

# Draft Yarra Ranges Council Health & Wellbeing Plan 2021-2025

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## ***Acknowledgement of Country***

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We respectfully acknowledge the Traditional Owners, The Wurundjeri People as the Custodians of this land. We also pay respect to all Aboriginal community Elders, past and present, who have resided in the area and have been an integral part of the history of this region. Council also acknowledges Indigenous ways of being, knowing and doing that led to sustainable and health-giving societies thriving across Australia, for thousands of years.

## From the Mayor Cr Fiona McAllister

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Our community has great strength, and this has never been clearer than over the past year through the pandemic and then the storm emergency. The context for this Health and Wellbeing Plan is unlike any other, with the pandemic affecting everyone in our community, albeit differently.

This Plan gives Council guidance in the coming four years for how we can support communities to return to health and wellbeing both physically and mentally. One of the biggest assets for achieving this is our community: our leaders, our volunteers, the services and our business people; and the neighbours who look out for and show kindness to each other.

Ours is a place of historic significance, home to Coranderrk and the Wurundjeri people. It is a unique place with natural environments that others want to visit and in 2021, some of these beautiful places have been devastated by natural disaster. Our priorities to tackle the health impacts of climate change and public health emergencies underscore our commitment to doing our part to build back better.

This Plan aligns with the Council Plan and expands on how Council will support mental wellbeing which is a major initiative of the Council Plan. Social connection, eating nutritious food and being physically active are all powerful ways for us to have good mental and physical health. Council's role to advocate for local needs will also continue.

I invite your participation in the journey and acknowledge your contributions to wellbeing. I know that by working together we can create a healthier Yarra Ranges.

## From Chief Executive Officer Tammi Rose

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Council has many ways it supports health and wellbeing and while this Plan outlines how we will work to improve the top health issues, I want to acknowledge the broader Council effort. Whether it be collecting and recycling waste, delivering meals to older residents or responding on all fronts to emergencies, we are here to serve our communities.

Council is fortunate to have strong partnerships; the success of this Plan very much depends on the skills and efforts of our partners and community members who act every day in their communities. I am pleased that Council has been able to provide additional grants to support relief and recovery projects and this will continue over coming years through soon to be established Community Recovery Committees.

We will continue a collective impact approach for some of our health priorities, bringing skills and resources from across the Council and our external partners, to the priorities of, improving mental wellbeing and increasing healthy eating. Our commitment to gender equality also continues, both within the Council and with communities. The Plan and the work coming out of it, applies a gender lens in line with the Gender Equality Act. I look forward to leading the organisation in its many efforts to support health and wellbeing over coming years.

## ***Acknowledgment of partners involved in developing this plan***

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Council acknowledges the many people and partners who gave their time, expertise and insights to help develop this Plan. The members of the Health and Wellbeing Advisory Group brought their knowledge and commitment to help set directions for the ongoing wellbeing of the Yarra Ranges community. In a year when Covid 19 and a devastating storm changed all our plans, this was particularly appreciated.

<b>Health and Wellbeing Advisory Group</b>  Cr Sophie Todorov CHAIR 2020-21 Cr Richard Higgins CHAIR 2017-20 Christine Farnan (DHHS) Jacky Close/Kylie Osborne (OEPCP) Tracey Higgins (Inspiro) Naveen Yadav (EMPHN) Lisa Currie (Urban Area community representative) Andrew Fullagar (Hills community representative) Siu Yin Chan (Valley community representative) Debbie Stanley/Di Collins (EACH) Jo Stanford (Eastern Health Community Health) Kristine Olaris (Women's Health East) Daisy Brundell (Inspiro)	<b>Advisory Committees of Council</b>  Disability Advisory Group  Indigenous Advisory Group  Youth Action Group (June)  Healthy & Active Ageing Advisory Group
<b>Community Survey</b>  Over 280 respondents contributed their views.	<b>Engagements</b>  A list of stakeholders engaged in the development of the Plan is included in a report on engagement findings.
	<b>Council Reference Group</b>  Officers from across the Council brought their expertise to the development of this Plan and connected health and wellbeing with their area.

## ***Abbreviations***

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Abbreviations used in this plan are listed in Appendix 1.

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Respond to public health emergencies	
Tackle climate change and its impact on health	
Increase healthy eating	
Increase active living	
Improve mental wellbeing and social connections	
Prevent violence against women and children	
Reduce harmful alcohol and drug use	

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## ***The Plan at a glance***

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The Yarra Ranges Council *Health and Wellbeing Plan 2021-2025* provides a strategic road map for Council to support optimal health and wellbeing of communities across the municipality. The plan reflects and leverages where Council has responsibility, capability, influence, roles and resources to support health and wellbeing.

### Improving health and wellbeing

Optimal health and wellbeing are fundamental to a thriving community and prosperous municipality. Residents are generally healthy but not in every way.

Compared to all of Victoria, Yarra Ranges adults have poorer health and wellbeing related to:

- Family violence incidents
- Food insecurity and drinking sugary drinks
- Anxiety, depression and other mental health-related problems
- Excess alcohol consumption
- Diagnosis of multiple chronic diseases

### How the Plan was developed

- Through community consultation.
- Build on achievements of previous Health and Wellbeing Plans
- Articulate with other Council plans and the Victorian Public Health and Wellbeing Plan 2019-23

### Draft Health and Wellbeing Priorities and Goals

- |  |   |
|--|---|
| 1. Respond to public health emergencies            | Communities recover from Covid 19 and other emergencies.  |
| 2. Tackle climate change and its impact on health  | People and businesses are resilient, prepared, and able to mitigate the potential health impacts of climate change.                   |
| 3. Increase healthy eating                         | People have the capacity to consume healthy food, built on a sustainable system providing access to healthy, affordable food for all. |
| 4. Increase active living                          | People have capacity to walk and be physically active in an inclusive culture.  |
| 5. Improve mental wellbeing and social connections | People have good mental wellbeing through strong community connections, family supports and ease of access to mental health services. |
| 6. Prevent violence against women and children     | Women and children live free from abuse and violence in a culture of gender equity and respect.                                       |
| 7. Reduce harmful alcohol and drug use.            | People are safe from the harmful effects of alcohol and other drugs.  |

### Principles of the Plan

- Evidence informed
- Gender equity and intersectionality
- Social determinants of health
- Human rights and health equity

### Approaches of the Plan

- Healthy and sustainable environments
- Whole of Council
- Partnership and collective impact
- Prevention - protective and risk factors
- Asset based community development
- Placed-based
- Life-course
- Evaluation and monitoring

### How the Plan will be implemented

- Directly by Council and via partnerships with other agencies and communities
- Action Plans for each priority



# Executive Summary

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The Yarra Ranges Council *Health and Wellbeing Plan 2021-2025* (the Plan) articulates what we want to achieve over the coming four years. The Plan is a strategic road map for how Council can support optimal health and wellbeing of communities and meets the requirement of the Public Health and Wellbeing Act 2008.

The Plan:

- describes priority areas for action to improve health and wellbeing, principally through Council's work and also work in partnerships with other agencies and communities
- reflects where Council has responsibility, capability, influence, roles and resources to support health and wellbeing.

The Health and Wellbeing Plan is part of how Council delivers its strategic objective of a *Connected and Healthy Community*. Council has additional service delivery roles that support good health, such as immunisation, maternal and child health, wastewater management and food safety, to name a few. These are vital to community health and generally, are not the focus on this Plan.

## Draft Health and Wellbeing Priorities

- |  |   |
|--|---|
| 1. Respond to public health impacts of emergencies | 5. Improve mental wellbeing and social connection |
| 2. Tackle climate change and its impact on health  | 6. Prevent violence against women and children    |
| 3. Increase healthy eating                         | 7. Reduce harmful alcohol and drug use            |
| 4. Increase active living                          |   |

These draft health priorities reflect the most significant preventable causes of poor health and wellbeing in Yarra Ranges. They were informed by residents' priorities for improving health and wellbeing. Local health and community organisations also share priorities with Council. Five of the priorities continue work from the *2017-2021 Health and Wellbeing Plan*. Actions for each priority describe the outcomes we hope to achieve, who in Council is involved, our partners, measures of success and related Council plans or strategies.

A comprehensive approach is required to plan for and deliver improved health and wellbeing outcomes for all residents of Yarra Ranges. A set of principles and approaches guide this Plan and the way Council works with the community and our partners to improve health and wellbeing. Applying these principles and approaches will ensure that the benefits of population-level health planning extend to all members of the community.

## Principles

Evidence informed  
Gender Equity lens  
Intersectionality and discrimination  
Social determinants of health  
Human rights and health equity

## Approaches

Healthy and sustainable environments  
Whole of Council  
Partnership and collective impact  
Prevention - protective and risk factors  
Asset based community development  
Place-based  
Life-course  
Evaluation and monitoring

Council embeds gender equity and intersectionality into its strategies. Research, consultation and data analysis through a gender and intersectionality lens gives a more nuanced understanding of our communities to inform Council action.

The *2017-2021 Health and Wellbeing Plan* took a new approach to changing entrenched health issues through three major initiatives on: walking, water and Indigenous health. This *collective impact* approach provided a framework to tackle health issues from multiple perspectives, harnessing different skills and resources. Taking a deliberate learning approach, this was a new way of working for Council. The approach will evolve in the 2021-2025 plan with a new collaboration proposed for mental health and another to focus on nutrition and the food system. These priorities also support recovery from the recent public health emergency of Covid 19 and the storms of 2021.

Good health and wellbeing are fundamental to a thriving community and a prosperous municipality. Yarra Ranges Council views health and wellbeing as vital for our residents and communities. Improving the health and wellbeing of our community is everyone's business. Different institutions and levels of government play different roles in people's health and wellbeing. Yarra Ranges Council plays a central role in shaping a healthy and liveable region which promotes and supports health and wellbeing.

# Yarra Ranges Council

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## ***Council vision 2036***

**Whether you live here or visit, you will see how much we value our natural beauty, how connected our communities are, and how balanced growth makes this the best place in the world.**

2021 update to be added when approved.

The *Council Plan 2021-2025* sets the road map for each four-year term of the Council. It describes what Council stands for, its priority activities, strategic directions and outcomes for the Council term. This Health and Wellbeing Plan directly delivers on the Council Plan objective of Connected and Healthy Communities.

The Council Plan development was informed by a community engagement process. Priorities developed by three area-based community panels show a focus on our environment and community wellbeing. Themes identified by the Community Panels for the Council Plan align with many of the draft priorities of this Plan.

## **Council services and regulatory roles to support health and wellbeing**

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Council improves, supports and protects health and wellbeing through services, programs and regulatory roles to protect health and the environment. Council also leads and works with others to advocate for funding for services and facilities. Council has many roles to improve the health and wellbeing of residents, including:

- delivering infrastructure, services, planning and facilities that support people to be healthier
- planning functions such as strategic land planning
- regulatory functions such as, statutory planning, building and health. Council also assesses the social and economic impacts of new electronic gaming machines and reviews alcohol license applications
- partnerships - leveraging skills, resources, expertise and working together for collective impact
- building capacity of communities through grants, community development, training and skills and leadership development
- advocating for systemic change to improve the underlying causes of poor health.

Further details of the alignment between the Council Plan and this 2021-2025 Health and Wellbeing Plan can be viewed in the FACT Sheet that accompanies this draft Plan on the website. It includes examples of specific services, programs and partnerships Council is involved in.



## Gender Equality and Intersectionality

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The Gender Equality Act 2020 requires Council to undertake a Gender Impact Assessment when developing a Plan such as this. Council must embed gender equity and intersectionality impacts into its strategies. All areas of Council must show how they are contributing to a vision for gender equality.

*‘Gender equity is not only a fundamental human right, but a necessary foundation for a peaceful, prosperous and sustainable world’*

UN Sustainable Development Goal 5 (1)

### **Our Vision for Gender Equality in Yarra Ranges**

The following Vision was developed by Council’s leadership team to direct the organisation’s work to reduce gendered violence in Yarra Ranges. It recognises the absolute requirement to change the underlying conditions that lead to this form of violence, such as gender stereotypes, expectations and roles.

**Yarra Ranges is gender equitable, inclusive and diverse. Women, men and gender diverse people have equitable access to resources, power and opportunities. We are brave and fierce in our pursuit of gender equality and human rights, and we all have a role to play. We demand this for ourselves and our community.**

The Plan reflects the commitments made in the vision and describes a range of Council work to help achieve it. Further details on gender equality and intersectionality are in Appendix 2.

# About Yarra Ranges

## Our Population – key facts

- Yarra Ranges' estimated resident population was 159,955 in 2020. (2) New population forecasts will be developed after the release of data from the 2021 Census of Population and Housing.
- Yarra Ranges is home to many Aboriginal and Torres Strait Islander peoples, the largest population in the Eastern Metropolitan Region (EMR) at 1359 residents in 2016, which is thought to be an under-estimate.
- In 2016, 16.3% of people in Yarra Ranges (24,3760 residents) were born overseas, compared with 33.8% in Greater Melbourne.
- Whilst Yarra Ranges' population is socioeconomically advantaged overall (in the top 20% of local government areas in Victoria in 2016), it has pockets of high disadvantage in the areas around Yarra Junction and Warburton.
- There is no accurate demographic data on people who identify as gender diverse in Yarra Ranges.

2016 Census Snapshot			
Total people (usual residence)	Yarra Ranges		Greater Melbourne
Population group	Number	%	%
Males	73,819	49.4	49.0
Females	75,717	50.6	51.0
Aboriginal and Torres Strait Islander population	1,359	0.9	0.5
Australian citizens	133,014	89.0	79.6
Eligible voters (citizens 18 years and older)	100,965	67.5	60.8
Population over 15 years	121,081	81.0	81.7
Employed Population	74,423	95.4	93.2

Source: Australian Bureau of Statistics, Census of Population and Housing 2016. Compiled and presented in profile.id by .id .

In recent years several population trends have emerged:

- a major new development in Lilydale, at the former Sibelco quarry site, will see increased population growth in Lilydale over the next 20 years, with more than 3,000 new households expected (3)
- in-fill development has gradually increased population density in the urban areas
- cultural diversity has increased, with most new arrivals from overseas coming from the Asia-Pacific region, although the pandemic will see a temporary halt to new overseas arrivals
- people moving from inner Melbourne areas seeking more affordable housing and lifestyle changes. The current boom in housing prices along with increased working from home is likely to increase this trend.

## Our places

Yarra Ranges is made up of diverse places and communities with distinct geographies and identities. There are 55 townships across the almost 2,500 square kms of the municipality. Council uses four planning areas that reflect our distinct places: The Hills, Urban, Valley and Upper Yarra areas. The map below shows 17 of the larger townships, shading of the more populous urban areas and extensive forested areas that make up Yarra Ranges.



The urban areas of Yarra Ranges are on the fringe of Melbourne. The urban area which is 3% of the land mass of the municipality, is where around 70% of the population live. The central and eastern parts of Yarra Ranges are more rural. Rural land is used for agriculture, horticulture, tourism and viticulture. Significant forests and State parks edge the municipality. The natural beauty and proximity to Melbourne attracts an increasing number of visitors.

## Caring for Country

Council is proud of the partnerships developed over many years with Indigenous Elders, community members, services and organisations. A shared commitment to improving health and closing the Indigenous health gap has now extended to improving the health of Country, as climate change and natural disasters have greater impact.

The Yarra Ranges Indigenous Advisory Committee guides Council's understanding of the intrinsic connection between healthy Country and human health. Ancient understanding held by Indigenous peoples, confirms the inter-dependence of the health of our environments and the health and wellbeing of people. Indigenous knowledge such as the Firestick approach to caring for and managing Country, is gaining momentum as a more sustainable way to protect from catastrophic fires. Council is committed to building knowledge and cultural awareness through this and other strategies.

# Health and Wellbeing

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Good health and wellbeing are fundamental to a thriving community and prosperous municipality. Yarra Ranges residents are generally healthy but not in every way.

Headline indicators, compared to all of Victoria, show Yarra Ranges adults have poorer health and wellbeing related to:

- family violence incidents
- food insecurity and drinking sugary drinks
- anxiety, depression and other mental health-related problems
- excess alcohol consumption
- diagnosis of multiple chronic diseases.

The self-reported data in the headline indicators are from the 2017 Victorian Population Health Survey. (4) Results for 2020 will be available after the development of this Plan. Council will monitor the findings carefully.

These headline indicators for each priority of the Plan, are used in conjunction with other kinds and sources of data to give a more complex assessment of the health status of Yarra Ranges residents.

To assess the full impact of health risk factors, the total burden of disease is measured in terms of disability-adjusted life years. That is, healthy years of life lost either through dying prematurely, or through living with illness due to disease and injury. Burden of disease information for Yarra Ranges is not available.

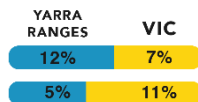
2015 Australia wide burden of disease	
38% could be prevented by reducing exposure to modifiable risk factors	Tobacco use had the highest burden of the measured risk factors at 9.3%
7.3% due to dietary risks	2.7% was due to illicit drug use
2.5% due to physical inactivity	4.5% due to alcohol use
0.7% due to intimate partner violence	2.2% was due to child abuse and neglect
0.3% due to unsafe sex (5)	

## Headline Indicators

### Violence Against Women & Gender Inequity

Increase in number of family violence incidents.

Increase of rate of family violence incidents.



Year to June 2020



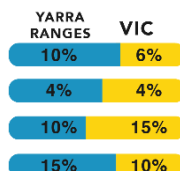
### Healthy Eating

Experienced food insecurity.

Met dietary guidelines for fruits and vegetables.

Consume take-away meals, or snacks, more than once a week.

Consume sugar-sweetened drinks daily.

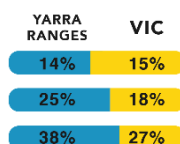


### Mental Health

High/very high levels of psychological distress.

Sought help for a mental health-related problem in the last 12 months.

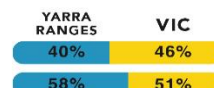
Ever diagnosed with anxiety or depression.



### Physical Activity

Sedentary, or insufficient physical activity.

Met physical activity guidelines.



### Risky Alcohol Consumption

Increase risk of alcohol related harm from a single occasion of drinking.

Increase lifetime risk of alcohol - related harm.

Drank more than 2 standard drinks per day.

Drank more than 4 drinks in one go (weekly basis).



### Risk Factors

Two or more chronic diseases (high blood pressure, diabetes etc).



# Achievements of previous Plans

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The Yarra Ranges Council *Health and Wellbeing Plan 2021-2025* is the fourth plan developed by Council to comply with the Victorian Public Health and Wellbeing Act 2008. The new Plan builds on the approaches, partnerships and achievements of previous plans.

A key component of the *2017-2021 Health and Wellbeing Plan* (5) was an innovative cross Council approach to generate collective impact in three Major Initiatives Projects (MIPs) designed to improve health and wellbeing by:

- encouraging walking
- promoting drinking water instead of sugary drinks
- working to close the Indigenous health gap.

To undertake each MIP, partnerships were drawn from across Council. Achievements of each MIP are described below. Feedback via partnership surveys on this new cross-Council approach has been positive and shown increased awareness of the Health and Wellbeing Plan and the three priority projects. The collaborative approach taken has involved a sharp learning curve for members of the three MIP project groups, including skill building in collective impact work, outcomes thinking and progress measurement.

## **Walking – the way to go MIP**

Constructing and maintaining infrastructure that supports walking as a free and widely accessible activity was the focus of this MIP. Outcomes include:

- elevating walking and pedestrian travel included in the new Integrated Transport Strategy
- cross Council officer training on the value of walking and walking infrastructure for community wellbeing
- external funding for iconic projects - Rivers and Ridges
- implementing new and existing footpaths construction programs, retrofitting pram crossings and improving accessibility of paths of travel in activity centres
- design changes to the Warby Trail to enable Adaptive Mountain Bike users to access the trail independently.

