

GOLDEN PLAINS SHIRE

MUNICIPAL PUBLIC HEALTH AND WELLBEING PLAN 2021-2025

MONITORING & EVALUATION REPORT

YEAR 3 2023-2024

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We are working to achieve better health and wellbeing outcomes for the Golden Plains Shire (GPS) community through the Municipal Public Health and Wellbeing Plan (MPHWP).

We work collectively with our partners to enhance coordination in planning, monitoring and evaluation, as well as strengthening the delivery of activities for our community.

In year 3 (2023-24) we present our third collective evaluation report for the 2021-2025 planning period.

EXECUTIVE SUMMARY

Council is required to prepare a MPHWP every four years and review it annually (Public Health and Wellbeing Act 2008). At GPS we have incorporated our MPHWP in the Council Plan 2021-2025 to reflect our view that 'Health and wellbeing is everyone's responsibility'.

Five health priority areas are identified in the MPHWP and include:

- Improving Mental Health
- Increasing Active Living
- Preventing Family Violence and Advancing Gender Equity
- Increasing Healthy Eating
- Tackling Climate Change and its Impact on Health

GPS has an Action Plan bringing together the MPHWP activities of 23 partner organisations both external (Community Health organisations, Primary Care providers, Sport Assembly agencies, not for profit (NFP) health services) and internally throughout the whole of council (11 internal council Departments/Units).

Partners evaluated their activities in the Action Plan using customised reporting templates and discussed their activities at the annual partner workshop.

There was a high volume of health and wellbeing activities undertaken as part of the MPHWP Action Plan across all priority areas. A total of 318 activities were listed with 76 per cent of these activities evaluated representing an increase from 69 per cent in year 2.

Themes emerged around:

- Collective action/collaboration
- Communication and promotion
- Engagement
- Efficient use of resources
- Program design and delivery
- Accessibility

Year 3 has reported both similarities and differences to previous years. Collective action, collaboration and communication have been core elements, and it was evident that partners recognise the significance of capacity building to enhance activities. All years have acknowledged the importance of engaging the community in activities, recognising them as vital to what we do. Year 3 of the MPHWP Action Plan has seen widespread collaboration between internal council departments, external partner organisations and additional contributors throughout the shire. This evaluation has been effective in documenting short- and medium-term outcomes, measuring the collective success of our work across our five health priority areas.

The plan for year 4 of the MPHWP 2021-2025 is continued implementation of our Action Plan. The annual partner workshop will continue and at the request of partners, we will develop a network for partners to communicate and share resources and contacts for their work under the MPHWP. The evaluation templates will be reviewed and

improved to enhance efficiency and ease of use. This report will be shared with all partners and Council to communicate and share our learnings and to inform the remaining 12 months of the 2021-2025 plan.

INTRODUCTION

Every 4 years, Council is required to prepare a Municipal Public Health and Wellbeing Plan (MPHWP), as a requirement under the Public Health and Wellbeing Act 2008. A strategic decision was made to incorporate the MPHWP into the Council Plan and the Golden Plains Shire Council Plan 2021-2025 was adopted on 29 June 2021. Incorporating health and wellbeing matters as an integrated responsibility across all areas of council reflects the view that 'Health and wellbeing is everyone's responsibility'.

In year 3 we present our third collective evaluation report reflecting internal and external partner assessments of the health and wellbeing activities listed in our Health and Wellbeing Action Plan 2021-25.

Health Priority Areas

The MPHWP identifies five Health Priority Areas. These areas align with the Council Plan vision and community priorities of community, liveability, sustainability, and prosperity. The five Health Priority Areas are:



IMPROVING MENTAL WELLBEING



INCREASING ACTIVE LIVING



**PREVENTING FAMILY VIOLENCE
AND ADVANCING GENDER EQUITY**



INCREASING HEALTHY EATING



**TACKLING CLIMATE CHANGE
AND ITS IMPACT ON HEALTH**

Action Plan

To plan and progress MPHWP priorities, a whole of council and external collaborative partnership approach was undertaken to develop the Health and Wellbeing action plan 2021-2025. This action plan involved the collaboration and input from partner organisations including around 16 external organisations and 17 internal Golden Plains Shire Council departments/units. The Action Plan is an ambitious undertaking with around 320 activities (any one activity may have more than one partner working on it). These activities all contribute to achieving our five health priorities.

Evaluation methodology

An annual review of the Golden Plains Shire MPHWP 2021-25 is a requirement of the Public Health and Wellbeing Act 2008, Section 26 (4) states "A Council must review its MPHWP annually, and if appropriate, amend the Plan". The Community Development team have created a template designed to capture process and impact outcomes of partner activities, to document our action plan progress. This year 3 review was completed by the Golden Plains Shire Council Community Development team with thanks from our internal and external partners.



Figure 1. Summary of Evaluation Outcomes

A personalised reporting template was developed for each partner, listing their activities within the plan for year 3. Partners completed the templates between March to July 2024 ¹.

