-type: none"> <li>• Council</li> <li>• Disability support services</li> <li>• Sporting groups</li> </ul>	Conduct a 'Try-athlon' for people of all abilities	December 2013
	Develop a region wide strategy to support our communities public transport needs	<ul style="list-style-type: none"> <li>• Council</li> <li>• G21 Councils</li> <li>• DTPLI</li> <li>• Service Users</li> </ul>	G21 Public Transport Strategy is implemented according to recommendations and timeframes	Ongoing

\* Denotes lead partner



## Priority PROTECTION THROUGH PUBLIC AND ENVIRONMENTAL HEALTH

### Public Health

Public Health refers to all organised measures (whether public or private) to prevent disease, promote health, and prolong life among the population as a whole.<sup>19</sup>

### Environmental Health

Environmental Health addresses all the physical, chemical, and biological factors external to a person, and all the related factors impacting behaviours. It encompasses the assessment and control of those environmental factors that can potentially affect health. It is targeted towards preventing disease and creating health-supportive environments.<sup>20</sup>

Local government Environmental Health Officers are highly effective change agents who protect and enhance the health of the community through the use of statutory regulation, applied risk management and education. Their work encompasses a broad range of responsibilities, including food safety, disease control, emergency management, wastewater control in unsewered areas, environmental protection and sustainability, community safety and amenity, emergency management and tobacco laws.

### Evidence

The current rate of *Campylobacter* Infection (causes food poisoning) within Colac Otway is 135.8/100,000 which is similar to the Barwon South West region but well above the Victorian rate of 102/100,000.<sup>21</sup>

The percentage of children fully immunised at 24 – 27 months of age is 98.1%, which is the sixth highest rate in Victoria.<sup>22</sup> However, the immunisation rate in Colac Otway for secondary school year 10 for dTpa, the triple antigen vaccine to protect against 3 diseases - Diphtheria, Tetanus and Pertussis (or whooping cough), is only 73%. The rate for year 7 Varicella (chickenpox) is 78% and the rate for year 7 Hepatitis B is 83%.<sup>23</sup> These rates are of concern as they do not reach an acceptable level of 95% which is identified as the rate to create what is known as 'herd immunity'.

### Supporting Documents

- **Municipal Public Health Emergency Management Sub Plan Guidelines, Version 2, 2012** – Provides the latest set of instructions to develop a locally based Public Health Emergency Management document.
- **Public Health and Wellbeing Act 2008** – requires the appointment of at least one environmental health officer.
- **Victorian Public Health and Wellbeing Plan 2011–2015** – recognises the work required in environmental health and identifies the most challenging up-and-coming preventable environmental health issues.

<sup>19</sup> World Health Organisation, 2013

<sup>20</sup> World Health Organisation, 2013

<sup>21</sup> Department of Health, Communicable Disease Epidemiology and Surveillance – Health Protection Branch 07-June-2013

<sup>22</sup> Government of Victoria, Department of Health, 2012, Modelling, GIS and Planning Products Unit: Colac Otway Shire Profile.

<sup>23</sup> Department of Health Update, 2013, Regional Immunisation Initiatives, Barwon South West Region.

**Goal:** Prevent disease, promote health and prolong life through public and environmental health practices.

**Council Theme** Pillar 3: A Place to Live and Grow is a community where people feel cared for and supported; where buildings and spaces facilitate creativity, social activity and enrichment of life, and people have access to gain the skills and education needed to reach their potential.

Objectives	Actions	Partners	Indicators	Timelines
<b>Provide for protective health services and healthy environments</b>	Ensure that food providers prepare, cook, store and serve food safely	<ul style="list-style-type: none"> <li>• Council</li> <li>• Department of Health (DH)</li> <li>• Food proprietors</li> </ul>	<ul style="list-style-type: none"> <li>• Number of food premises inspected annually</li> <li>• Incidence of enteric diseases</li> </ul>	Ongoing
	Reduce health impacts of heatwaves on vulnerable communities	<ul style="list-style-type: none"> <li>• Council</li> <li>• DH</li> <li>• Department of Human Services (DHS)</li> <li>• Health services</li> </ul>	<ul style="list-style-type: none"> <li>• Review and update our heatwave plan annually</li> </ul>	Ongoing
<b>Increase immunisation rates to provide community immunity against communicable diseases</b>	Increase the immunisation rates of adolescents in the Secondary School System through the Regional Immunisation Initiative in the Barwon South West Region	<ul style="list-style-type: none"> <li>• Council</li> <li>• DH</li> <li>• Medicare Locals</li> <li>• GP's</li> <li>• Secondary Schools</li> </ul>	<ul style="list-style-type: none"> <li>• Develop and commence implementing the local initiative</li> </ul>	June 2014
			<ul style="list-style-type: none"> <li>• Increase the rate of secondary school Immunisations closer to 95%</li> </ul>	October 2017
<b>Provide public health incident and emergency response</b>	Update the local incident and emergency response plan to meet current guidelines	<ul style="list-style-type: none"> <li>• Council</li> <li>• Neighbouring Councils</li> <li>• DH</li> <li>• DHS</li> </ul>	The plan is prepared and recognises Council's Municipal Emergency Management Plan	June 2014