## **Water – the drink of choice MIP**

A range of outcomes were achieved to increase access to water and reduced access to sugary drinks, including:

- installation of ten new water refill stations by Council, branded with the Water the Drink of Choice graphics. Yarra Valley Water is working with Councils to increase access to water in public spaces and agreed to install an additional six water stations during 2020 (installation delayed). These will be co-branded. Council capital funding was obtained to continue Council installation of new water stations
- reduced availability of sugary drinks and less nutritious food options in several Yarra Ranges schools and sports clubs, through the Healthy Active Living project.



This is a partnership of local services and Council and supported by health promotion workers in local community health services

- changes to grants guidelines were made to promote access to healthy drink options
- sugary drinks now make up less than 25% of the drinks available, or on display in five out of the six Council sport and recreation facilities. The work to achieve this has been part of Council's *Water in Sport* project, funded by a VicHealth grant
- water is provided at all Council cultural facilities, and the range of sugary drinks is substantially reduced
- health promotion has occurred across Council's sport and recreation centres, to increase community awareness of the negative health impacts of sugary drinks.

### **Indigenous health MIP**

The Indigenous Health MIP increased the cultural literacy of Council staff in the MIP and across Council more broadly, as a result of a cultural audit undertaken to capture Council's current level on the cultural competency continuum.

The recommendations from the audit have provided the foundation and inspiration for the development of the next iteration of Council's Reconciliation Strategy. This will take Council on a cultural journey, creating the platform to significantly increase the understanding of Indigenous ways of knowing, being and doing. It will embed cultural principles and values into the broader practices and procedures across Council, making our services and facilities more accessible and culturally safe.

### **Other achievements**

Additional achievements of the *2017-21 Health and Wellbeing Plan* include:

- Healthy Active Living - a collaboration of Council, local health services and partners to:
  - work with schools, sports clubs and other recreational venues to increase access to healthy food and drink choices in canteens
  - research community support for healthier choices, which has shown strong community support for these choices
  - consult with the community to increase understanding of what a healthy and sustainable food system is (in progress)
- The *Water in Sport* project, funded by VicHealth. This supported people to choose water and reduce their consumption of sugary drinks
- Upper Yarra Partnership, a place-based initiative to support families and children, increase access to services and strengthen community connections
- Council grants for projects with a range of outcomes:
  - healthy eating and increasing access to healthy foods
  - supporting social connection and breaking down isolation
  - increasing gender equity
  - addressing homelessness
- Covid 19 relief and recovery grants to support mental wellbeing, social connection and relief needs were funded by Council's Recovery Fund

- gender equity work to prevent violence against women, including 16 Days of Activism campaigns, training for Council leaders and community capacity building
- advocacy to improve health and wellbeing in the areas of: social housing and homelessness and improving mental health services for young people. Achievements include a local Headspace and Integrated Youth Health Hub
- promotion of safe alcohol consumption through partnerships with community organisations and sports clubs
- increased participation of people with disability and their carers in the community through walking and participation in recreation and cultural activities. Promoting the contribution and voice of people with disability and carers through an International Day for People with Disability event
- community infrastructure, recreation facilities and open spaces improvements, including an award for increasing access to the Warby Trail for wheelchair users, developed through engagement with community.

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# Developing the 2021-2025 Plan

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Council's Health and Wellbeing Advisory Group provided guidance to develop the *2021-2025 Health and Wellbeing Plan*. Our community engagement reached across our community, including to children and young people and people with diverse life experiences and backgrounds. The contributions of partner organisations and community groups were instrumental. Community surveys and engagement offered a more nuanced picture of health and peoples' experience.

Analysis of health data for Yarra Ranges underpins this Plan. It is available on Council's website. It is a resource for local services, agencies, students and community.

## Connecting with Victorian State Priorities

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The Plan aligns with the principles, priorities and focus areas of the *Victorian Public Health and Wellbeing Plan 2019-23*. (6) The State vision for Victorians is:

*'A Victoria free of the avoidable burden of disease and injury so that all Victorians can enjoy the highest attainable standards of health, wellbeing and participation at every age.'*

The State Plan lists roles and contributions made in different organisations to improve Victorian population health and wellbeing.

- **State level:** Victorian government departments; peak bodies, professional organisations and specialist agencies.
- **Local level:** Local government; regional and metropolitan partnerships; social and aged care services; early childhood services and schools; women's health services; workplaces.
- **Service level:** Hospitals; community health and primary care organisations; Aboriginal Community Controlled Health Organisations; human services provider agencies, community organisations.

The Victorian Plan notes...

*'Taking an evidence-informed and coordinated approach can maximise opportunities across communities and within settings and services to support Victorians to live healthy lives. The wider determinants of health are integral to the long-term vision for public health and wellbeing interventions. Place-based and co-design approaches are also important mechanisms for driving improvements in wellbeing in Victoria and should be considered when designing and delivering public health and in public health and wellbeing.'* (7)

## Principles and Approaches of the Plan

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A comprehensive approach is required to plan for and deliver improved health and wellbeing outcomes for all residents of Yarra Ranges. A set of principles and approaches guide this Plan and the way Council works with the community and partners to improve health and wellbeing. The principles and approaches are described in a FACT sheet that accompanies the Plan. While each approach and principle are described separately, it is the combination that is foundational to development and implementation of this Plan.

Principles	Approaches
Evidence informed	Healthy and sustainable environments
Gender Equity lens	Whole of Council
Intersectionality and discrimination	Partnership and collective impact
Social determinants of health	Prevention - protective and risk factors
Human rights and health equity	Asset based community development (ABCD)
	Place-based
	Life-course
	Evaluation and monitoring

Council has many roles and influences in addressing the social determinants of health as part of improving health and wellbeing in Yarra Ranges, as shown in the diagram below. Principal among them is housing, particularly advocacy for social housing and homelessness, and local employment. The actions of Council in addressing the social determinants of health are included in the Action Plan of each priority of the Plan.

The principles and approaches are described in more detail in the “Supporting Information” sheet. The social determinants of health and two important determinants are outlined here given the impact they have on many of the foundations to health and wellbeing.

### The Social Determinants of Health

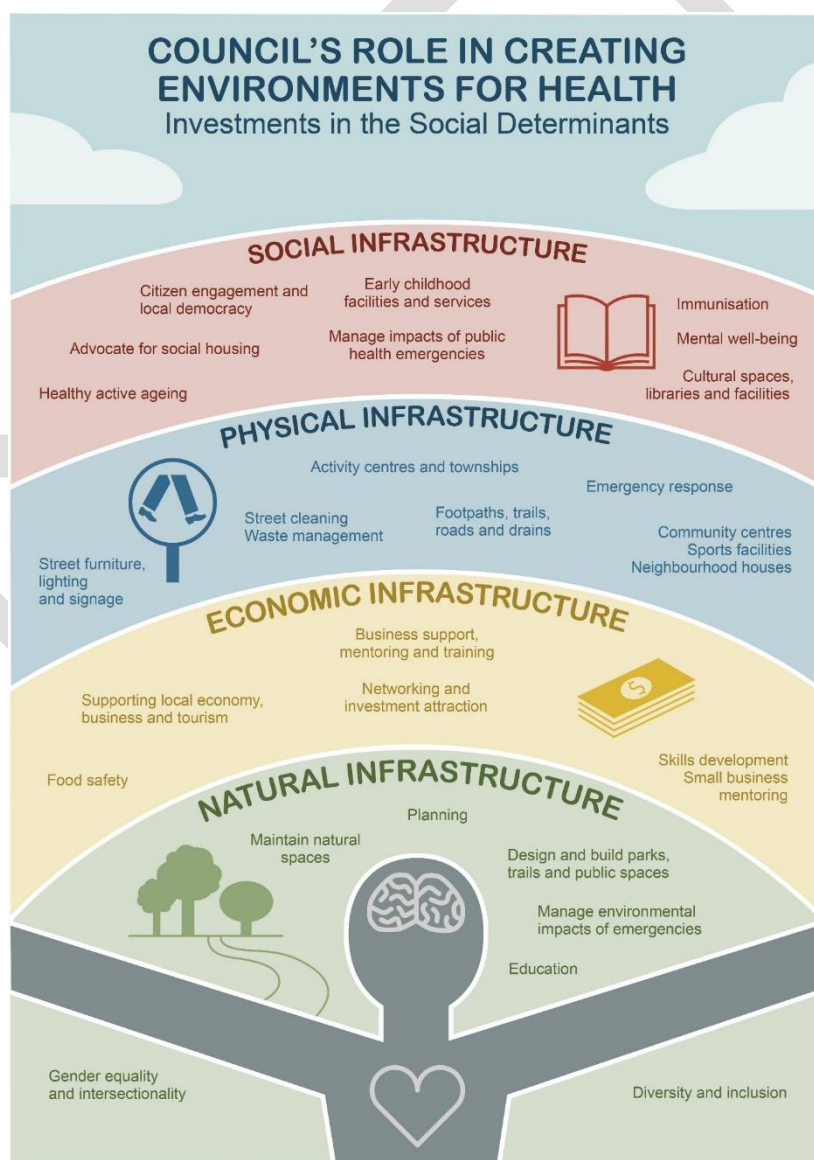
The social determinants of health are the conditions we are born into: the economic, social and environmental influences and opportunities. They are particularly relevant in Yarra Ranges given our diverse communities and places.

*‘...the single strongest predictor of our health and wellbeing is our position on the social gradient. Whether measured by income, education, place of residence or occupation, those people at the top of the gradient have the most power and resources, and on average live longer and healthier lives. Those people at the bottom have the least power and usually run at least twice the risk of serious illness and premature death as those near the top.’ (61)*

Housing, education, employment, services, social and community networks and the quality of natural and physical environments are all social determinants of health.



Source: Adapted from Dahlgren & Whitehead 1991



## **Housing**

Council acknowledged the centrality of secure and affordable housing for health and wellbeing in a set of *Guiding Principles for Housing and Homelessness* in 2020. Yarra Ranges is a partner with 12 other local Councils in a Charter Group formed to:

*'...advocate for more social housing and wrap around services for people experiencing homelessness and working in partnership with all levels of government to innovate to address housing needs.'*

Council is also a long-time member of the Eastern Affordable Housing Alliance which advocates for improved housing affordability in the eastern metropolitan region of Melbourne to respond to current and future housing needs.

Council recognises the impacts of the gap in housing affordability, particularly for people in the lowest income bracket of our community, due to a shortfall in social housing. This gap can have devastating impacts on people's lives, including children who experience homelessness or insecure housing. The pressures of housing stress are significant and include limited household funds for other vital needs: food, school costs, travel and utilities.

Data from homelessness services in Yarra Ranges, Anchor, Salvation Army, and Uniting, showed 2,638 people from Yarra Ranges presented for support in 2017-18. Of these 590 were homeless and 1,852 were at risk of homelessness. This contrasts with the last Census estimate of 360 people experiencing homelessness.

The impacts of homelessness and insecure housing affect women, men and gender diverse people differently. Women's risk of homelessness is worsened by family violence, income inequality, lack of financial independence and lack of affordable housing. Women on low incomes, older women, Aboriginal and Torres Strait Islander women, women without permanent residency, and women with disabilities are at particular risk. (8) LGBTIQ+ communities can experience homelessness and insecure housing due to breakdown of family relationships and discrimination. (9)

## **Child Safety**

The safety of children and young people is highlighted given the impact it has on many of the foundations for health and wellbeing. Council takes a zero-tolerance approach to child abuse and commits to the:

- safety, wellbeing and positive social outcomes of children and young people
- prevention of abuse and neglect to avoid devastating and life-long impacts on health.

Council has a range of measures in place to become a strong, child safe organisation. This Plan includes actions to protect the safety of children and young people in the priorities of mental wellbeing, preventing violence against women and children and alcohol, tobacco and other drugs.



## The Covid 19 pandemic

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This Plan was developed during the global public health emergency of Covid 19. Research on the health impacts of Covid 19 inform this Plan. The Plan includes how Council will work to support community recovery. Recovery work takes an asset (strengths) based community development approach wherever possible to tap into the skills, wisdom and resources of communities.

Some people in our community will continue to experience greater impacts of the pandemic or are at higher risk of longstanding negative impacts. The wellbeing of young people, people with disability and their carers, Indigenous community members, people from diverse cultural backgrounds, those experiencing homelessness and single parent families, may have been disproportionately affected by the pandemic. Council is committed to supporting community members who are more affected during recovery. The long-term impacts expected from the pandemic will be monitored over time to inform actions to support social recovery.

Many health priorities and existing areas of concern in Yarra Ranges have worsened due to the pandemic and the 2021 storm:

- mental health, mental wellbeing and social isolation
- rates of family violence
- employment and economic wellbeing
- homelessness and housing issues
- social inclusion, employment and educational outcomes for young people.

Research shows that women were disproportionately affected by the pandemic in a range of ways including:

- employment impacts with female dominated industries in Yarra Ranges disproportionately affected e.g. tourism, hospitality
- caring roles - women were primarily response for remote learning and caring for children, elderly, people with disabilities
- mental health - isolation and insecure work, home schooling affected mental wellbeing.

Family violence incidence is also a concern with increased risk and incidents for women during and following the emergency including limited options to seek support and more opportunities for coercive control. This included Elder Abuse. (10) (11) In the initial aftermath of the storm Council received requests for help from women experiencing family violence and this will need to be a focus of recovery efforts.

Economic wellbeing is a powerful determinant of health. Council's Economic Development and Investment team monitored businesses throughout the pandemic and storm event, and provided support and information to assist businesses to access grants and other supports. A new Economic Development and Investment Strategy will set a roadmap for the future, including how Council can support employment and thriving local businesses.



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# Our Vision for health and wellbeing

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The vision of the *2021-2025 Health and Wellbeing Plan* reflects where Council has responsibility, capability, roles and resources to improve health and wellbeing.

**Yarra Ranges has connected and healthy communities that are resilient, fair and inclusive. Our places are liveable and sustainable.**

The Plan is mostly about Council's work to improve health and wellbeing. This is both direct work and work in partnership with other agencies and communities. Seven health and wellbeing priorities are proposed. The draft priorities reflect the most significant preventable causes of poor health and wellbeing in Yarra Ranges, and confirmed by our community. Each priority has a goal articulating the future we hope to see.

The Council Health and Wellbeing Plan must align local health priorities with the *2019-2023 Victorian Health and Wellbeing Plan*. (6) The state Plan has 10 priorities and within this, four focus areas.

## State Priorities

- Reducing injury
- Preventing all forms of violence
- Decreasing the risk of drug resistant infections in the community
- Improving mental wellbeing
- Improving sexual and reproductive health
- Reducing harmful alcohol and drug use

## State Focus Areas

- Tackling climate change and its impact on health
- Increasing healthy eating
- Increasing active living
- Reducing tobacco-related harm

State priorities and those for Yarra Ranges closely align. Local health data and consideration of Council's role, responsibility and influence indicate there are six shared priorities. Council adds the health impacts of emergencies such as Covid 19 and storms, to this list. The State plan was developed pre-Covid 19.

## Local partnership to progress shared goals

Local community health organisations share priorities for improving health and wellbeing with Council. Collaborative planning by Council, Eastern Health Community Health, Inspiro and EACH has resulted in agreement to work on three draft priorities over the next four years:

- **Healthy Eating:** Increase consumption of healthy food and drink to enable better physical and mental health.
- **Physical Activity:** Increase physical activity and enable people to lead active lives.

To leverage previous collaborations in Yarra Ranges to reduce violence against women and children, these two priorities will also include a gender equity lens. Work in the priorities will help prevent women and their children from experiencing violence and discrimination and support our communities to practice healthy and respectful relationships, and live free from gender inequalities.

## **Approach to gender equity**

Council commits to implementing the legislated requirement to apply a gender impact assessment to all new and revised policies, programs and services. The Plan will apply this lens to ensure actions are gender equitable and inclusive and contribute to achieving Council's vision.

## **Advocacy priorities**

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In addition to the draft priorities of the Plan, there are other issues where Council will primarily take an advocacy role. These advocacy priorities point to important systemic issues, the social determinants, that affect health and wellbeing. Many are a longstanding focus for Council:

- increase access to mental health services, with a focus on young people
- increase social housing and reduce homelessness
- secure funding for an integrated Aboriginal community-controlled health service
- improve public transport, increase service access in outer areas of Yarra Ranges.

## **What you told us...**

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This Plan has been developed with engagement and consultation with community, our partners and across Council. Through a survey and other engagements, community members and local organisations confirmed the priorities and provided important insights into what assists in building healthy local people and communities. In a simple rating exercise, community members prioritised, mental health, preventing violence against women and the health impacts of emergencies as their highest concerns.

The health and wellbeing priorities of the Plan were previously validated in community engagements for the Liveable Climate Plan and the development of the 2021-2025 Council Plan, which told us people value social connections and inclusion, our natural environments and give high priority to recovery from the Covid 19 pandemic.








The 280+ people who completed a survey on the priorities of the Plan provided important insights on the 7 priorities. The response rate was a credible sample, noting that only 20% of respondents were male and over 40% were aged 50 and over. However, views on the priorities were mostly aligned. People who care for someone with a disability or older adult were well represented.

Young people were under-represented in the survey. Engagements with Council's youth action group and ambassadors will help fill this gap in the survey.

An overview of what community shared with us through the survey is available on Council's website.



# Health & wellbeing priorities 2021

PRIORITY HEALTH ISSUES		GOAL – the future we hope to see
	<b>1. Respond to public health impacts of emergencies</b>	Communities in Yarra Ranges recover from Covid 19 and other emergencies and restore social connections, mental and physical health and wellbeing, thriving local places and economies, and access to services and resources needed.
	<b>2. Tackle climate change and its impacts on health</b>	People and businesses in Yarra Ranges are resilient, prepared, and able to adapt and protect against the potential health impacts of climate change.
	<b>3. Increase healthy eating</b>	People in Yarra Ranges have the capacity to consume healthy food, built on a sustainable food system that provides access to healthy, affordable food for all.
	<b>4. Increase active living</b>	People in Yarra Ranges have capacity to walk and be physically active through accessible footpaths, trails, parks, play spaces and an inclusive culture that supports participation in all forms of physical activity.
	<b>5. Improve mental wellbeing and social connection</b>	People in Yarra Ranges have good mental wellbeing through strong community connections, family supports and ease of access to mental health services
	<b>6. Prevent violence against women and children</b>	Women and children in Yarra Ranges live free from abuse and violence through a culture of gender equity and respect.
	<b>7. Reduce harmful alcohol and drug use</b>	People in Yarra Ranges are safe from the harmful effects of alcohol and other drugs - particularly from alcohol and tobacco, through preventing uptake and support for safe alcohol use.



## Priority 1

### Respond to public health impacts of emergencies

Our goal for preparing and responding to the health impacts of emergencies:

Communities in Yarra Ranges recover from Covid 19 and other emergencies and restore:

- strong and sustainable social connections
- mental and physical health and wellbeing
- thriving local places and economies
- access to the services and resources needed.

This section outlines: why this is a health and wellbeing priority, the data for Yarra Ranges, what a gender and intersectionality lens reveal, our approach to improve health and wellbeing, and our priority actions. A detailed action plan is included at Appendix 1.

#### **Why responding to the health impacts of emergencies is a priority**

Public health emergencies in Yarra Ranges can include: pandemics; bushfires; storms, flooding; infectious disease outbreaks and toxic chemical spills.

This plan will provide guidance to:

- support recovery from the Covid 19 pandemic
- prepare for public health emergencies
- respond to and provide relief in public health emergencies
- support community led recovery in new emergencies such as bushfire and flood.

Council has a legislated role to respond to emergencies and assist community led recovery. It has other roles directed by the State in relief operations depending on the kind of emergency.

Council's work is informed by past emergencies and best practice principles. Social and economic recovery from the universal impacts of Covid 19 and the devastating and concurrent 2021 June storms, will be a focus for the coming years. This priority is closely connected with the impacts of climate change on health (Priority 2).