## Priority SUPPORT HEALTHY EATING AND FOOD SECURITY

Food Security is defined as the *‘the state in which all persons obtain nutritionally adequate, culturally acceptable, safe foods regularly through non-emergency sources.’*<sup>24</sup>

A food secure community allows residents to have access to healthy nutritious food and limits the risks of chronic conditions such as Type 2 Diabetes, Obesity and Cardiovascular diseases.

Council can play an important role in supporting healthy eating by helping residents to access healthy food and developing long lasting strategies to tackle food insecurity and low fruit and vegetable consumption.



### Evidence

Research of existing evidence and data found 8.2% of the Colac Otway Shire has experienced food insecurity, compared to 3.2% for the Barwon South West Region and 6.0% for Victoria.<sup>25</sup>

The proportion of adults in Colac Otway Shire who met both daily fruit and vegetable dietary guidelines (2003) was 4.2%, compared to the Victorian Average of 5.2%.<sup>26</sup>

It has been estimated that inadequate fruit and vegetable intake is responsible for 30% of coronary heart disease, 20% gastrointestinal cancer and 14% of stroke.<sup>27</sup>

19.8% of the adults in Colac Otway Shire drink soft drink every day. This is the second highest rate in Victoria, the Victorian average is 12.4%.<sup>28</sup>

In Colac Otway 47.1% of adult males and 42.2% of adult females are classified as overweight or obese.<sup>29</sup>

84% of food available to Colac Otway Shire Residents is in the form of take away, restaurants and cafes, this compares to 8% of the food available is from supermarkets or fresh fruit and vegetables stores.

Majority of our shire is classified as a food desert, this means that areas are 1.5km void for supermarkets. In some of our smaller northern and southern towns, if you do not have a car you cannot access supermarkets via public transport.

### Supportive Documents

- **Community Food Security Needs Assessment for the Colac Otway Shire 2012-2013** – this needs assessment was completed in partnership with Colac Area Health and Otway Health and assessed the effect the determinants of food security have on the Colac Otway Shire population. Three action areas our health professional and community leaders to move for with include addressing the issues of food cost, food skills/knowledge and transport/access to fresh food.
- **The Department of Health** – has launched a range of initiatives through the Victorian Healthy Eating Enterprise (VHEE), which councils can employ to create a culture of healthy eating. These include the Healthy food charter, the Victorian Healthy Eating Advisory Service, the Victorian Healthy Food Basket Survey and the Victorian Aboriginal nutrition and physical activity strategy.
- **VicHealth, June 2010** – ten ways local government can act on food security.
- **Australian Dietary Guidelines, 2013** – these guidelines recommend, in general, adult females eat 5x 75g serves of vegetables and legumes/beans and 2x 150g serves of fruit daily and that males eat 5 to 6x 75g serves of vegetables and legumes/beans and 2x 150g serves of fruit daily.

24 Victorian Health Promotion Website – VicHealth, Fact Sheet Food Security 2006

25 Community Indicators Vic Website (2008), retrieved 2012, [http://www.communityindicators.net.au/wellbeing\\_reports/colac\\_otway](http://www.communityindicators.net.au/wellbeing_reports/colac_otway)

26 Department of Health, July 2013, Victorian Population Health Survey 2011-2012, selected preliminary survey findings, pages 8-14

27 VicHealth, Supporting healthy eating: local government action guide no.7', accessed 24 June 2013, [www.vichealth.vic.gov.au/localgovernmentguides](http://www.vichealth.vic.gov.au/localgovernmentguides)

28 Victorian Government Department of Health, (2012) Barwon South West Region Health Status Profile 2011 – Victorian Population Survey 2008.