## Public health emergencies in Yarra Ranges

Covid 19 impacted Yarra Ranges residents and businesses, including in most of the health and wellbeing priorities of the Plan. During 2020-21, Council undertook community surveys to track and understand the impacts of Covid 19 to continually reassess the needs of residents and inform actions. Information from the surveys inform this Plan. Council will continue to monitor the impact of the pandemic through surveys to be conducted in the next few years.



On top of the effects of Covid 19, the June 2021 storm event caused widespread destruction of homes and environments. It required concurrent responses to a lockdown and storm impacts, to support communities across Yarra Ranges.

Council has a role in relief and response in partnership with government agencies. It has a central role in recovery.

The impacts of the storm will require immediate, medium, and long-term action and the recovery plan for Covid 19 will be adapted to include the storm impacts.

During 2020, Council mobilised programs and activities to support communities:

- supported information for businesses and communities including a *Be Kind* campaign and *Buy Local* for the 2020 festive season
- offered grant funding to not-for-profit community groups, artists and organisations to respond to relief and recovery needs
- establishing Community Recovery Committees (area-based) to facilitate community led recovery
- offered mental Health First Aid courses for community leaders, volunteers and sports clubs
- funded the emergency relief network to increase coordination, strengthen governance, assist with increased demand during and after lockdowns and re-engage volunteers
- advocated to other levels of government: air quality monitors for Healesville and Warburton, employment impacts of Covid 19 and homelessness through regional advocacy
- made over 18,500 outreach calls to older residents, volunteers, U3As and seniors' groups during the pandemic to check on their welfare and distributed 24,000 newsletters

- ensured Council's Meals on Wheels program was maintained by redeploying Council staff. Provide alternate activities for older adults during lockdown
- adapted events to online e.g. Reconciliation Week and International Day for People with Disability forums went online, increasing participation. Creative Communities activities and workshops were offered online.

### **Gender equity and intersectionality impacts**

During times of emergency, such as Covid-19, people are more likely to take up traditional gender roles and gender inequalities may increase. There can be disproportionate impacts of the emergency on different genders. This was seen during Covid 19 with women in Victoria spending the most time helping children (72% of women) and women aged 18-24 experiencing significant job loss during the first lockdown (26% compared to 11% of men). (11) More than a quarter (26%) of women aged 18-24 lost their job during the first lockdown, compared to 11% of young men.

Local engagement has shown some carers of people with disability have experienced greater isolation and caring load during Covid 19. Older carers with limited access to the internet and living in our rural areas were particularly affected. Access to services and supports for people with disability and carers were affected by Covid 19. Disability services pivoted quickly to offer Covid Safe supports.

Anecdotal information indicated that during the Covid 19 pandemic, young people, women with disability and carers were particularly affected by the social isolation caused by lockdowns and other restrictions. This was also the case for people with disability and those who care for them. Older carers were also affected by difficulties accessing supports or lower confidence in using technology.

### **Our approach**

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Covid 19 was a disaster like no other and affected everyone. Best practice principles for community led recovery apply to the Covid 19 pandemic:

- understand community context where each community has its own history, values and dynamics
- respond to the complex and dynamic nature of emergencies and the affected community
- apply community-centred, responsive, flexible approaches, engaging with community and supporting their futures
- take a planned, coordinated and adaptive approach between community and agencies.
- continuous assessment of impacts and needs
- ensure effective communication between affected communities and other partners
- recognise, support and build on individual, community and organisational capacity and resilience
- apply gender equitable and inclusive responses that recognise that women, men and gender diverse people will have experienced the pandemic in different ways

- understand diversity, Indigenous people, people from culturally diverse backgrounds and people with disabilities are also likely to have different experiences that need to be well understood.

Community recovery can include:

- advocacy to all levels of government to meet local needs
- Council delivering community support and other services and facilities
- enabling and supporting partners and promoting the work of others
- connecting community with other services and resources.

Through its role in planning and preparedness for public health emergencies and co-ordinating recovery, Council is well placed to connect and work with affected communities. It is paramount that Council considers the needs of those people who are *most* affected in our community and applies a gender lens to understand the nuances of how emergencies affect people of different gender identities in different ways.

Community involvement in recovery will strengthen resilience. Communities are best placed to identify priority areas for recovery and lead or support programs and activities to address these priorities.

Building strong and sustainable social connections is instrumental in responding to public health emergencies such as the Covid 19 pandemic and the 2021 storm event. The Priority to improving mental wellbeing and social connection lists what we aim to achieve and our top actions to improve mental wellbeing, which will be critical to recovery.

### **Community survey**

85% of people completing a survey in mid-2021 nominated responding to the health impacts of emergencies as the top priority. This comment reflects these views:

*“The Council has a crucial role in emergencies as they know so much about the local area in terms of access and safe routes and resources to assist with response. They have strong partnerships with business, health providers, clubs, community to bring together the correct groups to enact and coordinate responses.” Survey 2021*

### **Priority actions areas**

To attain our goal in responding to the public health emergencies, we aim to achieve:

- strong and sustainable social connections
- thriving local places and economies
- accessible services and resources needed by communities.
- local amenity is protected by resilient infrastructure
- services and resources needed by communities in emergencies are easy to find and use.

Based on the principles and approaches of the plan described in Appendix 3, the Action Plan to progress these achievements lists the:

- priority action areas for Council in partnership with others
- sections of Council that are responsible, and our external partners
- measures of success and related Council plans.

Actions and projects to achieve the goal of each Priority often intersect. Work in one area being mutually reinforcing of the goals in other areas. Actions for public health emergencies may reflect work and co-benefits in other Priorities of the Plan, particularly:

- tackle climate change and its impacts on health (Priority 2)
- improve mental wellbeing and social connections (Priority 5)
- prevent violence against women and children (Priority 6).

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## Priority 2

### Tackle climate change and its impacts on health

Our goal for tackling climate change and its impacts on health:

People and businesses in Yarra Ranges are resilient, prepared, and able to adapt and protect against the potential health impacts of climate change.

This section outlines why this is a health and wellbeing priority, the data for Yarra Ranges, what a gender and intersectionality lens reveal, our approach to improve health and wellbeing, and our priority actions. A detailed action plan is included at Appendix 1.

#### Why climate change is a health priority

*‘Climate change as the defining issue for public health in the 21st century. It is an urgent challenge, with implications at the global, national and community levels.’*

*‘Our lives depend on a healthy planet’*

*World Health Organization 2016 (12)*

Local government is identified in the Climate Change Act 2017 as a decision maker which must consider climate change when preparing this Plan. Tackling climate change and its impact on health is one of four priorities identified as a focus in *the Victorian Public Health and Wellbeing Plan 2019-2023*. (5) The *Victorian Public Health and Wellbeing Outcomes Framework* includes the outcome that Victorians belong to resilient and liveable communities, indicated by increased adaptation to the impacts of climate change. (13)

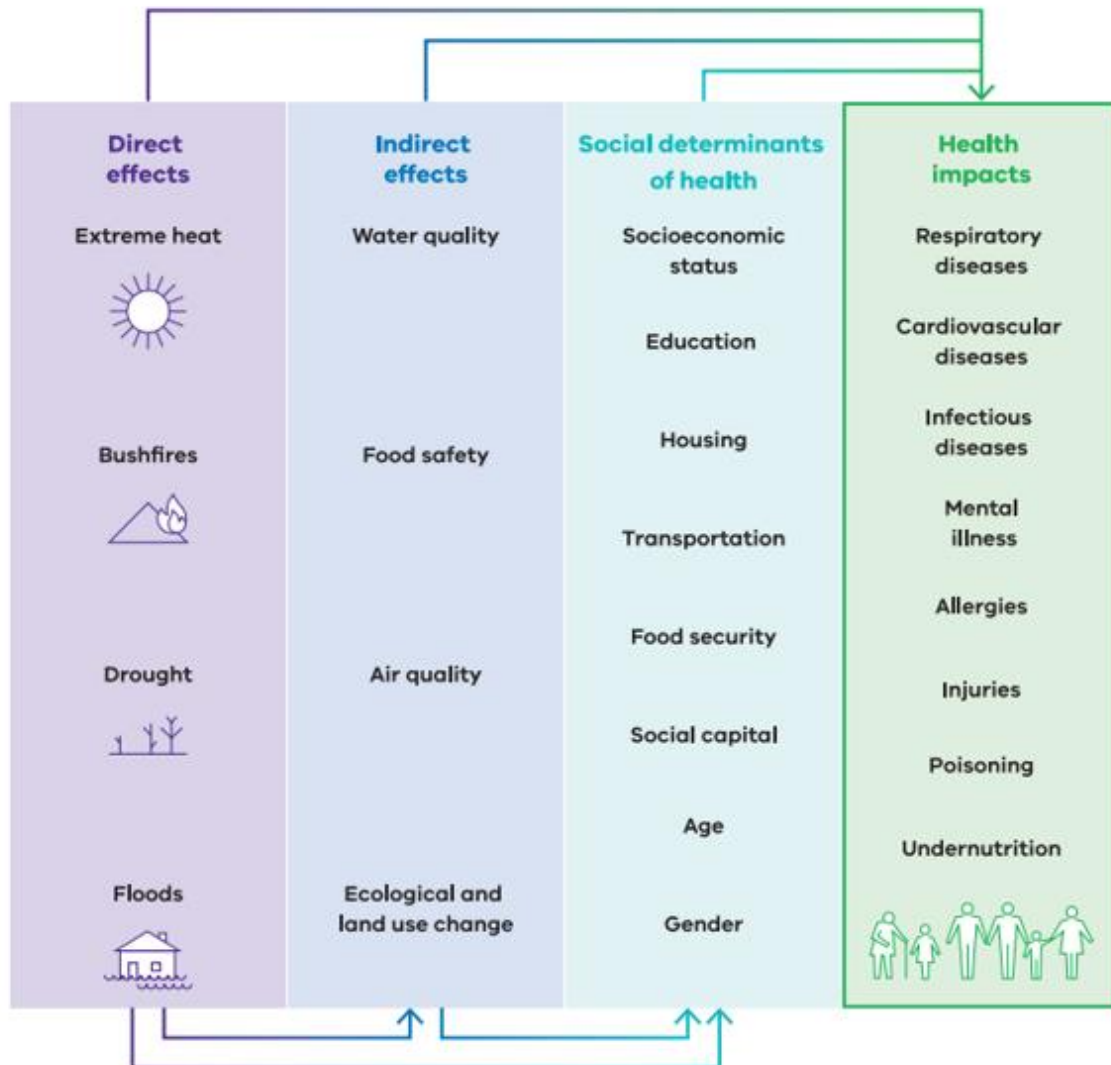
#### Climate change, health, and the determinants of health

*‘Health of humankind is intricately connected to the health of the overall environment and with other living beings.’*

*United Nations Climate Change 2017 (14)*

Climate change is expected to directly cause increased intensity and frequency of extreme weather events, such as prolonged heatwaves, floods and bushfires. Indirectly, climate change will cause worsening air quality; risks to food safety and drinking water quality; and ecological and land use change, as represented below from the Lancet Commission of Climate and Health. (15)

The direct health impacts of climate change are predicted to include deaths, injuries and ill-health due to increases in respiratory diseases, cardiovascular diseases, infectious diseases, mental health issues, allergies, injuries, poisoning, dehydration and malnutrition.



Source: Adapted from Lancet Commission of Climate and Health (15)

In addition, climate change is expected to indirectly impact the major determinants of health, including socio-economic status, education, housing, transport, food security, social capital and social connections. People will also suffer different levels of impact depending on many of these factors e.g. income, housing security they experience and depending on individual factors such as age, gender, disability and Indigenous status.

### Climate change in Victoria and Yarra Ranges

Victoria's climate has become hotter and drier over the past few decades. Over the next thirty years, climate change is forecast to lead to increased average temperatures, high-heat days, high fire danger days and sea levels. In addition, climate is expected to lead to reduced snowfall, but more intense rainfall.



These changes then lead to increased intensity and numbers of extreme weather events such as heatwaves, bushfires, storms, drought and floods. Indirectly these events may impact water quality, food safety, air quality, land use, the ecological system and biodiversity.

The 2021 storm event caused widespread power outages and damage to property from trees down. It affected access to water, safe food storage and sewerage systems in many areas. Road access was blocked and the ability to stay warm and get adequate nutrition was diminished. Education and employment were severely affected and a reliance on technology showed a lack of resilience, particularly in communications systems.

A particularly severe heatwave in the summer of 2003 resulted in more than 70,000 excess deaths across Western Europe. Health systems were unprepared and quickly overwhelmed. (15) In 2009 Victorian experienced a heatwave which led to the Black Saturday fires and directly affected communities in Yarra Ranges. As a direct result of the heatwave in the lead-up to the fires, 374 Victorians died through causes such as heat stroke and heart attacks.

### **Gender equity and intersectionality impacts**

Climate-related disasters can lead to existing gender inequalities worsening, greater adherence to gender roles and stereotypes and increased risk of family violence. It is internationally recognised that gender must be central to efforts to adapt and build resilience, to counter the impact of climate change.

Women are disproportionately affected by the impacts of climate change. Globally, women and children are significantly more likely than men to die during climate-related disasters, and they comprise up to 80 percent of those displaced by natural disasters.

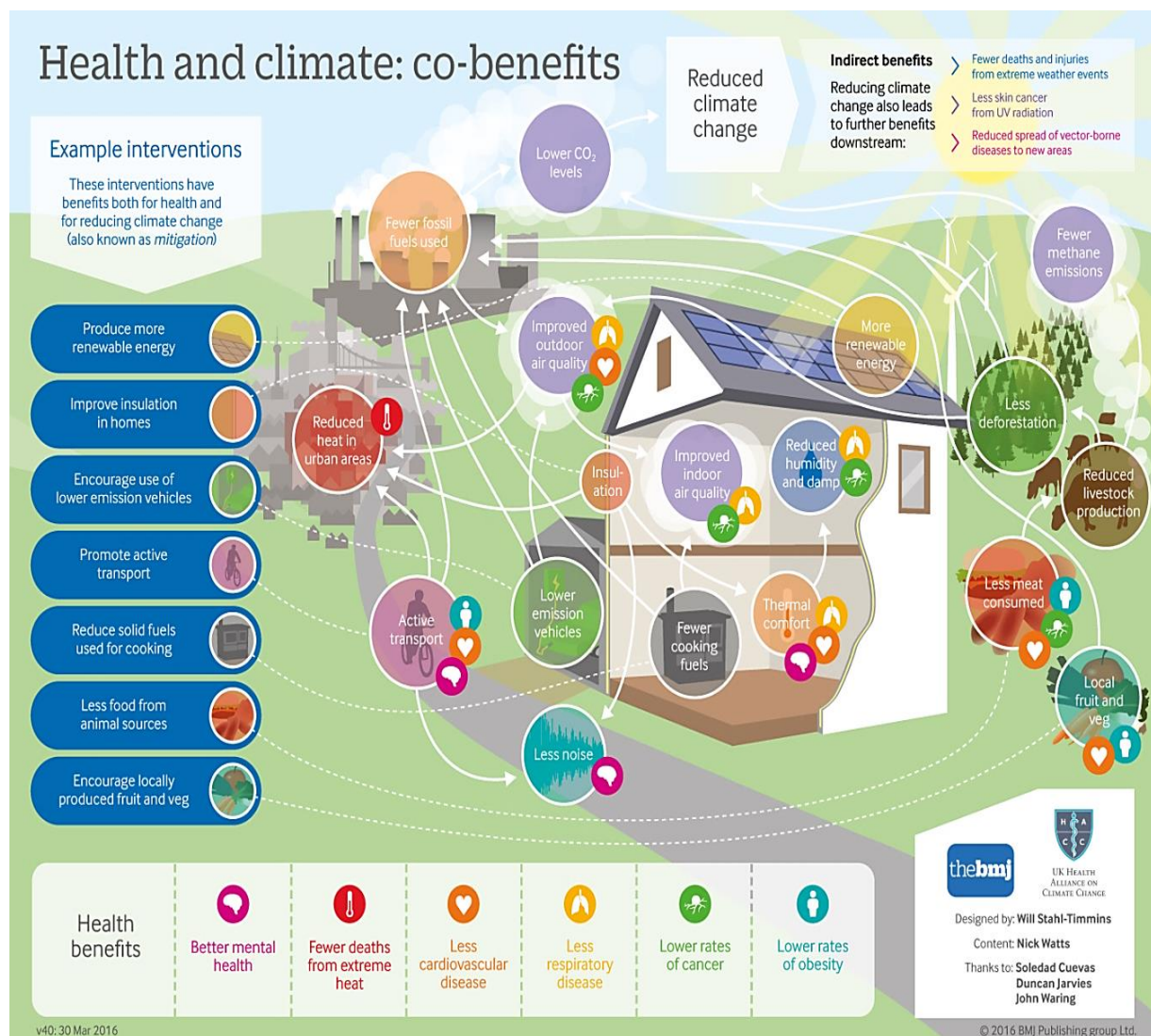
### **Our approach**

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To tackle climate change and its impacts on health, the Victorian Government wants to achieve:

- resilient and safe communities that are adapting to the public health impacts of climate change
- decreased health impacts associated with climate change for example, fewer deaths from extreme heat events, fewer mosquito-borne diseases, fewer food outbreaks, fewer algal blooms in drinking water catchments
- increased action to reduce greenhouse gas emissions and realise health co-benefits. (5)

Reducing climate change has considerable health co-benefits (see diagram below). (16) Actions by Council to mitigate and adapt to climate change will reduce negative impacts on our environment and promote physical health and wellbeing.



Source: (16)

During recent incidents relating to climate change in Victoria, the main loss of life has occurred through extreme weather events leading to bushfires, storms and floods; and high heat days causing heat stress amongst residents. (17) Interventions by Councils that could reduce illness and deaths from heatwaves include to:

- increase community awareness of projected impacts, frequency and intensity of: bushfires, storms, floods and heatwaves on health and preventing impacts
- implement urban greening and cooling strategies
- encourage leadership in local development through low carbon and climate-adapted neighbourhoods
- support programs that improve energy efficiency and thermal comfort, maintain safe indoor temperatures and reduce bill stress including for older people and those more affected
- ensure emergency management plans and strategies consider projected changes in climate and climate-related health risks
- plan for and invest in cooler and cleaner air spaces to provide community respite
- link Council service users into appropriate services e.g. the hardship schemes for utility retailers

- monitor water quality and foodborne disease outbreaks during heatwaves (Environmental Health teams).

Council has already acted to incorporate climate change into health planning. The impact of climate change on the community is on the agenda through:

- declaring a Climate Emergency
- developing a Liveable Climate Action Plan
- identifying climate change as a key health and wellbeing priority

Partnerships identify how Council and the community can work together to support a healthy sustainable food system, a priority linked to both health and climate change, and with clear health co-benefits.

### Community Survey

Young people (9% of survey) rated tackling the climate change impacts on health higher than other age groups. 75% of survey respondents rated this priority as important or extremely important. Women placed more importance on this priority (80% of women, 73% of men). Just two of the many comments follow:

*“I believe it is the most important issue of our time and the Council has an opportunity to be a leader in this space.”*

*“Shade trees in paved community spaces will help stop heat radiating off the paving.”*

### Priority action areas

To attain our goal in tackling climate change and its impacts on health, we aim to achieve:

- healthy and resilient country in face of climate change
- creation of places of respite for those who most need them during extreme weather
- increased community awareness of the health impacts of climate change and increased capacity to prevent them.

Based on the principles and approaches of the plan described earlier, the Action Plan towards our goal lists the:

- priority action areas for Council in partnership with others
- sections of Council that are responsible, and our partners
- measures of success and related Council plans.

### Mutually reinforcing work across Goals

Actions on climate change and health may reflect work and co-benefits in other Priorities, particularly:

- respond to health impacts of emergencies (Priority 1)
- improve mental wellbeing and social connections (Priority 5)
- prevent violence against women and children (Priority 6).