29 Department of Health, July 2013, Victorian Population Health Survey 2011-2012, selected preliminary survey findings, pages 31-39





**Goal:** All people in the Colac Otway Shire can obtain nutritionally adequate, culturally acceptable and safe food.

**Council Theme** Pillar 3: A Place to Live and Grow is a community where people feel cared for and supported; where buildings and spaces facilitate creativity, social activity and enrichment of life, and people have access to gain the skills and education needed to reach their potential.

Pillar 4: A Healthy Community which actively connects and includes people of all ages and backgrounds and promotes healthy life in a clean, safe and sustainable environment.

Objective	Actions	Partners	Indicators	Timelines
<b>Increase capacity to implement food security initiatives that support access to a safe, acceptable nutritious and sustainable food supply</b>	Develop a Colac Otway Community Food Action Plan	<ul style="list-style-type: none"> <li>• Council</li> <li>• CAH</li> <li>• OHCS</li> <li>• CFAG</li> </ul>	<ul style="list-style-type: none"> <li>• Developed and adopted</li> </ul>	June 2014
			<ul style="list-style-type: none"> <li>• Incorporate the “Ten ways local government can act on food security”, VicHealth, June 2010, into the Colac Otway Community Food Action Plan</li> </ul>	October 2016
	Participate in the implementation of the G21 Food Security Network Action Plan	<ul style="list-style-type: none"> <li>• G21 FSNAG</li> </ul>	<ul style="list-style-type: none"> <li>• Actions implemented</li> </ul>	Ongoing
	Develop a Community Foodshare operation in Colac that is able to provide free food for agencies to distribute to vulnerable community members	<ul style="list-style-type: none"> <li>• St Laurence*</li> <li>• Council</li> <li>• Agencies with access to the Foodshare</li> <li>• Local Social Food Enterprises</li> </ul>	<ul style="list-style-type: none"> <li>• A Community Food Share enterprise is developed</li> </ul>	December 2014
	Develop a better understanding of food sensitive planning and urban design	<ul style="list-style-type: none"> <li>• Council</li> <li>• Health &amp; Community Services</li> </ul>	<ul style="list-style-type: none"> <li>• Conduct a VicHealth training session</li> </ul>	April 2014

\* Denotes lead partner



## Priority SUPPORT MENTAL HEALTH AND CONNECTEDNESS

Mental health is a state of complete physical, mental, spiritual and social wellbeing in which each person is able to realise one's abilities, can cope with the normal stresses of life and make a unique contribution to one's community.<sup>30</sup>

A socially inclusive society is defined as one where all people feel valued, their differences are respected, and their basic needs are met so they can live in dignity. Social exclusion is the process of being shut out from the social, economic, political and cultural systems which contribute to the integration of a person into the community.<sup>31</sup>

By providing opportunities for people to connect with others, join a group and be engaged in local activities, Council can improve the mental health and wellbeing of their residents. Communities with high levels of social cohesion, including participation by individuals in community organisations and activities, typically have better health than those with low levels.<sup>32</sup>

### Evidence

People who are socially isolated and excluded are more likely to experience low self-esteem, depressive symptoms and have a higher risk of coronary heart disease.<sup>33</sup> Evidence shows that the natural environment has three main effects on humans.<sup>34</sup> It:

- Increases Physical Activity.
- Reduces Chronic Stress.
- Strengthens Communities.

As more Australians are living alone compared to previous generations<sup>35</sup> the level of isolation could be expected to increase. There are 28.8% of lone person households compared to all households in Colac Otway Shire with Colac - Central having the highest proportion of lone person households at 37.7%. This is higher compared to the Victorian rate of 23.5%.<sup>36</sup>

### Supporting Documents

- **Vichealth, Increasing social connections, Local government action guide no. 4** – provides local governments with guidelines for actions addressing Social Connection.
- **Department of Planning and Community Development (DPCD) 2008: Building social Inclusion** – recognizes that all levels of Government are needed to be involved for social inclusion strategies to be effective.
- **Australian Government Social Inclusion Framework (2011)** – Is a measurement and reporting framework incorporating social inclusion principles to identify areas where effort is required and identify success that can be built upon.

30 THE MELBOURNE CHARTER for Promoting Mental Health and Preventing Mental and Behavioural Disorders, 2008

31 Cappo D 2002, Social inclusion initiative. Social inclusion, participation and empowerment. Address to Australian Council of Social Services National Congress 28-29 November, 2002, Hobart.

32 Stansfeld, S, 2006, 'Social support and social cohesion', in R Wilkinson & M Marmot (eds), Social determinants of health (2nd edn), Oxford University Press, Oxford, pp. 148–171.

33 Cornwell, E & Waite, L, 2009, 'Social disconnectedness, perceived isolation, and health among older adults', Journal of Health & Social Behaviour, vol. 50, no. 1, pp. 31–48.

34 Health Parks Healthy People, International Congress 2010, see [www.hphpcentral.com](http://www.hphpcentral.com) for further information.

35 Australian Bureau of Statistics, 2004, Household and family projections: Australia 2001–2006, cat. no. 3236.0, ABS, Canberra.

36 Compiled and presented in profile.id for Colac Otway Shire by .id, the population experts.

## Goal: Provide opportunities for increasing community social connections and improving mental health

**Council Theme** Pillar 3: A Place to Live and Grow is a community where people feel cared for and supported; where buildings and spaces facilitate creativity, social activity and enrichment of life, and people have access to gain the skills and education needed to reach their potential.

Pillar 4: A Healthy Community which actively connects and includes people of all ages and backgrounds and promotes healthy life in a clean, safe and sustainable environment.

Objective	Actions	Partners	Indicators	Timelines
<b>Ensure access and equity for all groups in the community</b>	Hold regular forums or exhibitions with local multicultural and indigenous groups and others who may experience social isolation or exclusion	<ul style="list-style-type: none"> <li>• Council</li> <li>• Diversitat</li> <li>• CAH</li> <li>• OHCS</li> </ul>	Hold a forum or exhibitions each year	<ul style="list-style-type: none"> <li>October 2014</li> <li>October 2015</li> <li>October 2016</li> <li>October 2017</li> </ul>
	Identify opportunities for people to meet and participate together in local healthy activities	<ul style="list-style-type: none"> <li>• Council*</li> <li>• Health Services</li> <li>• Community Services</li> <li>• Workplaces</li> </ul>	Develop a guide for affordable local recreational and exercise activities	December 2014
	Provide a local web-based platform to connect local communities and stakeholders to transport, health, and community information and conversations	<ul style="list-style-type: none"> <li>• Community Hub Inc*</li> <li>• Council</li> <li>• RDV</li> <li>• Health services</li> <li>• Community Services</li> <li>• Stakeholders</li> </ul>	Develop and implement the Access Connect Belong web-based platform	October 2014
<b>Support activities that build community and social networks</b>	Support local efforts to engage more people in community volunteering and citizenship activities, such as volunteer groups, churches, service clubs, and professional or political associations	<ul style="list-style-type: none"> <li>• Council</li> </ul>	An Increase in volunteering and citizenship activities	Ongoing
<b>Strengthen Council's connection with the community</b>	Provide diversity training for staff to ensure appropriate sensitivity and awareness in service delivery	<ul style="list-style-type: none"> <li>• Council</li> </ul>	Principles in the Diversity Plan developed by Council's OPASS team are promoted across Council services	June 2014
<b>Provide environments that support connectedness and healthy activities</b>	Implement the principles of Healthy Parks Healthy People	<ul style="list-style-type: none"> <li>• Council</li> <li>• Parks Vic</li> <li>• Medicare Locals</li> <li>• Health Services</li> <li>• People and Parks Foundation</li> </ul>	Continue discussions supporting health professionals to recruit individuals into physical activity within their local park	Ongoing

\* Denotes lead partner



## Priority PREVENTION OF VIOLENCE AGAINST WOMEN AND CHILDREN

Violence against women can include psychological, economic, emotional, physical and sexual abuse.