While this Plan is focused on adapting to and preventing the health impacts of climate change, action to mitigate climate change is essential to reducing the direct and indirect health impacts. Council's work on climate change mitigation is captured in its *2020 Liveable Climate Action Plan*.

A focus on supporting community adaptation is also needed because a certain amount of climate change is now inevitable due to for example population growth and increased emissions. Action needs to include:

- continued emphasis on understanding and assessing the risks of climate change to public health
- promoting community adaptation and preparedness for the public health risks associated with climate change
- assessing the health co-benefits of measures to reduce greenhouse gas emissions.



## Priority 3

### Increase healthy eating

Our goal to increase healthy eating:

People have the capacity to consume healthy food, which is built on a sustainable food system that provides access to healthy, affordable food for all.

This section outlines: why this is a health and wellbeing priority, the data for Yarra Ranges, what a gender and intersectionality lens tell us, our approach to improve health and wellbeing, and our priority actions. A detailed action plan is included in Appendix 1.

#### Why healthy eating is a priority

Increasing healthy eating is one of four priorities identified as a focus in the *Victorian Public Health and Wellbeing Plan 2019-2023*. (5) This has been a priority of previous Council plans because of the significant relationship between nutrition and health. The *Victorian Public Health and Wellbeing Outcomes Framework* includes the outcome that Victorians act to protect and promote health indicated by an increase in healthy eating and active living. (13)

Healthy eating is central to good health and wellbeing. Diet is arguably the single most important behavioural risk factor that can be improved to have a significant impact on health. (18)

What we eat and the food environment changed substantially over the past three decades. This shift has contributed to chronic diseases such as cardiovascular disease, type 2 diabetes and some cancers. Two-thirds (68%) of Victorian adults are overweight or obese (19) - applied to Yarra Ranges is an estimated 90,000 adults.

*‘Food consumption and production disproportionately affect human health and environmental sustainability; food is the single strongest lever in optimising health for humans and the environment.’*

*EAT-Lancet Commission (20)*

#### Achieving health and wellbeing – nurturing and celebrating all bodies

Unhealthy weight is a complex and global population health reality. Not including enough high nutrition foods contributes substantially to weight gain. Around the world, obesity has risen among children and adults in recent decades. This rise is

leading to significant consequences for the health of the affected individuals, along with an increasing burden on health services, social support and economic productivity. Being underweight contributes to a weakened immune system, fragile bones and fatigue.

For many decades health policy and clinical practice have been based on weight-centred principles. This coupled with our objectifying body culture brings much confusion and distress about weight and shape issues across communities, particularly for women and girls. Focusing on weight and weight loss can lead to:

- weight stigma
- poor body image
- exercise avoidance
- unhealthy dieting and eating behaviours
- a range of mental health issues including eating disorders
- substance abuse
- weight cycling and/or weight gain. (21)

People with positive body image appreciate their bodies primarily for what they can do, their functionality and their health. They are more likely to engage in regular pleasurable activity and have a flexible approach to exercise, food and eating. Having positive body image means an individual is more likely to listen to their body in relation to what and how much to eat, eat foods that are healthy, and help their bodies to perform well.

### **Social determinants of healthy eating**

Social determinants are highly influential in an individual's choice of food, especially:

- economic determinants such as cost and income
- physical determinants such as access, education, skills and time
- socio-cultural determinants such as culture, and social context. (22)

### **Healthy eating and food security in Yarra Ranges**

Many Yarra Ranges adults, as for all of Victoria, do not consume enough of the foods and drinks required to keep them healthy e.g. fruit and vegetables, wholegrain foods and water. Many consume too many discretionary and processed foods and drinks, often high in saturated fat, sugar, salt or alcohol. More than half (58%) of Australians' food spending is on discretionary food and drinks, such as fast food and sugary soft drinks. Vulnerable populations are more at risk of unhealthy eating patterns, particularly those living in disadvantaged areas, and Indigenous residents. (23)

In 2017, of Yarra Ranges adults: (4)

- 10% had been affected by food insecurity in the past 12 months. In 2014, 16% of adults in Yarra Ranges worried about food insecurity with hunger, the highest in the EMR; 11% of parents relied on low-cost food to avert food insecurity
- 15% consumed sugar sweetened drinks daily, compared to 10% across Victoria.



- Often consumed takeaway and other processed foods in place of fresh fruit and vegetables - 16% of adult residents having take-away meals or snacks more than once each week
- only 4% of adults ate enough fruit and vegetables, with 6% meeting the vegetable consumption guidelines. Most residents ate less than half the recommended level of vegetables per day.



While Yarra Ranges generally has access to high quality food, the cost of healthy food and public transport access remain issues for a proportion of the community. (24) New data will be available later in 2021 and will be reviewed with an eye to impacts of Covid 19.

### **Healthy eating during Covid 19 pandemic**

The Covid 19 pandemic exacerbated unhealthy eating and food insecurity. Yarra Ranges Council surveyed residents during lockdown. Healthy eating was one of the main concerns. Nearly 20% of parents and carers of children and teenagers had contacted food relief services during lockdown. (26)

Local challenges to healthy eating during the pandemic were reflected across Victoria and Australia. One in five Australians experienced problems maintaining a healthy lifestyle due to Covid 19. (10) They consumed more unhealthy snacks, more takeaway and delivered foods and more alcohol.

For Victorian adults during Covid 19 lockdown: (11)

- sugary drink consumption more than tripled, with nearly one-third of respondents living in the metro/rural interface having sugary drinks every day
- food insecurity nearly doubled – 7% of respondents ran out of food and could not afford to buy more. Indigenous residents had higher food insecurity
- metro/rural interface areas had the lowest vegetable consumption - only 4% of respondents were eating enough (8% across Victoria); 29% were likely to rely on low-cost unhealthy food due to financial issues; 7% went without meals; 9% used food relief agencies; 17% worried about having enough money to buy food; and 11% skipped meals to feed their households<sup>1</sup>
- young people aged 18-24 and adults aged 25-34 years had much higher food insecurity than older adults.

<sup>1</sup> The regional groupings are Inner Metropolitan, Middle Metropolitan, Outer Metropolitan and Interface.

## Our approach

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To achieve the benefits of healthier eating, the Victorian Government wants to:

### **Increase**

- access to healthier food and drinks,
- capacity to breastfeed, and prepare and consume healthier foods and drinks
- capacity to not consume discretionary food and drinks
- socio-cultural norms reinforcing healthier eating, drinking and breastfeeding
- purchase of healthier food and drinks and decrease purchase of discretionary food and drinks.

### **Decrease**

- access to discretionary foods and drinks
- sodium, saturated fat and added sugar, and increase fruit, vegetables, wholegrains and dairy/alternatives in processed and ready-to-eat foods
- the quantity of discretionary food and drinks served eating out and at home
- exposure to marketing of discretionary foods and drinks and increase exposure to marketing of healthier food and drinks. (5)

## **The Food System**

A sustainable food system delivers food security and nutrition for all in such a way that the economic, social and environmental pillars to generate food security and nutrition for future generations, are not compromised. This means that it:

- is profitable throughout (economic sustainability)
- has broad-based benefits for society (social sustainability)
- has a positive or neutral impact on the natural environment (environmental sustainability).

Increasing healthy eating in Yarra Ranges is dependent on the food system. Council, all levels of government, communities, businesses and the individual all have a role in establishing and maintaining a system to support healthy eating, as in the diagram on the following page. (27)

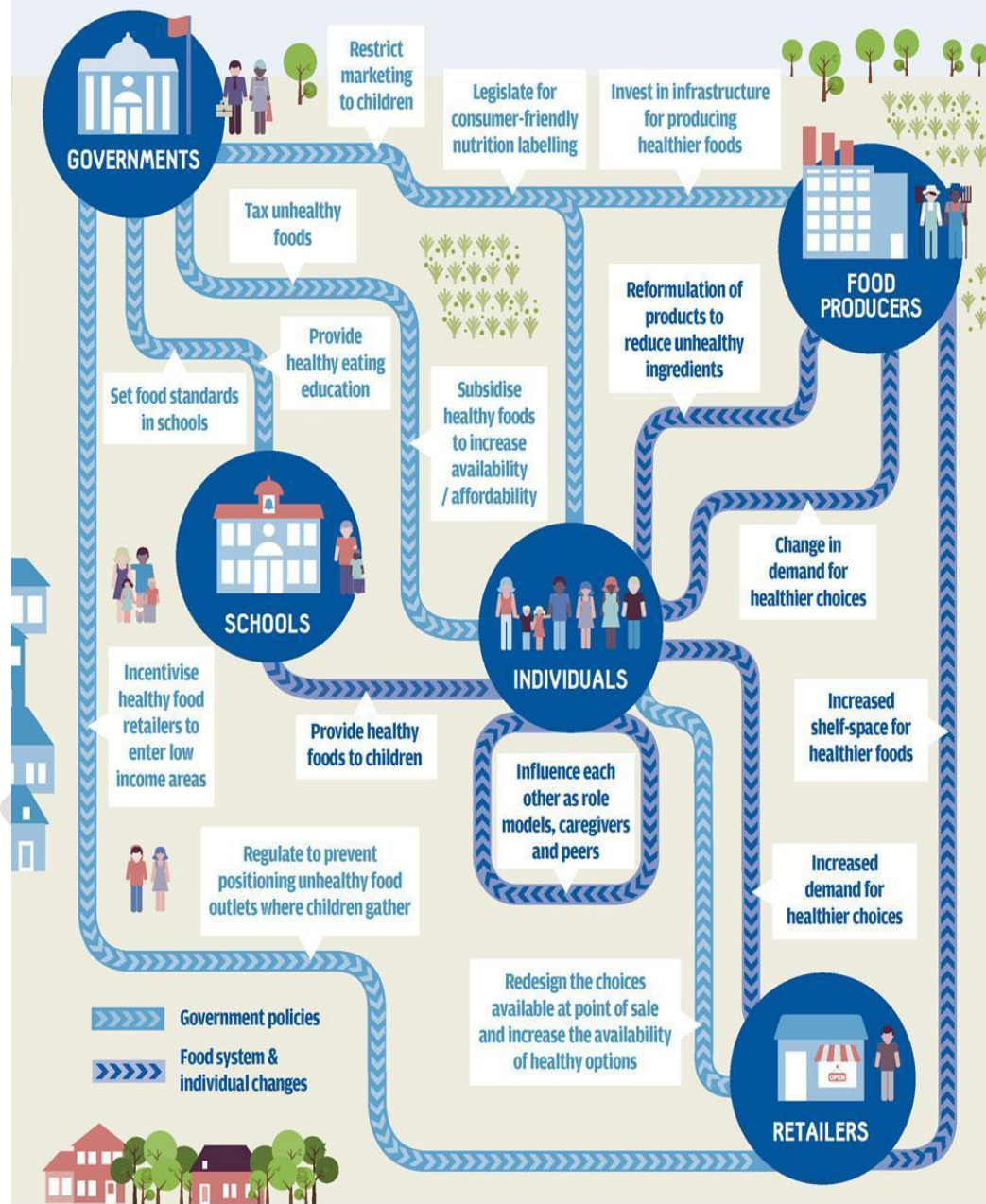
Local Councils are uniquely positioned to address health issues by increasing access to healthy, sustainable and affordable food for all community groups including vulnerable populations at risk of food insecurity.

## **Inclusive approaches**

Council supports taking a weight inclusive approach. Building on positive strategies in place, partner led programs will focus on prevention and early intervention of eating disorders and weight stigma and the promotion of positive body image across all sectors of our community. Weight inclusive aims backed by research include: creating environments where people with bodies of all shapes and sizes thrive, and where access to and motivations for health enhancing behaviours are nurtured through self-acceptance, care and compassion rather than shame, fear and guilt.

# HOW CAN GOVERNMENTS SUPPORT HEALTHY FOOD PREFERENCES?

The food system is an interconnected network of producers, industry, and institutions. But at its heart is the individual. Policy can affect all parts of the network, influencing a cultural shift towards healthier food preferences.



For further information on the obesity series or to read the full report, visit [www.thelancet.com/series/obesity-2015](http://www.thelancet.com/series/obesity-2015)  
 Source: Hawkes C, Smith TG, Jewell J, et al. Smart food policies for obesity prevention. Lancet 2015; published online Feb 19.  
[http://dx.doi.org/10.1016/S0140-6736\(14\)61745-1](http://dx.doi.org/10.1016/S0140-6736(14)61745-1)

THE LANCET

Source: (27)

## Community Survey

While healthy eating had the lowest level of prioritisation by community members completing the survey, support was still high with nearly 75% of respondents rating this priority as extremely or very important. Increasing healthy eating was most important to people aged 65-74.

## Comments

*“During and after last year 2020, fresh fruits & veggies are more expensive than meats and junk foods!”*

*“I see a lot of potential in partnering ... to provide educational opportunities for community members to learn how to cook healthier meals.”*

## Priority action areas to increase healthy eating

To attain our goal of increasing healthier eating, we aim to achieve:

- a healthy, sustainable food system with healthy food available to all in Yarra Ranges
- community led action on healthy eating supported by Council grants
- collaborative approaches to nutrition that increase access to healthy and affordable food
- community gardens that thrive as places that build skills in growing and preparing food
- community members able to access healthy and affordable food from a range of sources
- girls and boys with the skills to prepare and enjoy healthy food
- a community that nurtures and celebrates all bodies and reduces stigma
- Council contracted services and catering policy that advance healthy eating through clear standards and expectations.

Based on the principles and approaches of the plan the Actions to progress these achievements lists the:

- priority action areas for Council in partnership with others
- sections of Council that are responsible, our partners
- measures of success and related Council plans.

## Mutually reinforcing work across goals

Actions to increase healthy eating may reflect work and co-benefits in other Priorities of the Plan, particularly:

- increase active living (Priority 4)
- improve mental wellbeing and social connections (Priority 5).



Council is a partner in the Healthy Active Living Group, which is currently focusing on developing a plan to improve the resilience and sustainability of the food system in Yarra Ranges, with a focus on access to healthy and sustainable food.

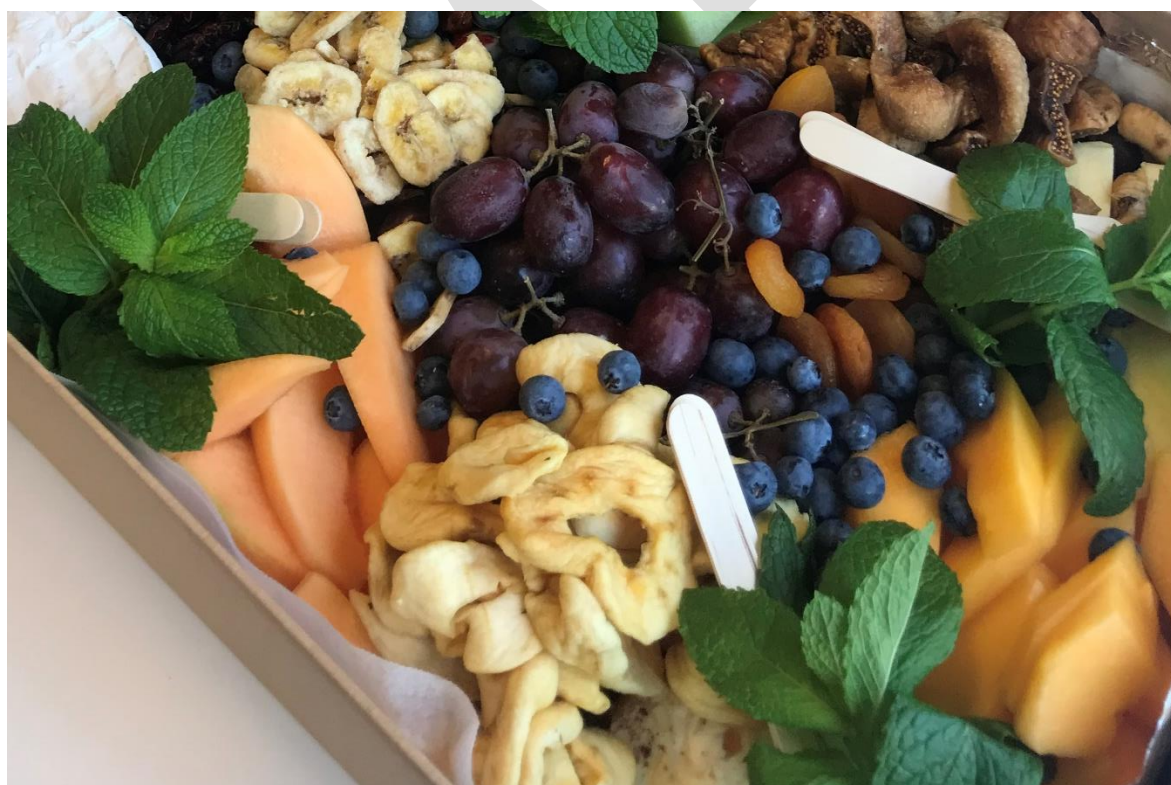
## Partnerships

Recent work of the Healthy Active Living Group has focused on engaging with the community and stakeholders. This engagement aims to:

- understand community and stakeholder priorities, including gendered differences
- widen the range of stakeholders involved in the project
- increase awareness of the work being done on food systems and map existing work
- identify key strategic and research priorities for 2022-2025.

By the end of 2021, a report on the engagement findings will inform an action plan for 2022-2025.

Council is a member of the SUSTAIN food system network which supports collaboration with other local governments; and collates research on food systems and plans in other regions and examines best practice for food systems planning.





## Priority 4

### Increase active living

Our goal to increase active living:

People in Yarra Ranges have the capacity to walk and be physically active through accessible footpaths, trails, parks and play spaces, and an inclusive culture that supports participation by as many people as possible in all forms of physical activity.

This section outlines: why this is a health and wellbeing priority, the data for Yarra Ranges, what a gender and intersectionality lens tell us, our approach to improve health and wellbeing, and our priority actions. A detailed action plan is at Appendix 1.

#### Why active living is a priority

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Increasing active living is one of four priorities identified as a focus in the *Victorian Public Health and Wellbeing Plan 2019-2023* and was a priority in the previous Council Plan. The *Victorian Public Health and Wellbeing Outcomes Framework* includes the outcome that Victorians act to protect and promote health indicated by an increase in healthy eating and active living. (13)

Leading an active life improves people's health and wellbeing. Moving more and sitting less, reduces the risk of ill-health and death. Regular physical activity can help prevent and treat diseases such as heart disease, stroke, some cancers, diabetes, osteoporosis, dementia, musculoskeletal conditions and depression.

Being physically active in combination with having a healthy diet helps to reduce the prevalence of other health risk factors, such as high blood pressure and high blood cholesterol, and can help maintain a healthy weight. Incorporating physical activity into daily living is also associated with improved mental health, ageing well and increased levels of happiness.

#### How does active living help our communities?

Active communities experience other benefits. Higher levels of physical activity are associated with better academic performance throughout early childhood and school, and with increased workplace productivity.

Neighbourhoods which are designed to encourage walking, cycling and use of public transport promote positive social connections and feelings of safety and belonging; support local business activity; and reduce environmental impacts from car



emissions and traffic congestion. Car emissions contribute to climate change; increasing the number of trips made using sustainable transport modes is therefore important to mitigating climate change.

Sport and active recreation play an important role in the social and cultural life of Victorians. They can help to challenge and shift socio-cultural norms, and to reduce inequalities and discrimination within communities. Sport and active recreation also deliver substantial economic benefits. Sport and recreation environments can also be places to challenge attitudes and behaviours that excuse or support disrespect, gender inequality and violence against women. (28)

### **Social determinants of active living**

The quality of the built environment is a major determinant of physical activity. The built environment can either enable, or be a barrier to, active living. Neighbourhoods where residents can walk to local services such as schools, sport and recreation facilities, public transport and destinations near people's homes, can encourage higher levels of physical activity.

Characteristics of the built environment supporting health and wellbeing, particularly active living, include, distances to playgrounds, daily living destinations, public open spaces and parks, and street connectivity.

### **Active living in Yarra Ranges**

In 2017 in Yarra Ranges, 58% of adults did enough physical activity to support good health. (4) This is greater than the 51% for all of Victoria. Location, Indigenous status, socio-economic advantage, disability and gender all affect levels of activity. Physical activity is significantly lower amongst people living in Australia's most disadvantaged areas.

The level of residents with *insufficient* physical activity dropped from 55.5% in 2014 to 38% in 2017. This met the state government's target of a 10% increase in the level of adults with sufficient physical activity. More people have active occupations in Yarra Ranges, with residents less likely to sit for 7 or more hours per day at work. Walking is the most popular physical activity of adults in Australia.

### **Active living during the Covid 19 pandemic**

A Council survey in September 2020 highlighted impacts of the pandemic. (26) Reduced physical activity and lack of access to usual physical exercise opportunities negatively affected wellbeing. The loss of sport and other exercise such as gyms, also exacerbated social isolation.

A VicHealth survey in May 2020 found that 37% of respondents were doing less physical activity during lockdown. (11) Physical activity varied substantially by area. Only 29% of residents in interface areas were exercising five or more days per week.

Building access to quality public places, walking paths and trails and lighting for use in future lockdowns and restrictions due to public health emergencies such as the

Covid 19 pandemic, is an effective way to support residents to maintain active living and support the co-benefit of mental wellbeing.

### **Gender equity and intersectionality impacts**

In 2017, men and women had similar levels of physical activity. (4) There is no information on physical activity levels for people in Yarra Ranges of other socio-demographic groups. For adults in Victoria in 2018 getting sufficient physical activity was higher for employed adults and those on higher incomes. (25) Further details are provided in Appendix 3.

Although many women and girls participate in recreational and structured sports activities, a lot remains to be done in the sphere of gender equality. (30) Many women are today still unable to find the right environment in which to develop their full potential. Many factors, external to sport, can affect women's levels of participation. These include gender stereotypes about where and how women can be active, the situation at home and the role of physical education at school.

Many factors are at play within the sport sector which can hamper the participation of women, for instance a lack of coaches able to create a gender friendly and safe sport environment and low interest from decision making boards often dominated by men, for sustainable gender equality policies that lead to real changes.



## Spotlight on women in sport & physical activity in Yarra Ranges

A survey of residents provided the following local insights into participation.

**Unstructured activities** - women and girls engage more in unstructured activity than structured sports compared to males:

- walking is the most popular activity - females 96% vs 55% males
- bushwalking and trail running - 73% females vs 47% males
- swimming - 49% females vs 25% males
- fitness/gym - 48% females vs 26% males.

**Top 5 activities** in our open spaces:

- walking or running
- sitting and relaxing
- meeting up with friends
- walking the dog
- having a picnic.

### Motivators

- positive social aspects of physical activity
- caregiving responsibilities as the main reasons for visiting parks and open spaces is to spend time with family
- paths are accessible for prams, good seating areas, public toilets.

### Barriers

- Top five barriers
  - footpaths and cycling/walking trails are missing/unsafe
  - not enough lighting
  - work commitments
  - lack of shelter/shade and not enough rest areas and seating rank.

### Enablers

- well designed and inclusive built environment to facilitate participation in physical activity
- well located disability parking spaces
- low-cost activities.

### Perceptions of safety & other barriers

- perceptions of safety, fear of judgment, exercising alone, time constraints and poor accessibility to open space due to lack of public transport
- amplified for women who experience intersecting forms of discrimination, or who are victims of trauma and domestic violence.

## Our Approach

To achieve the health impacts of active living, the Victorian Government wants to:

- improve neighbourhood and precinct planning to better support active living
- increase accessible and adaptable spaces for active living, ensuring compliance with appropriate state and national regulations and standards
- increase socio-cultural norms reinforcing active living
- increase capacity to be more physically active and less sedentary
- improve integration and accessibility of public transport
- increase active transport

- increase participation in sport and active recreation activities
- decrease sedentariness in workplaces, schools and early learning centres and during leisure time. (5)

### **Community Survey**

Increasing active living had an 82% rating as extremely or very important, showing high support for this priority. It was more important for people living in the urban areas and for people 75 years and over.

Comments:

*“Support and increase participation in sports and recreation for older adults.”*

*“While physical activity is important, it's also important to include diversity and not focus on just one activity which caters mostly for a specific gender and age group.”*

*“Lighting of facilities is very important for women to feel safe when they exercise early morning or late at night.”*

### **Priority action areas to increase physical activity**

To attain our goal in increasing active living, we aim to achieve:

- universal access of footpaths and trails
- accessible and inclusive parks, recreation facilities and Playspaces
- active residents – participating in walking and physical activity
- culture change that supports participation of women, men and gender diverse community members in sport and recreation
- inclusive cultures that support participation in all forms of physical activity.

Based on the principles and approaches of the Plan, the Actions to progress these achievements lists the:

- priority action areas for Council in partnership with others
- sections of Council that are responsible, and our partners
- measures of success and related Council plans.

### **Mutually reinforcing work across Goals**

Actions to increase physical activity may reflect work and co-benefits in other Priorities of the Plan, particularly:

- increase healthy eating (Priority 3)
- improve mental wellbeing and social connections (Priority 5)
- reduce harmful alcohol and drug use (Priority 7).



## Priority 5

### Improve mental wellbeing and social connection

Our goal for improving mental wellbeing and social connection:

People have good mental wellbeing through strong community connections, family supports and ease of access to mental health services.

This section outlines: why this is a health and wellbeing priority, the data for Yarra Ranges, what a gender and intersectionality lens tell us, our approach to improve health and wellbeing, and our priority actions. A detailed action plan is at Appendix 1.

#### Why mental wellbeing and social connection is a priority

*‘As a herd species, human beings have an inherent need to live in small groups, herds, and belong to tribes for nurturing, sustenance and protection.*

*Because we are social beings the only identity that makes sense is the identity that’s related to where we belong and where we fit into the networks we belong to...*

*Hugh MacKay Social Researcher - The Art of Belonging 2015*

Improving mental wellbeing was a priority in the last Council Health and Wellbeing Plan. It’s also one of ten priority areas in *the Victorian Public Health and Wellbeing Plan 2019-2023*. The *Victorian Public Health and Wellbeing Outcomes Framework* includes the outcomes: Victorians have good mental health, and Victorians are socially engaged and live in inclusive communities. (13)

The 2021 Council Plan identifies improving mental health as a major initiative. The following Council Plan action will guide our work to improve mental wellbeing:

*‘Improve mental health outcomes for the community, strengthen social connections, and advocate for equitable and accessible mental health services across the municipality’.*

Mental health conditions are one of the top five causes of burden of disease and death in Australia. (5) Having good mental health supports people to fully live their lives, cope with life stresses, work productively, and contribute to their communities. (31)

Mental health and physical health are inextricably linked. Compared to the general population, people with mental illnesses are more likely to develop physical illnesses such as cardiovascular disease, respiratory disease and cancer; and to have a reduced life expectancy. (32) Mental health conditions may also intersect with chronic diseases such as diabetes, cardiovascular disease, cancer. Harms from alcohol and substance use, and problem gambling may also intersect.

The benefits of social connections for good mental health are numerous:

- strong, healthy relationships can help to strengthen the immune system, help recover from disease, and may even lengthen life
- social ties are a potential resource that can be harnessed to promote population health
- proven links of social connection include lower rates of anxiety and depression, higher self-esteem, greater empathy, and more trusting and cooperative relationships. (33)

### **Social determinants of mental wellbeing**

The World Health Organisation recognises that (34)

*“.. a person’s mental health and many common mental disorders are shaped by various social, economic, and physical environments operating at different stages of life. Risk factors for many common mental disorders are heavily associated with social inequalities, whereby the greater the inequality the higher the inequality in risk.*

*It is of major importance that action is taken to improve the conditions of everyday life, beginning before birth and progressing into early childhood, older childhood and adolescence, during family building and working ages, and through to older age. Action throughout these life stages would provide opportunities for both improving population mental health, and for reducing risk of those mental disorders that are associated with social inequalities”.*

As social connection is one of the key determinants of mental health, Council policies and programs designed to promote a sense of belonging, increase awareness and acceptance of diversity, prevent violence, and build community resilience, can all support mental wellbeing.

### **Mental wellbeing and social connection in Yarra Ranges**

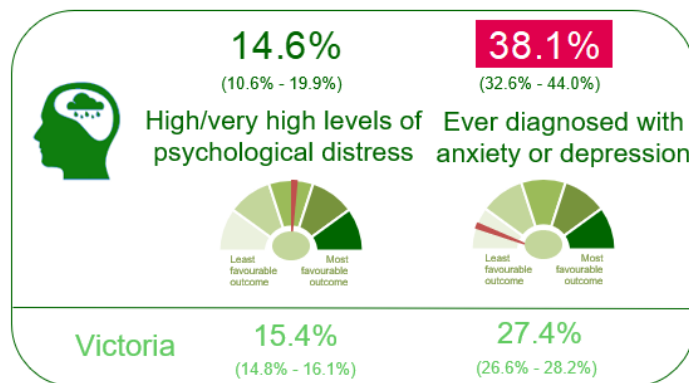
The 2017 Victorian Population Health Survey shows adults in Yarra Ranges had strong social connections: (4)

- 87% could definitely get help from family when they needed it, compared with 82% for Victoria.
- 93% could definitely get help from friends or relatives for care in an emergency, compared with 88% for Victoria.
- 52% were more likely to feel valued by society, compared to 48% for Victoria.
- 39% volunteer regularly or sometimes, compared to 36% for Victoria.
- 77% of residents had high or very high life satisfaction (the same as Victoria), and 81% had a high feeling of life being worthwhile.



However, residents of Yarra Ranges experience significant rates of mental health related issues:

- 25% of adults had sought help for a mental health-related problem during the past 12 months, significantly higher than the 18% Victorian average and ranking Yarra Ranges second highest in Melbourne (2017). Women (29%) had higher prevalence than men (24%) (4)
- people diagnosed with anxiety or depression rose from 27% to 38% (compared to 27% across Victoria), ranking Yarra Ranges highest within Melbourne
- 15% of adults had high or very high levels of psychological distress, equal to the Victorian average
- in 2018-19, children in Yarra Ranges (0-14 years) had higher rate of hospital admission rate for mental and behavioural disorders, than the Victorian average (35)
- mental and behavioural disorders were the third-highest reason for admission to hospital for young people (15-24 years) in Yarra Ranges. Women had a 33% higher admission rate than men. (35)



One in five Victorian adults will experience a mental health condition each year and 45% will experience this within their lifetime. (36)

### Mental wellbeing during the Covid 19 pandemic

The pandemic brought a rise in mental health patients in Yarra Ranges. Between 2019 and 2020, the number of active mental health patients in Yarra Ranges increased by 90%, to nearly 10,000 people. *EMPHN, 2020 - COVID-19 Community Update*

Social isolation and mental health were the main areas of impact for residents in Yarra Ranges of the pandemic and resultant lockdown/s. (26) The key issues were: social isolation (nearly 70% of survey respondents); and respondents' personal mental health (nearly 50%), and that of their families (44%) and their children (35%). Relationship strain was also an issue for nearly 20% of respondents. One quarter of respondents had contacted mental health services for assistance.

Mental health was identified as a key concern for parents and carers across the community. About two thirds of parents and carers (64%) reported medium to high levels of concerns around social isolation, mental health of a child (63%), family member (60%), or self (53%). Similar concerns were reported for respondents aged 18-24 years around social isolation (66%) and mental health (69%).

Women at particular risk of mental health issues as a result of Covid19 included:

- women experiencing family violence, pregnant women and new mothers, women with disability, older women, and women from migrant and refugee backgrounds. (37)

Women were overrepresented in industries impacted by pandemic such as retail, hospitality and the arts. They were also more likely to be on the frontline - aged care, nurses, childcare workers. This has led to higher levels of anxiety and stress for women. (37)

Carers of people with a disability also reported increased depression and anxiety due to isolation and lack/loss of supports as a result of Covid 19.

### **Mental wellbeing co-benefits across all Plan priorities**

Achievements in each of the other six priorities of the *Health and Wellbeing Plan* will improve mental wellbeing in Yarra Ranges. These co-benefits will occur at both personal and community level.

The co-benefits for mental wellbeing and in many cases social connection will result from achievements such as:

- reduced stress and anxiety during and a result of public health emergencies and climate change mitigation
- group activities as part of active living (such as sport and walking groups), healthy eating (such as community gardens), and support groups for specific issues
- increased healthy lifestyles resulting in healthier eating, more activity, less smoking and alcohol will each result in improved quality of life and mental wellbeing
- reduced gender inequality and the social context for men's violence against women, creating freedom from violence and discrimination.

### **Gender equity and intersectionality impacts**

In 2017, men in Yarra Ranges were more likely to report low or medium life satisfaction than women, where the prevalence for men was higher than for all of Victoria. (4)

A similar proportion of women and men in Yarra Ranges reported high or very high levels of psychological distress, which were like the Victorian average for each.

Women were 75% more likely to report moderate distress than men. The prevalence of distress in Yarra Ranges women was higher than the state average. Women in Yarra Ranges were more likely to be diagnosed with anxiety or depression by a doctor than the state average.

There is no information on mental wellbeing and social connections for people in Yarra Ranges of other socio-demographic groups. For adults in Victoria in 2018 the prevalence of social connection, mental wellbeing and mental health issues varied between population groups. (25) Further details are provided in Appendix 3.

During the Covid 19 pandemic, women experienced greater negative mental wellbeing impacts than men. In Yarra Ranges, parents and carers reported challenges balancing working from home with home-schooling. Of parents and carers 58% expressed medium to high concerns about being present and available for their children, and 51% expressed similar concerns in providing a remote learning environment. (26) Consistent with this, in Victoria 72% of females were spending the most of their time helping their child with school at home, compared with 26% for males. Given almost 80% of single parent households in Australia are headed by women, (38) they are disproportionately affected by the increasing burden of unpaid labour in the home and supporting remote learning for children.

In Australia, women experienced higher levels of depression, anxiety and stress than men in response to Covid 19. 39% of females report moderate to severe levels of psychological distress compared with 31% of males, while 35% of females report moderate to severe levels of depression, compared with 19% of males. (39) For young people aged 18-24, 37% of women reported suicidal thoughts, compared to 17% of men.

LGBTIQA++ Victorians are a diverse community and they continue to face stigma and discrimination. They are more likely than the broader community to experience poor mental health, suicidal thoughts, homelessness, substance abuse and intimate partner and family violence. The COVID-19 pandemic has exacerbated challenges being faced by some LGBTIQA++ Victorians.

## **Our approach**

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To improve mental wellbeing the Victorian Government wants to achieve: (5)

- a reduction in the prevalence of mental illness, and increased resilience among Victorian individuals, families and communities
- reductions in the gap in social and emotional wellbeing for at-risk groups, including Aboriginal Victorians, with an emphasis on loneliness and increasing social connectedness
- reductions in the occurrence of suicide deaths, suicidal ideation and suicidal attempt, and the gap between the suicide rates for vulnerable groups and the general population. (5)

At an individual level, the UK National Health Service recommends five steps people can take to improve mental health and wellbeing: (40)

- |                              |  |
|------------------------------|--|
| 1. Connect with other people | 2. Give to others                                    |
| 3. Be physically active      | 4. Pay attention to the present moment (mindfulness) |
| 5. Learn new skills          |  |

Critical to enabling and supporting individuals to take these steps is addressing the social determinants of health and providing access and opportunities to culturally and age-appropriate facilities, services and groups to undertake each step.

## Community survey

Improving mental wellbeing and social connection was the top priority (87% rated extremely or very important). Survey respondents saw a clear advocacy and support role for Council in terms of social connection and mental wellbeing:

- advocating for affordable and appropriate housing (89%)
- supporting local businesses to create employment (88%)
- advocating for more mental health services (87%).

## Comments

*“Affordable and long-term housing is very important for mental health...”*

*“...if people are eating well and feel welcomed to join local groups or meet at local events, this is one of the best ways to promote mental health but also support those who have a mental illness to connect...”*

## Priority action areas to increase mental wellbeing

To attain our goal in increasing mental wellbeing and social connection, we aim to achieve:

- increased social connection through participation in group activities, volunteering and community life/civic engagement
- reduced loneliness and isolation
- improved access to mental health services through our advocacy and increased community mental health literacy
- support for people whose mental wellbeing has been most affected by Covid 19, the 2021 storm and other emergency events
- families are supported well through the critical years of early childhood development
- increased mental wellbeing, recognising the centrality of this in a Covid 19 and post storm emergency environment.

Based on the principles and approaches of the Plan, the Actions to progress these achievements lists the:

- priority action areas for Council in partnership with others
- sections of Council that are responsible and our partners
- measures of success and related Council plans.

In this Plan, Council will have a strong focus on supporting social connection and reducing loneliness. This is a protective factor for good mental health.

Council strengthens social connection in many ways:

- provision and funding of social support and mentoring programs
- provision of programs and activities building social connection
- funding and Grants for community connection organisations and projects
- funding and supporting sport and clubs

- designing and constructing great places and facilities
- advocacy for improved mental health services.

Council also has a role in responding to the factors forecast to contribute to worsening mental health as a result of the pandemic and the 2021 storm event, and will:

- support community connection in as many ways as possible, e.g. through community clubs and sport, volunteering and funding community led festivals and events
- support economic development to mitigate business disruption and job losses
- facilitate opportunities for work, education and training including for young people
- advocate for increased access to essential services and infrastructure, particularly mental health services and affordable housing.
  - gender analysis reveals women and children escaping family violence and older single women to be at higher risk of homelessness.

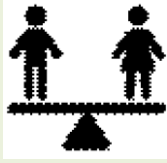
### **Mutually reinforcing work across goals**

Actions to increase mental wellbeing may reflect work and co-benefits in other Priorities of the Plan, particularly:

- increasing healthy eating and physical activity
- tackling climate change
- preventing violence against women and children
- reducing harms of alcohol and other drugs.







## Priority 6

### Prevent violence against women and children

Our goal to reduce and prevent violence against women:

Women and children in Yarra Ranges live free from abuse and violence through a culture of gender equity and respect.

This section outlines: why this is a health and wellbeing priority, the data for Yarra Ranges, what a gender and intersectionality lens tell us, our approach to improve health and wellbeing, and our priority actions. Appendix 1 is a detailed action plan.

#### Why preventing violence against women and children is a priority

*‘The term violence against women means any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life.’*

United Nations Declaration on the Elimination of Violence against Women (41)

The 2015 Royal Commission into Family Violence led to the Victorian Public Health and Wellbeing Act being amended to require councils to specify what they will do to prevent family violence and how they respond to victims of family violence, when preparing their Health and Wellbeing Plans.

Gender equity to prevent violence against women was a priority in the last Council Health and Wellbeing Plan. Preventing all forms of violence is one of ten priority areas in *the Victorian Public Health and Wellbeing Plan 2019-2023*. The *Victorian Public Health and Wellbeing Outcomes Framework* includes the outcome Victorians live free from abuse and violence. (13)

All people have the right to live safely and free from all forms of violence. Violence impacts people of all genders but is disproportionately experienced by women by male perpetrators. Violence is a significant but modifiable risk factor for ill-health amongst women, particularly those of child-bearing age. (5) Family violence causes physical injury, psychological trauma and emotional suffering, which can affect victims and their families for the rest of their lives. In its most extreme form, it causes senseless and preventable deaths. (42) The personal impacts include pain, suffering and early death, with substantial physical and mental health impacts; loss of income and reduced financial security; loss of housing; loss of or limited access to employment; disconnection from family and friends; and property damage.