To prevent violence from occurring in the first place, we all must work to challenge and change attitudes, beliefs and cultures that support violence. It is best prevented by ensuring that respectful attitudes, behaviours and beliefs are shaped in the places where we live, work and play.<sup>37</sup>

Council can provide leadership across our community to prevent violence against women by promoting gender equity and equal and respectful relationships between men and women. As a large employer we can influence and change workplace cultures to promote gender equity and the safety of women.<sup>38</sup>

### Evidence

Crime statistics for Colac show an increase of reported family violence crime at a rate of 133.9/100,000 population in the period 1 April 2011 – 31 March 2012 to a rate of 260.1/100,000 population in the period 1 April 2012 – 31 March 2013. This is an increase of 94%.<sup>39</sup>

The percentage of children witnessing violence in Colac Otway at 3.1% is higher than the Barwon Region 2.9% and Victorian average of 2.5%.<sup>40</sup>

Intimate partner violence is the leading preventable contributor to death, disability and illness in Victorian women aged 15–44 years.<sup>41</sup>

64% of young people in Colac Otway identified violence as being their main health and wellbeing issue.<sup>42</sup>

### Supporting Documents

- **Domestic Violence Resource Centre** – provide and produce booklets, pamphlets, discussion papers, books and other resources for professionals, teachers and schools, people who have experienced violence, and the general community.
- **Family Violence Protection Act 2008** – prevent and reduce family violence; maximise safety for children and adults who have experienced family violence; and promote the accountability of perpetrators.
- **National Plan to reduce violence against women and their children, 2010–2022** – believes that involving all governments and the wider community is necessary to reducing violence in the short and longer terms.
- **Victorian Government Action Plan to Address Violence Against Women and Children** – outlines a whole of government approach to address family violence and sexual assault.
- **Victoria Police Code of Practice for the Investigation of Family Violence** – focuses on an integrated system response to family violence by detailing the options available to police and how those options are implemented to assist in breaking the cycle of family violence.
- **VicHealth 2012, Preventing violence against women** – local government action guide no. 6.
- **MAV 2012, Prevention of violence against women leadership statement** – provides support to councils around leadership on the prevention of violence against women.

37 VicHealth, 2007, Preventing violence before it occurs: A framework and background paper to guide the primary prevention of violence against women in Victoria, Victorian Health Promotion Foundation, Melbourne.

38 VicHealth Preventing violence against women Local government action guide no. 6

39 Victoria Police Crime Statistics for Victoria, My Place accessed 17 June 2013 [http://www.vicpolice.com.au/index.php?option=com\\_statistics&task=view&id=62](http://www.vicpolice.com.au/index.php?option=com_statistics&task=view&id=62)

40 Department of Education and Early Childhood Development, 2010, Early Childhood Community Profile, Colac Otway Shire.

41 VicHealth, 2004, The health costs of violence: Measuring the burden of disease caused by intimate partner violence. A summary of findings, Victorian Health Promotion Foundation, Melbourne.

42 Colac Area Health Draft), 2012, Youth Health and Wellbeing Needs Assessment Report.

**Goal:** Council is committed to preventing violence against women and children before it occurs by:

- addressing the known contributors to such violence
- creating safe, respectful and equitable communities, workplaces and public environments.

**Council Theme** Pillar 3: A Place to Live and Grow is a community where people feel cared for and supported; where buildings and spaces facilitate creativity, social activity and enrichment of life, and people have access to gain the skills and education needed to reach their potential.

Pillar 4: A Healthy Community which actively connects and includes people of all ages and backgrounds and promotes healthy life in a clean, safe and sustainable environment.

Objective	Actions	Partners	Indicators	Timelines
<b>Provide leadership across communities to prevent violence against women by promoting gender equity and equal and respectful relationships</b>	Support community groups and clubs that are working to prevent violence against women	<ul style="list-style-type: none"> <li>• Council</li> <li>• Various groups</li> </ul>	Attitudinal and behaviour change in demonstrating respectful and non-violent gender relations	October 2017
	Establish a partnership with local agencies in hosting events for Month of Action including White Ribbon Day	<ul style="list-style-type: none"> <li>• Council</li> <li>• Health Services</li> <li>• Community Services</li> <li>• Community</li> </ul>	Number and type of activities that occur	Annually
<b>Implement and support evidence-based family violence prevention activities</b>	Work with existing agencies to better understand data and services that support victims of family violence	<ul style="list-style-type: none"> <li>• Council</li> <li>• CAH</li> <li>• DHS</li> <li>• VicPol</li> <li>• Community Service agencies</li> </ul>	Development of a needs assessment document around domestic violence considering all data sources	June 2014
	Collaborate with other initiatives, including the forthcoming sub-regional strategy to prevent violence against women and children	<ul style="list-style-type: none"> <li>• Council</li> <li>• CAH</li> <li>• DHS</li> <li>• VicPol</li> <li>• Community Service agencies</li> <li>• WHW BSW</li> </ul>	Number of new community strengthening initiatives and programs	June 2015



## Priority SUPPORT HEALTHY BEHAVIOURS

The four greatest health risk behaviours are a lack of physical activity, poor nutrition, tobacco use, and excessive alcohol consumption.