Family violence can also affect child development. If family violence is combined with other problems, such as drug and alcohol abuse, or mental health issues, children are placed at even greater risk of developing emotional, behavioural, health, social and educational problems. (5)

### **Tackling causes – a prevention approach**

Evidence shows that key predictors of violence against women relate to how individuals, communities and society as a whole view the roles of men and women. Some of the strongest predictors for holding violence-supportive attitudes at the individual level are low levels of support for gender equality and following traditional gender stereotypes.

When women are not equal to men - when our attitudes and behaviours assert male dominance over women - it enables some men to abuse and it prevents women from seeking help. Recognising this, the *National Plan to reduce violence against women and their children 2010-2022*, has a long-term plan to address the gender inequalities that set up the conditions for violence. (43)

### **How reducing family violence help our communities**

Good mental, physical, and sexual and reproductive health, is supported by:

- gender equality and respect
- safety and freedom from discrimination, violence and stigma.

Beyond health benefits, creating a society free from family violence will lead to: (5)

- improved socioeconomic outcomes for women and young children
- increased gender equity
- participation in social and economic life for all genders
- increased feelings of safety; reduced drug and alcohol misuse
- reduced demand for family violence services and a range of other services.

### **Social determinants of family violence**

The social and economic determinants of intimate partner violence are at multiple levels:

- at the family level
  - across power differentials between partners
  - across status inconsistencies between partners
- at the community level
  - peer and community influence and norms of acceptability of intimate partner violence and male intimate violence perpetration
  - community levels of violence
- at the societal or ecological level
  - community or societal violence and attitudes towards violence
  - social, gender and economic inequity.

### **Family violence during the Covid 19 pandemic**

In Victoria in 2017, 4.2% of men and 6.6% of women 5.4% of adults experienced family violence in the two years preceding the Victorian Population Health Survey. (44)

In Yarra Ranges, the number of reported family violence incidents (reported) increased by 4.7% in 2020 compared to 2019. (45) Females accounted for 76% of those affected by family violence. Family violence against people aged 55 years and older in Yarra Ranges increased by 22% between 2019 and 2020.

In 2020, Yarra Ranges had a rate of reported incidents of 1,094 per 100,000 residents. Reported family violence appears more prevalent in the outer east than in the inner east - Yarra Ranges, Knox and Maroondah all have rates of more than 1,000 per 100,000 residents, compared to rates ranging from 565 to 807 per 100,000 in the inner eastern areas.

Many people seeking assistance for family violence during Covid 19 were doing so for the first time and the majority of those seeking support were women. During Stage 3 and 4 restrictions in Melbourne, the level of first-time victims engaging with the Eastern Domestic Violence Service (EDVOS) doubled to 60%. Cases showed increased frequency and severity of ongoing violence, particularly physical and sexual abuse, and coercive control. Referrals from general services rose by 20% between March and June; these services include community health, early childhood and counselling services. Many of these services had never contacted EDVOS previously and were highly concerned for the safety of women and children. (46)

### **Gender equity and intersectionality impacts**

While anyone can experience family violence, some groups tend to be at increased risk. These include women who are Indigenous; identify as having a disability; live in rural, regional or remote areas; are older; identify as LGBTIQAA++; or are affected by socio-economic disadvantage. (44) The experiences of migrant and refugee women are emerging areas for Council that needs to be better understood.



## **Elder Abuse**

Elder abuse is any act which causes harm to an older person and is carried out by someone they know and trust, such as a family member or friend. The abuse may be physical, social, financial, psychological or sexual and can include mistreatment and neglect.

Older women and gender diverse people can be at increased risk of this kind of abuse and violence.

## **Our approach**

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To prevent family violence, the Victorian Government wants:

- women, men, girls and boys to be treated equally with respect and dignity
  - all parts of the community engaged in practical and creative ways to learn about respectful, safe and equitable relationships
  - women and children resourced, supported and empowered to make decisions regarding their safety and wellbeing
  - all Victorians feel safe and empowered to take a stand against family violence.
- (5)

At its core, family violence and violence against women is rooted in the inequality between women and men. (5) This priority continues work from the previous Health and Wellbeing Plan and maintains Council's focus on a prevention approach and to promoting gender equality in our workplace and community.

Council is working towards an inclusive and diverse Yarra Ranges, where women, men and gender diverse people have equitable access to resources, power and opportunities. Examples of Council's work include:

- upgrading sports and recreational facilities to provide equal access to all genders
- supporting women into leadership at all levels of society
- partnerships to develop resources for early years services that break down rigid gender stereotypes
- lighting to improve safety in popular walking areas
- services actively supporting women who may be experiencing violence in their relationships, such as Maternal and Child Health and Youth Development
- referrals to specialist services
- advocacy for changes to the causes of violence against women
- organisational change to ensure Council is equitable for all employees and in how it provides services for residents.

## **Community Survey**

This priority was the second highest overall (86%). 100 percent of 18-25 age group surveyed rated this priority as extremely or very important. 89% of women and 80% of men rated this extremely or very important. It was the second highest priority for people living in the Valley and Hills areas.

## Comments:

*“Keep calling out disrespectful behaviour and sexism.”*

*“Advocate for men to have flexible work environments so there is more time for men to be involved in family responsibilities. Supports for new Dads in the maternal child health services - engaging men in parental roles early in the child’s life.”*

There were some comments in the survey about respect for men and boys and feeling this priority was discriminatory towards them. An example is...

*“Please try to remember that gender equality means that men are also a gender... not all young men are potentially bad.”*

Council’s position is that gender equality encompasses all genders and gender diverse community members. Boys and men also experience limitations as a result of rigid gender roles. Support for boys and men and working with them to promote a fair go for everyone, is important. They are also powerful champions for change.

## Priority action areas to prevent violence and abuse

To attain our goal in preventing violence and abuse against women and children, we aim to achieve:

- increased gender equality through the work of Council, community and partner organisations
- rigid gender stereotypes are dismantled, and our community is not limited by these stereotypes and roles
- greater recognition and attainment of leadership roles by women
- respectful relationships between men, women and children
- a reduction in family violence in all its forms
- support for women with intersecting factors that increase their risk of harm
- the inclusion of women from diverse backgrounds and life experiences

Based on the principles and approaches of the Plan, Actions to progress these achievements lists the:

- priority action areas for Council in partnership with others
- sections of Council that are responsible and our partners
- measures of success and related Council plans.

## Mutually reinforcing work across goals

Actions to prevent violence and abuse against women and children may reflect work and co-benefits in other Priorities of the Plan, particularly:

- respond to public health emergencies (Priority 1)
- tackle climate change and its impacts on health (Priority 2)
- improve mental wellbeing and social connections (Priority 5)
- reduce harmful alcohol and drug use (Priority 7).



## Priority 7

### Reduce harmful alcohol and drug use

Our goal to reduce harmful alcohol and drug use:

People in Yarra Ranges are safe from the harmful effects of alcohol and other drugs - particularly from alcohol and tobacco, through preventing uptake and support for safe alcohol use.

This section outlines: why this is a health and wellbeing priority, the data for Yarra Ranges, what a gender and intersectionality lens tell us, our approach to improve health and wellbeing, and our priority actions. Appendix 1 includes detailed actions.

#### Why reducing harms from alcohol is a priority

*'Alcohol is the most widely used drug in Australia. People drink alcohol for a range of reasons and in different social and cultural contexts, but alcohol can cause harm to the person who drinks and sometimes to others around them.'*

*National Health and Medical Research Council, 2020 (47)*

Harmful alcohol use was a priority in the last Council Health and Wellbeing Plan. It's also one of ten priority areas in *the Victorian Public Health and Wellbeing Plan 2019-2023*. The *Victorian Public Health and Wellbeing Outcomes Framework* includes the outcome Victorians act to protect and promote health, indicated by reduced smoking and reduced harmful alcohol and drug use. (13)

Every year in Victoria, alcohol causes over 1,200 deaths and nearly 40,000 hospitalisations. (48)

Alcohol is a known risk factor for 13 different forms of cancer. (49) In addition, heavy alcohol use can also cause short and long-term health problems such as cirrhosis of the liver, alcohol dependence, strokes, suicide, injury and car accidents. Harmful community impacts of alcohol include drink driving, contributing to family violence and violence in the public realm.

Residents and visitors to Yarra Ranges enjoy the fine wines and spirits produced in the area. These economic, culinary and tourism benefits can be at odds with health concerns and other negative impacts of alcohol such as traffic accidents and links to family violence. (50)

## How much alcohol?

For adults who do drink alcohol, the National Health and Medical Research Council recommends: (47)

- no more than 10 drinks per week
  - more drinks place a person at increased lifetime risk of alcohol-related harm
- no more than four drinks on any one occasion
  - more drinks place a person at increased risk of injury from a single occasion of drinking.

It is also recommended that:

- children and people under 18 years of age should not drink alcohol
- women who are pregnant or planning a pregnancy should not drink alcohol
- not drinking alcohol is safest for the baby of women who are breastfeeding.

## Social determinants of harmful alcohol

The World Health Organisation recognises that: (51)

*'Breaking the vicious circle of the social determinants and consequences of the harmful use of alcohol requires a combination of effective measures addressing social inequalities, alcohol availability and the context and patterns of alcohol use, as well as the availability of effective treatment for alcohol use disorders.'*

Alcohol culture influences how often and how much, alcohol people drink. The culture includes the way people drink, including the formal rules, social norms, attitudes and beliefs around what is and what is not socially acceptable.

*'It is the shared practices of a social group, rather than individuals, that have the greatest scope to bring about cultural change.'*

*VicHealth Alcohol Strategy 2019-2023 (48)*

## Alcohol consumption in Yarra Ranges and during the Covid 19 pandemic

Most adults in Yarra Ranges drink alcohol responsibly, however a significant proportion of the population still drink in a way that puts them at risk of injury from a single occasion of drinking, or at risk of chronic disease over the longer term.

The proportion of adults in Yarra Ranges who consume harmful amounts of alcohol is higher than for Victoria. In 2017, 67% of adults in Yarra Ranges were at increased lifetime risk of alcohol related harm, greater than the 59% for all of Victoria. (4) Half (50%) of adults were at increased risk of injury from a single occasion of drinking, also larger than for all of Victoria (43%).

During 2020 a number of surveys tracked the impacts of Covid 19 and lockdowns on alcohol consumption. Nationally, 11% of women and 18% of men increased their consumption of alcohol during the pandemic. (10) Commonwealth Bank of Australia card spend data showed decreased spending in pubs and clubs, relative to the same



period in 2019. (52) This was offset by increased spending in bottle shops up until mid-November 2020.

### **Gender equity and intersectionality impacts**

Short-term harms from alcohol misuse, such as injury, are experienced more often by men than women. Longer-term harms including cancers, cardiovascular diseases and digestive diseases are more likely to be experienced by people with low socio-economic backgrounds. (48)

In 2017, men in Yarra Ranges were 27% more likely to be at increased lifetime risk of alcohol related harm than women, similar to the Victorian average. (4) Similarly, men in Yarra Ranges were 39% more likely to be at increased risk of injury from a single occasion of drinking than women - where the prevalence for women in Yarra Ranges was 26% higher than the state average.

There is no information on harmful alcohol consumption for people in Yarra Ranges of other socio-demographic groups. For adults in Victoria in 2018 the prevalence of lifetime risk of alcohol related harm and risk of injury from a single occasion of drinking varied between population groups. (25) Further details are provided in Appendix 3.

### **Why reducing tobacco use is a priority**

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Tobacco smoking remains the leading contributor to the death and disease burden in Australia, despite a substantial reduction in the smoking rate over the past two to three decades. Smoking causes 22% of the cancer burden of disease, and 41% of the respiratory burden of disease. (5)

Smoking increases the risk of many illnesses including lung cancer, cardiovascular disease and chronic obstructive pulmonary disease. Evidence suggests that smoking kills almost two in three regular users. The health burden of tobacco use affects not only smokers but also their families, particularly children who are more likely to suffer from bronchiolitis and other respiratory conditions. Smoking also causes significant economic impacts through costs of health care and loss of life. (5)

### **Smoking in Yarra Ranges**

In Yarra Ranges in 2017, 11% of adults smoked daily, similar to the 12% for all of Victoria. Including occasional smokers, 17% of both Yarra Ranges and Victorian adults smoke tobacco. (4)

### **Gender equity and intersectionality impacts**

Smoking is a significant contributor to health inequalities. Daily smoking rates were similar for men and women in Yarra Ranges in 2017. (4) There is no information on tobacco use for people in Yarra Ranges of other socio-demographic groups.

A number of population groups in Australia have higher smoking rates than the general population. (53) This includes people who are socio-economically disadvantaged, unemployed, are sole parents, have a mental health issue, have a substance use problem, are in prison, are experiencing homelessness or are Aboriginal and/or a Torres Strait Islander. For adults in Victoria in 2018 the prevalence of daily smoking varied between population groups. Further details are provided in Appendix 3.

The health effects of tobacco are experienced at greater levels by Indigenous peoples. The extent of this impact was revealed in new research early in 2021. In Australia, smoking caused around half of all deaths among Aboriginal and Torres Strait Islanders adults aged 45 years and older, exceeding 10,000 deaths in the past decade. (54)

### **Why reducing drug use is a priority**

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Illicit drug use includes use of illegal drugs (such as methamphetamines), the use of pharmaceutical drugs for non-medical purposes (such as tranquillisers) and the misuse of other substances (such as paint, glue or petrol as inhalants). In 2015, 2.7% of the disease burden in Australia was due to illicit drug use, with about a third of the burden due to opioid use. (55) By comparison, tobacco use caused 9.3% of the burden of disease and alcohol use caused 4.5%. Typically, illicit drug use is initiated in late teenage years and peaks in young adulthood, although a small minority continue the practice into middle age. (56)

The social impact of drug use is high - crime associated costs were about 20 times health system costs. The long-term impact is evident in chronic liver diseases and cancer.

### **Illicit drug use in Yarra Ranges**

Information on drug use (illicit drugs and use of prescription drugs for non-medical purposes) is not available for Yarra Ranges. In 2019 in Victoria 17% of people had used an illicit drug in the past 12 months, with 5% using cocaine, 4% using ecstasy. (56) Prescription drug abuse is a rising problem in Australia and pharmaceutical drugs have been the most frequent contributors to overdose deaths in Victoria in recent years. (57)

### **Our approach to reduce harmful alcohol and drug use**

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#### **Alcohol and drug use**

To reduce the health impacts of harmful alcohol and drug use, the Victorian Government wants to achieve: (5)

- change in risky drinking cultures and environments that support low risk drinking
- increased capability in all service systems including mental health, housing, child protection and family violence to assist people with alcohol and other drug-related issues
- better outcomes for those who access treatment, reducing harm and improving social outcomes

- improved capability of primary care providers to assist people to manage alcohol and other drug-related issues before treatment is required or complexity develops.

The 2019-2023 VicHealth Alcohol Strategy has a 10-year goal that 200,000 more Victorians drink less alcohol. (48). The priorities include:

- changing risky drinking cultures
- enabling environments to support low-risk drinking.

A culture that would support reducing harms from alcohol looks like:

*‘People socially supporting one another to engage in low-risk drinking practices rather than high-risk drinking, resulting in reduced harm for the individual, their family, bystanders and the broader community.’ (VicHealth) (48)*

While a life course approach is taken to address all the priorities of the Plan, it is of critical importance in reducing alcohol harm. Of importance is the role of friends and family alcohol use and the impact it has on young people’s sociocultural norms, aspirations and wellbeing.

Recognising the importance of family and friends in reducing alcohol harms in the current and future lives of children and young people, Council supports early life through maternal and child health, early years programs and inclusive playgroups. In addition, Council’s Youth Development team takes a strengths-based approach to supporting young people and will continue to be a vital way to nurture the leaders of the future.

There are many contributors in this area of health promotion to reduce harmful alcohol use: (48)

- prevention, early intervention, treatment and harm minimisation are primarily the responsibility of the Department of Health
- alcohol and other drug education in schools is the responsibility of the Department of Education and Training
- local Councils have a minor role in licensing and can object to new licences if they assess it will result in local harms
- Councils can:
  - work with partners and communities to promote safer alcohol consumption
  - contribute to the reduction of alcohol related harm through advocacy
  - exercise its role in planning decisions
  - promote safer drinking cultures
  - build local partnerships with sporting clubs, business groups, industry networks and Victoria Police
  - better understand the needs of marginalised communities in relation to alcohol.

The Alcohol and Drug Foundation report that:

*'Prevention is an important part of a comprehensive harm reduction approach to reduce alcohol and other drug harms, particularly amongst young people. This is because young people are going through significant social, physiological and developmental changes. In this phase of their life, prevention strategies have the potential to positively influence behaviour that will last through their adult years.'*  
(58)

An important goal of prevention is to change the balance between risk and protective factors so that protective factors outweigh risk factors.

Protective factors interact with alcohol and drug use in complex ways. (58) They may moderate the influence of risk factors to reduce the likelihood of alcohol and drug use in young people, delay the uptake of alcohol and drug use in young people, and reduce harm should young people engage in their use. Examples of protective factors are:

- parental supervision and communication
- participation in supervised leisure activities
- social and emotional competence
- sense of belonging/connectedness to community, school and family
- participation in positive activities with adult engagement.

Risk factors can influence drug abuse in several ways. (59) The more risks a child is exposed to, the more likely the child will abuse drugs. Some risk factors may be more powerful than others at certain stages in development, such as peer pressure during the teenage years; just as some protective factors, such as a strong parent-child bond, can have a greater impact on reducing risks during the early years.

### **Tobacco use**

To reduce the health impacts of smoking tobacco, the Victorian Government wants to achieve: (5)

- decreased access and affordability of tobacco products
- decreased number of environments in which to smoke
- decreased exposure to second- and third-hand smoke
- decreased social acceptability of smoking
- increased capacity to stop smoking and use of nicotine
- increased uptake of stop-smoking supports.

Local councils have the power to enforce the *Tobacco Act 1987*, the legislation governing where Victorians can smoke, as well as the sales and promotion of tobacco products and certain non-tobacco products. Council monitors sale of tobacco to people under 18, working with businesses to prevent young people taking up smoking.

Evidence-based actions that a local government can take to reduce tobacco-related harm and become a healthier place include: (5)

- educating businesses and the community on obligations in the Tobacco Act 1987
- monitoring compliance and taking enforcement action where necessary
- responding to complaints in relation to the Tobacco Act 1987
- participating in the Cigarette Sales to Minors Program and conduct test purchases with young people to ensure compliance with the Tobacco Act 1987
- extending smoke-free areas and contribute to de-normalisation of smoking.

Currently, the Federal Government is funding the Tackling Indigenous Smoking (TIS) program. (60) The overall goal of the program is to improve Indigenous health *“through local population specific efforts”*. Much of these efforts rely upon place-based approaches and building relationships to support capacity-building and behaviour changes.

Council action to reduce the impact of tobacco in Indigenous communities is in preventing uptake of smoking. It recognises that:

- Aboriginal community-controlled health services (ACCHO) are best placed to deliver culturally safe programs and support for a range of health issues
- bespoke tobacco cessation and health promotion campaigns for Indigenous people will be more likely to succeed than mainstream programs
- ACCHOs offer services that can provide holistic support to people wanting to Quit and across health needs e.g. smoking in pregnancy, smoking and diabetes.

Council is committed to working with Oonah Health and Community Services Aboriginal Corporation (Oonah) to achieve a purpose-built community controlled Aboriginal Health Service (Belonging Place). The most powerful way Council can support improved health is to back this community goal through shared advocacy, design and feasibility studies and through a community engagement process.

## **Community Survey**

The priority to reduce harmful alcohol and drug use was rated extremely or very important for 74% of respondents. The survey indicated people are trying a range of ways to reduce drinking including, low or no alcohol options, events without alcohol and Feb Fast. Overall it seemed awareness of the health benefits of reducing alcohol consumption were high in those answering. Around a third of people answering the questions did not drink alcohol. Very few survey respondents used illicit drugs.

## **Comments**

*“...consider the number of outlets that sell alcohol. I live in \_\_\_\_\_ and there are 4 bottle shops within walking distance and multiple wine and spirit outlets.”*

*“the limited information there is around re: what help looks like and information to parents about what supports they may get. I think the hardest thing is the guilt and shame that goes with asking for help ...”*

Comments about freedom of choice and dignity were also made, as were questions about Council's role in this area. Some comments also indicate a need to increase knowledge and tackle stereotypes about who drinks and why, for example risk from alcohol increases with higher income, unlike for other health priorities where higher income predicts better health.

### **Priority action areas to reduce harmful alcohol, tobacco and drug use**

To attain our goal in reducing harmful alcohol and drug use, we aim to achieve:

- community attitudes that support safer alcohol culture
- partnerships that strengthen responsible consumption of alcohol
- effective use of Council's regulatory roles to protect community amenity
- Council models responsible serving of alcohol
- reduced disease and death from tobacco
- resilient young people and children who are protected from alcohol and drug harms.

Based on the principles and approaches of the Plan, actions to progress these achievements lists:

- the priority action areas
- the sections of Council that are responsible
- our partners
- measures of success
- related Council plans.

### **Mutually reinforcing work across goals**

Actions to reduce harmful impacts of alcohol and other drugs may reflect work and co-benefits in other Priorities of the Plan, particularly:

- improve mental wellbeing and social connections (Priority 5)
- prevent violence against women and children. (Priority 6)



# Appendix 1: ACTION PLAN

**Priority 1** - priority actions for Council in partnership with others to prepare and respond to the public health impacts of emergencies

What we aim to achieve	Priority Action Areas	Responsibility of...	Partners	Measures of success	Related Plans
Strong and sustainable social connections	Plan for and deliver communications about services and support in an emergency and beyond, through varied sources including IT platforms, in plain English and translations.	Communications	Community & disability organisations	More older adults and carers without IT access can get the information they need (qualitative assessment).	Municipal Emergency Management Plan Recovery Framework & Action Plan
	Fund and support 4 Community Recovery Committees (CRC) to deliver Covid 19 and storm recovery initiatives led by the community, for the community, and representative of all ages, abilities and genders.	Council	Community Enterprise Foundation, Bendigo Bank Community Banks, Yarra Ranges Bendigo Bank cluster	Four CRCs established and local projects funded. Positive impact of CRC funding and participation by women, men and gender diverse people is demonstrated in project reports.	Recovery Framework & Action Plan
	Build community resilience by facilitating: community planning, community groups, networks, local service networks and by supporting and building community leadership capacity.	Community Development	Community Groups and Networks Neighbourhood Houses	Number of community members doing skill building or leadership programs (disaggregated by men women and gender diverse people).	Municipal Emergency Management Plan, Equity Access & Inclusion Strategy

What we aim to achieve	Priority Action Areas	Responsibility of...	Partners	Measures of success	Related Plans
	Contribute to communication strategies in relation to viruses such as Covid 19, taking the lead from State health authorities.	Emergency Management	State Government Communication Team	Number of campaigns delivered in line with requirements of State Government	Liveable Climate Plan, Recovery Plans, Municipal Emergency Management Plan
Thriving local places and economies	Increase vibrancy of Activity Centres and townships through place making in partnership with businesses and local communities.	Design and Place Team, Economic Development	Township Groups, Businesses, Community Development, Disability Inclusion, State Gov't	A decrease in shop front vacancies in chosen study areas (activity centres) post Covid 19.	Living Places (Draft) Economic Development Strategy
Local amenity is protected by resilient infrastructure	Protect local amenity to reduce the impact of flooding events through: <ul style="list-style-type: none"> <li>planning, maintaining and upgrading the drainage network.</li> </ul>	Infrastructure Maintenance Infrastructure Strategy & Investigations	Melbourne Water Department of Transport	Customer requests resolved in time.	Municipal Emergency Management Plan
Services and resources needed by communities in emergencies are easy to find and use	Support coordination of the Yarra Ranges Emergency Relief Network.	Community Partnerships & Wellbeing	Yarra Ranges Emergency Relief Network, Eastern Volunteers	Increased coordination by Yarra Ranges Emergency Relief agencies secures additional resources during and post emergencies.	Grants Policy
	Advocate for: <ul style="list-style-type: none"> <li>Increased services to meet local needs in emergencies</li> </ul>	Advocacy Lead, Communications, Emergency Management,	Local agencies & organisations	Number of advocacy campaigns or actions on behalf of communities.	Council Plan

What we aim to achieve	Priority Action Areas	Responsibility of...	Partners	Measures of success	Related Plans
	<ul style="list-style-type: none"> <li>Advocate to reduce communication infrastructure black spots.</li> </ul>	Economic Development, Community Partnerships & Wellbeing,		Telecommunication infrastructure improvements are funded and completed.	Recovery Framework & Action Plan Municipal Emergency Management Plan
	<p>Seek funding to provide both preventive and responsive programs in emergencies:</p> <ul style="list-style-type: none"> <li>Informed by local communities and CRCs</li> <li>Targeted to those most affected by any given emergency.</li> </ul>	Emergency Management	Local community services, Emergency Agencies	Increased funding for targeted supports and services to communities affected by emergencies.	Council Plan Recovery Framework & Action Plan Municipal Emergency Management Plan

## Priority 2 - priority actions for Council in partnership with others on climate change and its impacts on health

What we aim to achieve	Actions	Responsibility of...	Partners	Measures of success	Related Plans
Healthy and resilient Country in the face of climate change	Support the Firestick Project to heal Country and people, mitigate bushfire risk, and manage our landscapes for sustainable futures.	Indigenous Development Team	Firestick Alliance Indigenous Corporation, Wurundjeri Woi Wurrung Cultural Heritage Aboriginal Corporation	Engage 4 - 5 Aboriginal participants in cultural burning training over 3 years. Establish 6 pilot cultural burning sites with independent monitoring.	Reconciliation Policy Liveable Climate Plan
	Advocate and collaborate with key agencies to improve air quality and reduce the health impacts of smoke	Environmental Stewardship, Community Partnerships & Wellbeing	Environment Protection Agency, Country Fire Authority, Dept Environment, Land, Water & Planning	Number of air quality posts on Council sites.	Liveable Climate Plan
Create places of respite for those who most need them	Libraries and community facilities offer a 'third place' for community members who do not have adequate cooling and heating in their homes.	Creative Communities, Facilities Management, Environmental Stewardship	ERL Neighbourhood Houses	Number of community facilities available for use by community members during extreme weather.	Liveable Climate Plan Healthy & Active Ageing Plan
	Increase awareness of major shopping centres as places that are cool during heatwaves and warm when it is cold.	Communication Team, Emergency Management	Shopping Centres' Management	Number of shopping centres providing respite in heatwaves and cold weather.	
Increase community awareness of the health impacts of	Conduct communications campaigns to include hardly reached community members:	Communication, Community Partnerships & Wellbeing,	Community groups and networks, Migrant Information Centre	Increased awareness of how to protect against the health impacts of climate change in culturally diverse communities.	Liveable Climate Plan

What we aim to achieve	Actions	Responsibility of...	Partners	Measures of success	Related Plans
climate change and capacity to prevent them	<ul style="list-style-type: none"> <li>• Outreach to culturally diverse communities using translated information</li> <li>• Promote ways to reduce bills: benefits of insulation and the positive long-term impacts on health.</li> </ul>	Family & Children's, Middle Years and Youth Development, Aged Friendly Communities, Maternal & Child Health, Environmental Health, Emergency Management		Number of participants in Council webinars on preventing health impacts. Information distributed before extreme weather events, people know where to get it.	
	Provide information and alerts prior to and during heatwaves and other extreme weather events, to those most affected: older adults, young children, people with disability.		State Government Community Networks Outer Community Inclusion Alliance (disability sector)	Number of information briefs delivered.	Municipal Emergency Management Plan Liveable Climate Plan Recovery Plan



### Priority 3 - priority actions for Council in partnership with others to increase healthy eating

What we aim to achieve	Actions	Responsibility of...	Partners	Measures of success	Related Plans
Yarra Ranges has a healthy, sustainable food system and healthy food is available to all	Map the food system to understand gaps and opportunities: <ul style="list-style-type: none"> <li>Identify advocacy priorities</li> <li>Participate in networks to build skills to improve and protect the food system.</li> </ul>	Health Promotion, Environmental Stewardship, Healthy Active Living Collaboration	Healthy Active Living Group includes: Inspiro, EACH, Eastern Health Community Health	Yarra Ranges food system map is completed. Action Plan is endorsed by all partners, resources are committed, and measures agreed. Implementation and outcomes are demonstrated by shared measures in progress reports.	Liveable Climate Plan
Council grants support community led action on healthy eating	Council's annual grants include criteria to increase healthy eating, and profile in media.	Grants, Health Promotion, Disability Inclusion	Not-for profit community organisations, Yarra Ranges Emergency Relief Network	Number of grants awarded. Outcomes as demonstrated in grant reporting.	Liveable Climate Plan
	Protect food security and resilience, through Emergency Food Relief Agencies.	Grants			
Collaboration approaches on nutrition have increased access to healthy and affordable food	Establish a collective impact approach to food and nutrition that builds on the past Plan: <ul style="list-style-type: none"> <li>Develop a shared action plan through workshops, supported by consultants.</li> </ul>	Environmental Stewardship, Community Partnerships & Wellbeing	Inspiro, EACH, Eastern Health Community Health, not-for-profit food groups	A shared agenda with agreed measures endorsed. Implementation outcomes demonstrated through the shared measures.	Liveable Climate Plan
Community gardens are thriving places, building skills in	Finalise draft policy to guide future work and provide clarity on use of Council owned and managed land for community gardening.	Environmental Stewardship, Recreation & Active Living,	Community gardeners ECOSS Community organisations	Number of community gardens run and managed by community	Liveable Climate Plan Recreation & Open Space Strategy

What we aim to achieve	Actions	Responsibility of...	Partners	Measures of success	Related Plans
growing and preparing food		Design and Place			
	Expand the Lilydale revitalisation project community garden in line with community planning priorities.	Design and Place, Community Development Environmental Stewardship	Community Gardeners Property & Facility Management	Funding secured to develop more community gardens. New garden is established at Lilydale.	Liveable Climate Plan Recreation & Open Space Strategy
Community members access healthy and affordable food from a range of sources	Deliver Gardens for Harvest programs.	Environmental Stewardship	Community gardeners	Number of programs. Self-reporting of skills gained by participants.	Liveable Climate Plan
	Promote direct access to local produce such as fruit and vegetable, including seconds that are affordable, and connect to and support sustainable local agribusinesses.	Environmental Stewardship, Economic Development & Investment, Communication Team	Community Health Centres Yarra Ranges Tourism Local agribusiness and regional groups	Community Health sector Web based resource is live. Number of hits on website/app.	Liveable Climate Plan
Boys and girls have equal opportunity to learn about good nutrition and have the skills to prepare healthy food	2023 Council grants include criteria that invites community led projects.	Grants	Community Health Centres	Number of grant projects funded.	Nil
	Early childhood services help break down gendered roles of food preparation in the home.	Early Years, Maternal & Child Health Health Promotion	Gender Equity Partnership  WHE	Social marketing and support for gender equality in early childhood settings includes breaking down stereotypes of who cooks.	

What we aim to achieve	Actions	Responsibility of...	Partners	Measures of success	Related Plans
Our community nurtures and celebrates all bodies	Support the Yarra Ranges Body Image Group to secure funding for a Coordinator. Participate in the group to: <ul style="list-style-type: none"> <li>• reduce eating disorders and weight stigma</li> <li>• plan, implement and evaluate programs with community groups, schools and partners.</li> </ul>	Yarra Ranges Body Image Group, Health Promotion	Creative Communities	Coordinator funding secured. Yarra Ranges Body Image Group has completed a strategic plan.	Youth Plan, Early Years Plan
Council contracted services and catering policy advance healthy eating through clear standards and expectations	Leisure Centre contracts require limiting unhealthy choices and increasing and promoting healthier choices and: <ul style="list-style-type: none"> <li>• Continue to promote water as the easy choice</li> <li>• Replicate successful strategies for water to food.</li> </ul>	Health Promotion, Recreation & Active Living	Inspiro	New tender documents include clear requirements (and KPIs) for serving healthy options at Council pools and leisure centres.	Recreation & Open Space Strategy

#### Priority 4 - priority actions for Council in partnership with others to increase physical activity

What we aim to achieve	Actions	Responsibility of...	Partners	Measures of success	Related Plans
<p>Universal access of footpaths and trails</p> <p><i>Important note: some areas of Yarra Ranges will struggle to achieve this outcome due to the limitations of our topography.</i></p>	<p>New and upgraded footpaths and trails meet universal access standards with a focus on:</p> <ul style="list-style-type: none"> <li>• Footpaths and trails in areas of high use and destinations</li> <li>• Completing missing connections between activity centres, schools and services</li> <li>• Inclusion of wheelchair users and people using mobility aids (e.g. low vision)</li> <li>• Designing paths with good line of sight and safety for women</li> <li>• Way finding on trails to indicate accessibility</li> <li>• Designing pram crossings to facilitate walking for new footpaths and in high value locations for upgrades and renewal projects.</li> </ul>	<p>Infrastructure and Engineering</p> <p>Infrastructure Maintenance</p> <p>Infrastructure Delivery</p> <p>Recreation Active Living</p>	<p>Disability Advisory Committee, Federal &amp; State Governments, community through engagements</p>	<p>Kms of new footpaths built in areas previously without them.</p> <p>Kms of footpaths and trails upgraded.</p> <p>Kms of new trails.</p> <p>Universal access applied to upgrades and new paths and trails.</p>	<p>Integrated Transport Strategy</p> <p>Equity Access &amp; Inclusion Strategy</p>

What we aim to achieve	Actions	Responsibility of...	Partners	Measures of success	Related Plans
Accessible and inclusive parks, recreation facilities and Playspaces	Design parks and play equipment upgrades to increase participation through more accessible spaces.	Infrastructure & Engineering, Early Years, Recreation & Active Living,	Disability Advisory Committee	Proportion of new play spaces with accessible elements like wheelchair and pram access. New accessible parking spaces near play spaces in activity centres or major destinations.	Early Years Plan
	Encourage walking to: schools and destinations like playgrounds and other physical activity options.	Recreation & Active Living, School Crossing Program	Schools Community Health Centres	Number of new or upgrade footpath projects connecting to schools.	Integrated Transport Strategy
	Remove barriers to participation: <ul style="list-style-type: none"> <li>Promote affordable use of Council facilities for all types of physical activities, all genders, ages, cultures and abilities including pools, casual sport, active-play in parks and gyms</li> </ul>	Recreation & Active Living, Belgravia Leisure	Sports Clubs, EFL, community groups, Migrant Information Centre, Disability Advisory Comm., Neighbourhood Houses	Gendered participation rates in pools and gyms. Number attending Friday free days for carers.	Cultural Diversity Policy Recreation & Open Space, Gender Equity, Equity Access & Inclusion
	Incrementally include women's, girls' and gender diverse change facilities in existing and new Council facilities and pavilions	Recreation & Active Living, Infrastructure & Engineering, Major Projects	Sports Clubs	Increase in new and existing Council facilities and pavilions with women's and gender diverse change facilities.	Gender Equity Sport & Recreation Plan
Accessible and inclusive parks, recreation facilities and Playspaces (cont.)	Apply for funding to enable women to be more physically active in winter months and evenings through lighting in high use parks.	Infrastructure & Engineering, Recreation & Active Living	Federal & State Governments	Funding secured. Proportion of high use parks where lighting has been added or upgraded to highest use open spaces.	Gender Equity Plan Equity Access & Inclusion Plan



What we aim to achieve	Actions	Responsibility of...	Partners	Measures of success	Related Plans
	Offer grants to support and enable community led active living programs and activities.	Grants, Early Years, Belgravia Leisure	Sporting clubs, Sport community groups	Number of grants. Outcomes as demonstrated in grant reporting.	Gender Equity Sport & Recreation Plan
	Support active living through, the Art and Sole project and community led initiatives including: <ul style="list-style-type: none"> <li>Activities for older adults</li> <li>Cultural projects</li> <li>Pathways for Carers.</li> </ul>	Health Promotion, Healthy & Active Ageing, Disability Inclusion Officer, Belgravia Leisure	Inspiro, EACH, Eastern Health Community Health, Schools, Mt Evelyn Neighbourhood House, Healesville Living & Learning	Increased walking in Lilydale by 1% (route counts before and after Art and Sole).  Number of grants awarded for walking and active communities projects.	
Active residents through walking and physical activity	Engage with residents to test neighbourhood priorities and bring their lived experience to create more walkable, accessible and safe local paths and activities.	Recreation & Active Living, Community development, Design & Place	Local communities	Number of projects using this method to inform design.	Integrated Transport Strategy Recreation & Open Space Strategy Equity Access & Inclusion Strategy
Culture change supports participation of women, transgender and gender diverse community	Support increased diversity of participation in sport: <ul style="list-style-type: none"> <li>Support sporting clubs in partnership with Community Health Services to implement the "Making a Place for Women in Sport" self-assessment tool</li> </ul>	Health Promotion, Recreation & Active Living	Community Health Services, Sporting clubs	Number of clubs implementing Making a Place for Women in Sport tool.	

What we aim to achieve	Actions	Responsibility of...	Partners	Measures of success	Related Plans
members in sport and recreation	Support clubs to lead greater inclusion through initiatives like PRIDE events.	Recreation & Active Living Health Promotion	Sports Clubs and Associations	Number of clubs hosting PRIDE and other Rainbow events.	Recreation & Open Space Strategy
Active modes of travel support employment, education and social connection	Advocate for funding to improve walking, cycling and transport routes.	Traffic & Engineering, RAL, Advocacy Coordinator, Health Promotion	Department of Transport, Bus Companies	Increased numbers of people walking on key routes.	Recreation & Open Space Strategy

**Priority 5** - priority actions for Council in partnership with others to improve mental wellbeing and social connection.