These are responsible for much of the illness and death related to chronic diseases such as heart disease, cancer, strokes, mental illness, and respiratory diseases.

Council can work with Colac Area Health in developing the workforce and implementing actions that come out of rising needs over the next 4 years as an important part of this support strategy.

### Evidence

The rate of Emergency Department presentations is the lowest for all LGAs at less than 20% of the Victorian average and GP attendances are 20% below average.<sup>43</sup>

The rates of people undertaking blood pressure checks, cholesterol checks and diabetes checks at least every two years are well below the Victorian average.<sup>44</sup>

In the Barwon South West region 30.3% children aged under 2 years are exposed to tobacco while in utero.<sup>45</sup>

In the Barwon South West region 24.3% of young persons have smoked cigarettes in the past 30 days.<sup>46</sup>

Overweight and obesity rates in Colac Otway are generally lower than that of Victoria. Our combined overweight/obese population is 44.5% compared to Victoria at 49.8%. The only population group higher than the Victorian average is obese females at 18.8% compared to Victoria at 17.2%.<sup>47</sup> Although this is comparatively encouraging the fact remains that 44.5% of the population is overweight or obese. Research in 2006 showed that over 30% of children in Colac between the ages of 4 and 12 were either overweight or obese.<sup>48</sup>

The cumulative incidence of cancers in Colac Otway for males is 49% and for females 24%, both higher than the Victorian average.<sup>49</sup>

### Supporting Documents

- **Department of Health, Public Health and Wellbeing Plan 2011–2015** – provides a blueprint for developing the Victorian Prevention System.
- **Quit Victoria Strategic Plan** – aims to reduce smoking rates, reduce smoking behaviours and reduce exposure to tobacco smoking and smoking behaviours.

43 Government of Victoria, Department of Health, 2012, Modelling, GIS and Planning Products Unit: Colac Otway Shire Profile.

44 Department of Health, Victorian Population Health Survey 2011

45 The Victorian Adolescent Health and Wellbeing Survey (HowRU 2009)

46 The Victorian Adolescent Health and Wellbeing Survey (HowRU 2009)

47 Department of Health, July 2013, Victorian Population Health Survey 2011-2012, selected preliminary survey findings, pages 31-39.

48 WHO Collaborating Centre for Obesity Prevention, Deakin University Report 6: Lessons learned from Colac's Be Active Eat Well project, accessed 25 June 2013, [http://www.goforyourlife.vic.gov.au/hav/admin.nsf/Images/ssop6\\_report\\_6\\_baew\\_final.pdf/\\$File/ssop6\\_report\\_6\\_baew\\_final.pdf](http://www.goforyourlife.vic.gov.au/hav/admin.nsf/Images/ssop6_report_6_baew_final.pdf/$File/ssop6_report_6_baew_final.pdf)

49 Government of Victoria, Department of Health, 2012, Modelling, GIS and Planning Products Unit: Colac Otway Shire Profile.



## Goal: Keeping people well through supporting healthy behaviours

**Council Theme** Pillar 4: Healthy Community and Environment actively connects and includes people of all ages and backgrounds and promotes a healthy and vibrant community life in a clean, safe and sustainable environment.

Objective	Actions	Partners	Indicators	Timelines
<b>Implementation of the Department of Health's Healthy Together Achievements Program for settings</b>	Engage schools, early years settings and workplaces to register for the program.	<ul style="list-style-type: none"> <li>• CAH*</li> <li>• Council</li> <li>• OHCS</li> </ul>	Settings are registered for the program	April 2014
	Develop a workplan and resource requirements for each setting to get work started.	<ul style="list-style-type: none"> <li>• CAH*</li> <li>• Council</li> <li>• OHCS</li> </ul>	Document workplans and requirements for each setting.	December 2014
	CAH, COS and OHCS's Healthy Together Achievements Program Staff will continuously mentor and guide settings to complete the benchmarks and ensure they are adhering to requirements outlined by the program.	<ul style="list-style-type: none"> <li>• CAH*</li> <li>• Council</li> <li>• OHCS</li> </ul>	Workplan outcomes are reviewed annually	October 2017
<b>Increase supportive health measures</b>	Identify the reasons for very low emergency department presentations and health checks	<ul style="list-style-type: none"> <li>• Council</li> <li>• CAH</li> <li>• Medicare Locals</li> </ul>	Present report to Council for consideration	Dec. 2014