What we aim to achieve	Actions – Mental Wellbeing	Responsibility of...	Partners	Measure of success	Related Plans
Increased social connection through participation in group activities	Fund and partner with Neighbourhood Houses to run activities and offer social connections for local communities.	Community Partnerships & Wellbeing, Healthy & Active Ageing, Early Years	Neighbourhood Houses	New Neighbourhood House is established in Lilydale and meets funding KPIs.	Neighbourhood Houses Strategic Plan
	Fund projects via Council's grant programs that connect communities through community development, arts and heritage activities.	Community Partnerships & Wellbeing	Community organisations and not-for-profit groups	Number of grant projects that seek to strengthen social connection. Volunteer hours leveraged through grants.	Grants Policy, Healthy & Active Ageing Plan, Youth Plan, Early Years, Equity, Access and Inclusion, Reconciliation
	Support <i>friends of</i> groups to offer social connection through caring for our environment.	Environmental Stewardship	Friends of groups	Number of volunteers supported	Liveable Climate Plan
	Increase community participation in our places through installing seats in parks and activity centres to promote informal connections.	Design & Place, Community Development	Neighbourhood Houses	Number of new seats/benches	Living Places
	Facilitate Community Planning in and by communities and assist communities to lead their own planning and community building process.	Community Development	Township Groups, Community Planning Groups	Number of active community planning groups and processes.	Council Plan., Healthy & Active Ageing Plan, Youth Plan

What we aim to achieve	Actions – Mental Wellbeing	Responsibility of...	Partners	Measure of success	Related Plans
Civic engagement, including groups that are often not reached, has increased our social capital	Support community led decision making by empowering communities through: <ul style="list-style-type: none"> <li>Community Recovery Committees</li> <li>Leadership Programs.</li> </ul>	Grants, Community Development, Cultural Development	Community leaders as mentors and advisors	Community Recovery Committees established and delivering on local priorities. Skill Building and Leadership Development courses delivered annually.	Recovery Action Plan, Grants Policy, Equity Access & Inclusion
	Empower women with disability to participate in a range of opportunities e.g. Margins to Mainstream and leadership programs.	Disability Inclusion	WHE, Women with Disability Victoria, Outer East Hub	Number of women with disability participating in leadership development. Qualitative reporting on benefits by participants.	Recovery Action Plan Grants Policy Equity Access and Inclusion
Residents across Yarra Ranges have improved ability to access mental health services through our advocacy	Use partnerships with services and communities to advocate for increased mental health and wellbeing services; including in outlying areas.	Community Support, Community Partnerships & Wellbeing	Mental health services Community Health Centres Local services	Maintain or increase services and access by residents.	Council Plan
	Advocate on local issues relating to: <ul style="list-style-type: none"> <li>the NDIS</li> <li>funding for services that protect the mental wellbeing of people with disability and their carers.</li> </ul>	Disability Inclusion, Community Partnerships & Wellbeing	Outer East Community Inclusion Alliance, Disability Advisory Committee	Number of advocacy pitches/submissions.	Equity Access and Inclusion
	Advocate for newly arrived migrant communities and increase cultural competency of Council services.	Community Partnerships & Wellbeing, Advocacy Officer	Community Support Services, MIC	Self-reported improved access to services by leaders of newly arrived communities.	Cultural Diversity Policy

What we aim to achieve	Actions – Mental Wellbeing	Responsibility of...	Partners	Measure of success	Related Plans
	Support Oonah's advocacy for funding to construct and operate a community controlled Aboriginal health service - the Belonging Place.	Indigenous Development, Advocacy Officer	Oonah Aboriginal Health	Oonah achieves funding to construct and operate the new Belonging Place.	Council Plan, Reconciliation Policy
Community members at each age and stage of life have good mental wellbeing	Council contributes to the ongoing development of the Integrated Youth Mental Health Hub and Headspace outreach resources.	Youth Development	Inspiro, EACH, community service sector	Number of young people accessing Youth Mental Health Hub.	Council Plan, Youth Strategic Plan
	Consider the potential for negative mental health impacts of gambling when assessing licencing applications by Electronic Gaming Machine (EGM) venues.	Community Partnerships & Wellbeing, Strategic Planning	VLGA Local communities	Number of Council led submissions to the VCGLR on new EGMs applications.	MSS
	Harness Council's roles to protect against harms of problem gambling by: <ul style="list-style-type: none"> <li>Promoting alternative places and activities for people who are at risk of gambling harm.</li> </ul>	Creative Communities, Recreation & Active Living, Community Partnerships & Wellbeing	Victorian Responsible Gambling Foundation Gamblers Help VLGA	Resource attracted e.g. student placement, to compile alternate activities guide for the community.	Healthy & Active Ageing
	Increase Council inclusion of LGBTIQ+ community members in Council events and programs and provide culturally safe, inclusive services.	Youth Development, Cultural Development, Community Support Services	LGBTIQ+ organisations and community groups and advocates	Active promotion through use of the Rainbow Flag is evident in grant funded events. Professional development, formal and informal increases skills in inclusion.	Youth Plan Healthy & Active Ageing
Increased understanding of mental illness,	Seek funding to deliver more Mental Health First Aid training for community leaders and volunteers,	Community Partnerships & Wellbeing	Neighbourhood Houses	Number of programs delivered and number of participants.	Equity Access and Inclusion Strategy

What we aim to achieve	Actions – Mental Wellbeing	Responsibility of...	Partners	Measure of success	Related Plans
reduces stigma and ability to access services	partnering with Neighbourhood Houses and other sectors in the community.				
Carers of people with disability are supported and participate in their community	Deliver Pathways for Carers walks with Neighbourhood Houses to connect carers with each other, services and the benefits to mental health of being in nature.	Community Partnerships & Wellbeing, Disability Inclusion	Mt Evelyn Community House, Healesville Living & Learning (LLC) Centre, VMCH Carer supports	Number of Pathways walks delivered. Participant feedback demonstrates benefits.	Equity Access and Inclusion
	Promote carer supports, and empower carers: <ul style="list-style-type: none"> <li>to access services, activities, training, funding opportunities</li> <li>be a voice for their community through Council consultations</li> <li>by mentoring Pathways leads.</li> </ul>	Disability Inclusion,	Carers Vic, Villa Maria, Caladenia, Mt Evelyn Community House, Healesville LLC	Number of disability newsletters.	Equity Access and Inclusion Strategy
Residents have more volunteering opportunities	Support a vibrant volunteering culture and opportunities: <ul style="list-style-type: none"> <li>Advocacy to support Eastern Volunteers</li> <li>Consider viability of more diverse volunteering opportunities, e.g. episodic, short-term, flexible options</li> </ul>	Advocacy Coordinator, Meals on Wheels, Youth Development, Environmental Stewardship, Healthy & Active Ageing, Early Years'	Eastern Volunteers, Yarra Ranges Emergency Relief Network, Neighbourhood Houses	Volunteer numbers sustained or increased.	Healthy & Active Ageing Plan Youth Plan Early Years Plan



What we aim to achieve	Actions – Mental Wellbeing	Responsibility of...	Partners	Measure of success	Related Plans
Increased social housing means residents have safe, secure and affordable homes	Advocate to address gaps in social housing and homelessness services and increase community awareness of the need for social housing.	Community Partnerships & Wellbeing	Strategic Planning, 12 Charter Councils, Yarra Ranges Housing Advocacy Group	Number of new social housing dwellings developed in EMR.	Guiding Principles for Housing and Homelessness 2020, LGA Charter on Housing and Homelessness
People experiencing homelessness connect with support services	Connect homeless people to services and housing supports through referral and information sharing.	Outreach Officer, Health Promotion Coordinator, Council Links	Police, Country Fire Authority, Anchor, Holy Fools, Salvation Army, Stable One	Number of referrals made by Council.	Homelessness Protocol, LGA Charter on Housing and Homelessness

**Priority 6 -** priority actions for Council in partnership with others to reduce and prevent violence against women

What we aim to achieve	Actions	Responsibility of...	Partners	Measure of success	Related Plans
Gender equality is increased through the work of Council, community and partners	Community support for action on gender equality through grant funded programs.	Community Partnerships & Wellbeing, Cultural Development	Inspiro, EACH, Eastern Health Community Health, Women's Health East (WHE)	Number of grants funded and outcomes reported.	Gender Equity Action Plan
	Facilitate women's leadership through partnerships and grant funded projects: <ul style="list-style-type: none"> <li>Women with disability are empowered to become leaders.</li> </ul>	Grants Team Disability Inclusion Health Promotion Cultural Development	Inspiro, EACH, Eastern Health Community Health, WHE	Number of women with disability participating in leadership and skill building programs offered by Council.	Gender Equity Action Plan
	Work with Women Health East and regional partners on intersectional, coordinated, prevention of violence against women, through the <i>Together for Equality &amp; Respect Strategy (TFER)</i> .	Health Promotion	WHE, Regional Councils, Youth Development	Council participates in the strategy refresh and is a signed-up partner to TFER.	Gender Equity Action Plan
Women have a range of leadership roles and are recognised and valued	Promote business women through the annual Women on the Go conference. Recruit emerging leaders from diverse backgrounds to leadership development program/s.	Economic Development and Investment Community Partnerships & Wellbeing	Knox City Council, Maroonah City Council, Businesses, Women leaders	Number of women participating in annual Women on the Go conference. Number of emerging leaders from diverse backgrounds participating in programs.	Economic Development and Investment

What we aim to achieve	Actions	Responsibility of...	Partners	Measure of success	Related Plans
The impact of gender stereotypes is reduced	Early years services promote gender equality through prevention initiatives.	Health Promotion Early Years Gender Equity Team	Inspiro, EACH, Eastern Health Community Health, WHE	Number of early childhood settings involved and receiving products (posters, book lists etc).	Gender Equity Action Plan
	Lead promotional campaigns to tackle stereotypes during 16 Days of Activism - focusing on intersectional factors.	Health Promotion, Early Years, Gender Equity Team	Inspiro, EACH, Eastern Health Community Health, WHE	Reach of participation by women with intersecting impacts for their wellbeing.	Gender Equity Action Plan
	Youth Development promotes leadership for males, females and gender diverse people.	Youth & Middle Years	Schools, Rainbow, PRIDE, community groups	Diversity of young people participating (number of and gender disaggregated data).	Youth Plan
Family violence in all its forms is reduced	Council services and officers respond to and refer people experiencing family violence.	Maternal & Child Health, All of Council	EDVOS, Eastern Community Legal Centre	Number of referrals and delivery of supports	Gender Equity Action Plan
	Track local data on gendered violence to inform Council work and resource allocations: <ul style="list-style-type: none"> <li>• Monitor new evidence</li> <li>• Consider new strategies in prevention that can be applied locally.</li> </ul>	Community Partnerships & Wellbeing, Gender Equity Team, Community Support	WHE, EDVOS, Eastern Community Legal Centre	Council has up to date data on rates of gendered violence.  New evidence is included in project design to reduce family violence (qualitative).	Gender Equity Action Plan

People are valued and respected at every age and stage of life	Promote and implement the <i>Preventing Abuse of Older People Framework</i> and: <ul style="list-style-type: none"> <li>Tackle ageism in our organisation and the community</li> <li>Promote Elder Abuse Day annually to raise awareness of this issue</li> <li>Partner with ECLC to support older adults who experience Elder Abuse.</li> </ul>	Healthy & Active Ageing Communications	Eastern Community Legal Centre, VicPol, Eastern Elder Abuse Network, Inspiro, Seniors Clubs, U3As, Community Partnerships & Wellbeing	Number of promotions/campaigns to address ageism.  Events and communications on Elder Abuse.	Healthy & Active Ageing Plan  Equity Access and Inclusion Strategy
People more likely to experience intersecting disadvantage are supported by Council services and their communities	Council actively considers intersectionality when designing strategies to prevent violence and acts to include and support: <ul style="list-style-type: none"> <li>women with disability</li> <li>women from culturally diverse communities</li> <li>Indigenous women</li> <li>LGBTIQA++ people</li> <li>women with low socio-economic status.</li> </ul>	Community Development, Health Promotion, Youth Team Disability Inclusion, Gender Equity Team, Community Support	Community Health Centres, Women's Health East, EDVOS, Community groups and organisations	Project and engagement plans include actions to include diverse community members.	Youth Plan Equity Access and Inclusion Plan
	Family violence prevention projects include LGBTIQA+A+ community members.	Youth Team, Health Promotion	Community Health Centres, WHE, EDVOS, community groups	Prevention work includes images and references to diverse relationships.	Youth Plan
Men are leaders of the change needed to eliminate violence against women	Promote healthy masculinity through grant funded projects, partnerships and best practice strategies.	Gender Equity Health Promotion Youth Team Community Development	Community Health Centres, Women's Health East, EDVOS, community groups	Number of projects delivered	Youth Plan

**Priority 7** - priority actions for Council in partnership with others to prevent harm from alcohol, tobacco and other drugs

What we aim to achieve	Actions	Responsibility of...	Partners	Measure of success	Related Plans
Partnership approaches strengthen responsible consumption of alcohol	Participate in the Eastern Metropolitan Region (EMR) Alcohol Flagship Partnership to create changes in alcohol culture to reduce harm.	Community Partnerships & Wellbeing	OEPCP, Access Health, Inspiro, EACH, Eastern Health Community Health, EMR Councils, Families Fairness & Housing	Program evaluation demonstrates cultural change and harm reduction.	Youth Plan
	Encourage Council funded festivals and events to be alcohol free.	Cultural Development, Health Promotion	Community groups, Grants Team	Proportion of alcohol-free festivals and events.	Youth Plan
	Support development of an action plan by the Local Drug Action Team (LDAT) to guide funding applications & projects including: <ul style="list-style-type: none"> <li>• <i>Our Shout</i> delivered over 2-3 years.</li> </ul>	Eastern Health Community Health Health Promotion	LDAT: Victoria Police, Department of Education & Training, Inspiro	Agreed Plan adopted by all partners. Funding attracted for projects in Yarra Ranges. Projects delivered.	Youth Plan
	Partner to deliver Sunday Sessions: a prevention initiative providing a free physical activity class at a range of leisure centres.	Inner East - Access Health Belgravia Leisure	EMR Councils	Registration numbers (including gender disaggregated data). Participant evaluations.	
Community knowledge and cultures support safer alcohol consumption	Promote and develop social media messaging: <ul style="list-style-type: none"> <li>• Standard drinks guidelines</li> <li>• Knowing warning signs</li> </ul>	Health Promotion	Eastern Health Community Health, Inspiro	Number of hits for social media campaigns.	Youth Plan  Healthy and Active Ageing Plan

What we aim to achieve	Actions	Responsibility of...	Partners	Measure of success	Related Plans
	<ul style="list-style-type: none"> <li>Having at least two alcohol free days a week</li> <li>Targeting the 40+ age group of drinkers</li> <li>Increased cancer risks related to alcohol</li> </ul>				
Council uses its regulatory roles to minimise negative community amenity impacts related to alcohol outlets	Refer licensing applications that significantly increase alcohol outlet density for Social Planning assessment.	Statutory Planning, Community Partnerships & Wellbeing, Economic Development & Investment	Strategic Planning	Number of referrals for high impact venue applications.	Municipal Strategic Statement
	Work within Council to balance the economic benefits of alcohol for businesses with reducing health and social harms.				
Our community has reduced deaths from tobacco consumption	Support Oonah to deliver community designed and controlled tobacco cessation programs that support community members to quit.	Oonah, Indigenous Development	Federal & State Governments	Partnership funding successful.	Reconciliation Policy and Framework for Action
Young people are protected from smoking uptake	Partner with MAV to deliver spot checks of premises to prevent minors purchasing tobacco	Environmental Health	MAV	Number of Sale to Minors checks undertaken.	
	Monitor the evidence on harms from e-cigarettes and prevention strategies by other levels of government.	Youth Development	State	Emerging evidence provides confidence for action or prevention work.	Youth Plan
	Offer tobacco, drug and alcohol-free activities and events for young people.	Youth Development	State funding - Freeza	Number of events. Participation rates (gender disaggregated).	Youth Plan



What we aim to achieve	Actions	Responsibility of...	Partners	Measure of success	Related Plans
Local information on drug use informs work to reduce harms in communities	Work with community organisations to understand the extent and effects of drug use in various settings to: <ul style="list-style-type: none"> <li>• Inform shared action and funding bids.</li> </ul>	Health Promotion, LDAT, Youth Development	Indigenous Advisory Committee, Sports Clubs, Schools	Credible statistics and community data on drug use in Yarra Ranges is available.	Youth Plan
	Strengthen protective factors* to reduce harmful use of prescription drugs: <ul style="list-style-type: none"> <li>• Support families, children and young people and intervene early to embed positive behaviours</li> <li>• Build protective factors approach with LDAT as a foundation for work with communities.</li> </ul>	LDAT, Health Promotion	Early Years, Youth Development Healthy Active Ageing	Increased knowledge of LDAT members informs: prevention and intervening early in child development to strengthen protective factors.	Youth Plan Early Years Plan
Children are supported by their families and communities and are resilient and protected against harms from alcohol and other drugs	Support strong families and children through Council services and programs to protect against alcohol and other drug related harms: <ul style="list-style-type: none"> <li>• Best Start</li> <li>• Upper Yarra Partnership</li> <li>• Maternal &amp; Child Health</li> <li>• Supported Playgroups.</li> </ul>	Community Support Services	Community Partnerships & Wellbeing	Participation in programs. Partner commitment to Upper Yarra Partnership renewed.	Early Years Plan, Youth Plan

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# Appendix 1: Abbreviations

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ABCD	Asset Based Community Development
CALD	Culturally and linguistically diverse
CRC	Community Recovery Committees
DFFH	Department of Families, Fairness and Housing (formerly DHHS)
DH	Department of Health (formerly DHHS)
DHHS	Department of Health and Human Services
EDVOS	Eastern Domestic Violence Service
EHCH	Eastern Health Community Health
EMPHN	Eastern Melbourne Primary Health Network
EMR	Eastern Metropolitan Region
ERL	Eastern Regional Libraries
LDAT	Local Drug Action Team
LGBTIQA++	Lesbian, gay, bisexual, transgender, intersex, queer or questioning, plus
MOU	Memorandum of understanding
NH	Neighbourhood Houses
OEPCP	Outer East Primary Care Partnership
RMIT	Royal Melbourne Institute of Technology
WHE	Women's Health East
WHO	World Health Organisation

# Appendix 2: Gender and intersectionality - health factors

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Prevalence of factors associated with each priority varied between adults of different genders and other population groups in Victoria in 2018. (25) The prevalence of each risk or protective factors was assessed for the following sociodemographic groups and is reported below where there are significant differences:

- men and women
  - country of birth - born in Australia and overseas
  - language spoken at home - English and other
  - Aboriginal and Torres Strait Islander status and all other adults
  - Experienced discrimination and did not experience discrimination
  - Employed, unemployed and not in the labour force
  - Total annual income - less than \$40,000, \$40,000 to less than \$100,000 and \$100,000 or more.
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## Priority 3 – Increase healthy eating

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- Fruit and vegetable consumption: Prevalence of meeting the fruit and vegetable consumptions guidelines was similar across socio-demographic groups.
- Take away food: More men than women had meals or snacks from take-away places more than once a week.
- Savory or salty snacks: Adults born in Australia and those who spoke English at home were more likely to consume savory or salty snacks three or more times per week, than comparable groups.
- Food insecurity: Aboriginal and Torres Strait Islanders had higher prevalence of food insecurity than all other adults, as did unemployed adults, adults with low incomes and those who had experienced discrimination in the last year.

## Priority 4 – Increase active living

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- Sufficient physical activity: Adults who spoke English at home, those who were employed and adults with annual income more than \$100,000 were more likely to meet the physical activity guidelines, than comparable groups.

## Priority 5 – Improve mental wellbeing and social connection

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- Did not speak to anyone on previous day: Adults who spoke a language other than English at home, those not in the labour force and those on an annual income less than \$40,000 were more likely to not speak to anybody on the previous day, than comparable groups.



- Social and emotional support: Adults who spoke a language other than English at home, those who had experienced discrimination in the last year, the unemployed and those on an annual income less than \$40,000 were more likely to rarely or never get the social and emotional support they need, than comparable groups.
- Feel valued by society: adults who had experienced discrimination in the last year, who were unemployed or not in the labour force, or earned less than \$40,000 annually were more likely to never or not often feel valued by society, than comparable groups.
- Life satisfaction: Adults born in Australia, those who had experienced discrimination in the last year, those who were unemployed or not in the labour force, and those with annual income less than \$40,000 were more likely to report low or medium life satisfaction, than comparable groups.
- Psychological distress: Aboriginal and Torres Strait Islanders, adults who had experienced discrimination, unemployed adults and those not in the labour force, and those with annual income less than \$40,000 were more likely to report high or very high psychological distress, than comparable groups.

#### Priority 7 – Reduce harmful alcohol and drug use

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##### Alcohol

- Lifetime risk: Adults born in Australia, those that spoke English at home, and those with annual income of at least \$100,000 were more likely to drink alcohol weekly at a level that increased their risk of alcohol-related harm, than for comparable groups.
- Single occasion risk: Adults born in Australia, those that spoke English at home, employed adults, and those with annual income of at least \$100,000 were more likely to drink alcohol weekly at a level that increased their risk of injury from a single occasion of drinking alcohol, than for comparable groups.

##### Tobacco

- Daily smokers: Aboriginal and Torres Strait Islanders, adults who have experienced discrimination in the last year, and those with annual income of less than \$40,000 were more likely to smoke daily, than comparable groups.