\* Denotes lead partner



## Priority REDUCE HARM FROM ALCOHOL, TOBACCO AND OTHER DRUGS

Risky use of drugs and alcohol can have detrimental health impacts on health and wellbeing (chronic health conditions such as liver disease and cancer, heart attack, stroke, overdoses, poisonings, suicides, road trauma, falls and injuries and assaults).

They can also often cause harm to others (i.e. transport accidents, child abuse and neglect, assaults, family violence, and disruption to family, friends, neighbourhoods and workplaces).<sup>50,51</sup>

Council can reduce harm from drugs (illegal and legal), and alcohol through the implementation of harm minimisation strategies (reduce supply, reduce demand and reduce harm) and protecting the health of the community through actions such as enforcement of the Tobacco Act 1987 and promotion of smoke free areas.

### Evidence

There are 9.2/1,000 population drug and alcohol clients within Colac Otway receiving treatment or services, this is 80% above the Victorian average.<sup>52</sup>

48.7% of persons in the Colac Otway Shire purchased alcohol in the last 7 days. This is the fourth highest rate in Victoria.<sup>53</sup>

The alcohol abstainer population in Colac Otway is 13.5% which is below the Victorian rate of 18.6%. Short-term risky/high risk alcohol consumption is 56.2% compared to the Victorian rate of 45.3%. The long-term low risk rate of alcohol consumption is 83.3% (Vic. 77.3%) and the long-term risky/high risk is 3.1% (Vic. 3.3%).<sup>54</sup>

In the Barwon South West region 61% of adolescents aged 12-17 years reported that it is 'easy/very easy' to get alcohol.<sup>55</sup>

In the Barwon South West region 30.3% children aged under 2 years are exposed to tobacco while in utero.<sup>56</sup> In the Barwon South West region 24.3% of young person's have smoked cigarettes in the past 30 days.<sup>57</sup>

### Supporting Documents

- **Victorian Public Health and Wellbeing Plan 2011–2015** – provides a statewide approach into alcohol and other drug initiatives. These should be considered when developing the local action plan.
- **Reducing the alcohol and drug toll: Victoria's plan 2013–2017** – sets out how the Victorian Government will work with the community to bring down the alcohol and drug toll and deliver better health outcomes to thousands of Victorians who want to recover from the harm associated with alcohol misuse and drug use.
- **Quit Victoria Strategic Plan** – aims to reduce smoking rates, reduce smoking behaviours and reduce exposure to tobacco smoking and smoking behaviours.
- **NHMRC, 2001, Australian alcohol guidelines** – provide the standard for identifying risky drinking in the short and long term.
- **Dept. of Health, 2012, New directions in alcohol and drug treatment services. A roadmap** – aims to reform services so they can support people to make positive changes in their lives when they decide to seek help for an alcohol or drug problem.

50 City of Greater Geelong draft Public Health and Wellbeing Plan 2013-2017

51 VicHealth, Reducing harm from alcohol: local government action guide no.9, accessed 24 June 2013, [www.vichealth.vic.gov.au/localgovernmentguides](http://www.vichealth.vic.gov.au/localgovernmentguides)

52 Government of Victoria, Department of Health, 2012, Modelling, GIS and Planning Products Unit: Colac Otway Shire Profile.

53 Government of Victoria, Department of Health, 2012, Modelling, GIS and Planning Products Unit: Colac Otway Shire Profile.

54 Department of Health, July 2013, Victorian Population Health Survey 2011-2012, selected preliminary survey findings, pages 15-24.

55 The Victorian Adolescent Health and Wellbeing Survey (HowRU 2009)

56 The Victorian Adolescent Health and Wellbeing Survey (HowRU 2009)

57 The Victorian Adolescent Health and Wellbeing Survey (HowRU 2009)



## Goal: Reduce harm from alcohol, tobacco and other drugs

**Council Theme** Pillar 4: Healthy Community and Environment actively connects and includes people of all ages and backgrounds and promotes a healthy and vibrant community life in a clean, safe and sustainable environment.

Objective	Actions	Partners	Indicators	Timelines
<b>Reduce the harms of alcohol and other drug misuse by provision of support, information and education through collaborative partnerships and leadership</b>	Enforce the Consumption of Alcohol In Public Places Local Law 2013	<ul style="list-style-type: none"> <li>• Council</li> <li>• VicPol</li> </ul>	Increased sense of safety in public places	Ongoing
	Assess the cumulative impact associated with licensed trade, including the number and type of liquor licences operating	<ul style="list-style-type: none"> <li>• Council</li> <li>• Heath Services</li> <li>• Community Services</li> <li>• Industry and interested groups</li> </ul>	Assessment is prepared and used to direct the Alcohol and Other Drugs action plan	June 2014
	Gather local evidence based data and issues around alcohol and other drugs to support the development of an Alcohol and Other Drugs Action Plan	<ul style="list-style-type: none"> <li>• Council</li> <li>• CAH A&amp;OD team</li> <li>• Heath Services</li> <li>• Community Services</li> <li>• G21</li> <li>• Industry and interested groups</li> </ul>	Complete and document findings from local data	May 2014
	Continue to build capacity within council and with other enforcement bodies to further develop and improve regulatory systems	<ul style="list-style-type: none"> <li>• Council</li> <li>• Heath Services</li> <li>• Community Services</li> <li>• G21</li> <li>• Industry and interested groups</li> <li>• VicPol</li> </ul>	Attend workshops and training sessions on enforcement of regulatory systems	October 2015
	Ensure best practice models are adopted in relation to response and management of alcohol and other drug misuse	<ul style="list-style-type: none"> <li>• Council</li> <li>• Heath Services</li> <li>• Community Services</li> <li>• G21</li> <li>• Industry and interested groups</li> </ul>	Align and measure models against best practice for each partner	December 2014 to October 2017
<b>Reduce the prevalence of smoking and its associated health, social and economic costs</b>	Work towards all children's playgrounds, junior sporting competitions, council buildings, surrounds of health services, and council funded events being smoke free.	<ul style="list-style-type: none"> <li>• Council</li> <li>• CAH</li> <li>• OHCS</li> <li>• QUIT</li> </ul>	Policy is developed	June 2014
<b>Support and encourage smoking cessation services</b>	Support Colac Area Health to continue a free smoking cessation service and scope the potential of Smoking Cessation Clinic expanding to OHCS.	<ul style="list-style-type: none"> <li>• CAH</li> <li>• OHCS</li> <li>• Council</li> </ul>	Actions are completed in accordance with the agreement with the Department of Health	October 2017
<b>Ensure compliance with the Victorian Tobacco Act requirements</b>	Participate in the Department of Health's Tobacco Education and Enforcement Program	<ul style="list-style-type: none"> <li>• Council</li> </ul>	Actions are completed in accordance with the agreement with the Department of Health	Ongoing

\* Denotes lead partner

# Appendix A

## Abbreviations

<b>A&amp;OD</b>	Alcohol and Other Drugs
<b>CAH</b>	Colac Area Health
<b>CFAG</b>	Community Food Action Group
<b>CHI</b>	Community Hub Inc.
<b>COGG</b>	City of Greater Geelong
<b>COS</b>	Colac Otway Shire
<b>DEECD</b>	Department of education and Early Childhood Development
<b>DH</b>	Department of Health
<b>DHS</b>	Department of Human Services
<b>DTPLI</b>	Department of Transport, Planning and Local Infrastructure (formerly Department of Planning and Community Development – DPCD)
<b>G21</b>	G21 Region Alliance
<b>G21 FSNAG</b>	G21 Food Security Network Action Group
<b>Glastonbury</b>	Glastonbury Community Services
<b>GP</b>	General Practitioner
<b>LGA</b>	Local Government Authority
<b>MPHWP</b>	Municipal Public Health and Wellbeing Plan
<b>OHCS</b>	Otway Health and Community Services
<b>RDV</b>	Regional Development Victoria
<b>VicPol</b>	Victoria Police
<b>WHW BSW</b>	Women's Health and Wellbeing - Barwon South West Inc.



Images courtesy of:

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