We asked:

- What did we do?
- How well did we do it?
- What are the changes we are seeing?

Partner workshop

All partners were invited to attend an online workshop. Partners participated in facilitated discussions on the five MPHWP priorities, sharing insights, experiences and knowledge of their activities. Topics for discussion included strengths and successes, challenges, threats, solutions and new ideas.

RESULTS

Partners

The following 23 organisations/internal departments have been 'active' partners in working towards our five Health Priority Areas for year 3.

External	Internal
Ballarat Community Health (Ballarat)	Golden Plains Shire, Community Inclusion
Ballarat Community Health (Dereel)	Golden Plains Shire, Community Development
Bannockburn Surgery	Golden Plains Shire, Community Safety
Barwon Public Health Unit	Golden Plains Shire, Economic Development
Geelong Regional Library Corporation	Golden Plains Shire, Environment and Open Spaces
Geelong YMCA	Golden Plains Shire, Health and Wellbeing
Haddon Community Learning Centre	Golden Plains Shire, Childrens Services
Hesse Rural Health	Golden Plains Shire, People and Performance
Leisure Networks	Golden Plains Shire, Recreation and Community Facilities
Sports Central	Golden Plains Shire, Strategic Planning
Women's Health Grampians	Golden Plains Shire, Youth

¹ See Appendix 1 Evaluation Templates.

Table 1: MPHWP Action Plan Partners

There was a total of 243 activities evaluated representing 76 percent of all activities listed on the MPHWP Action Plan. *Improving mental wellbeing* was the priority area with the highest number of activities evaluated.

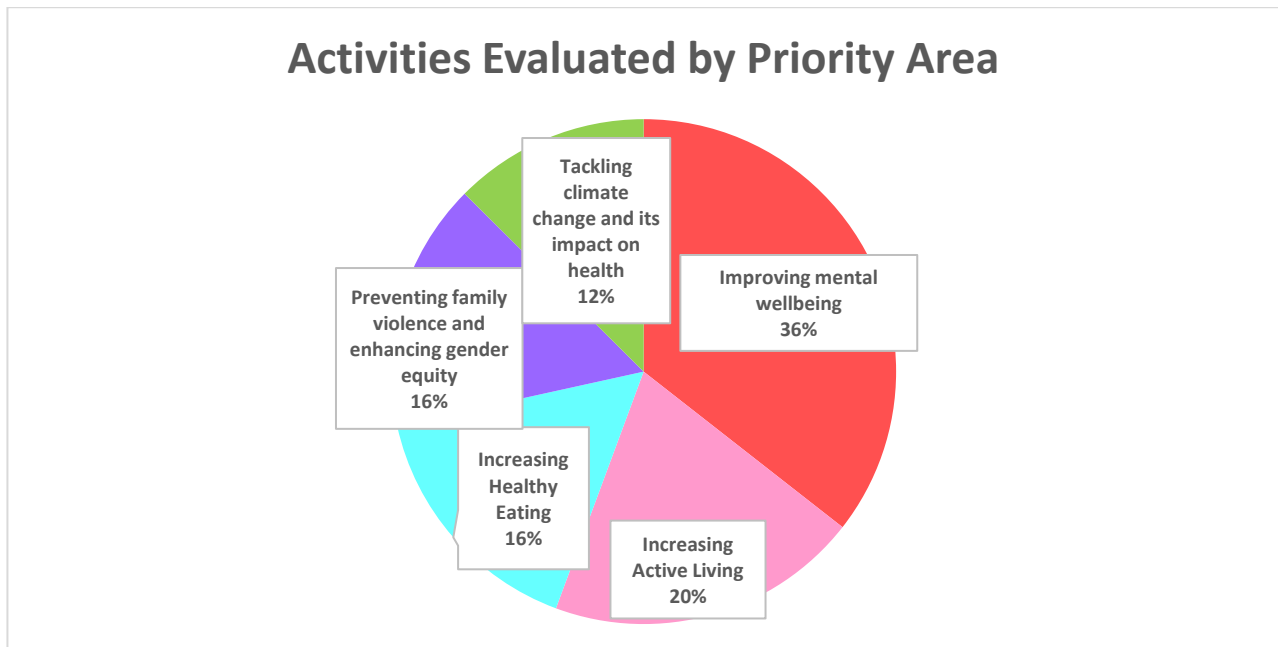


Figure 2. Activities Evaluated by Priority Area

What did we do?

Partners involved

A substantial number of additional partners and contributors were identified reflecting high levels of collaboration to deliver activities. These contributors spanned all Health Priority Areas, ranging from community groups, education services, schools, government organisations, health services, sporting clubs, sporting organisations, service providers and regional networks. Of all 177 additional contributors, the majority of partnerships occurred between existing MPHWP partners and local community groups such as the men's shed.

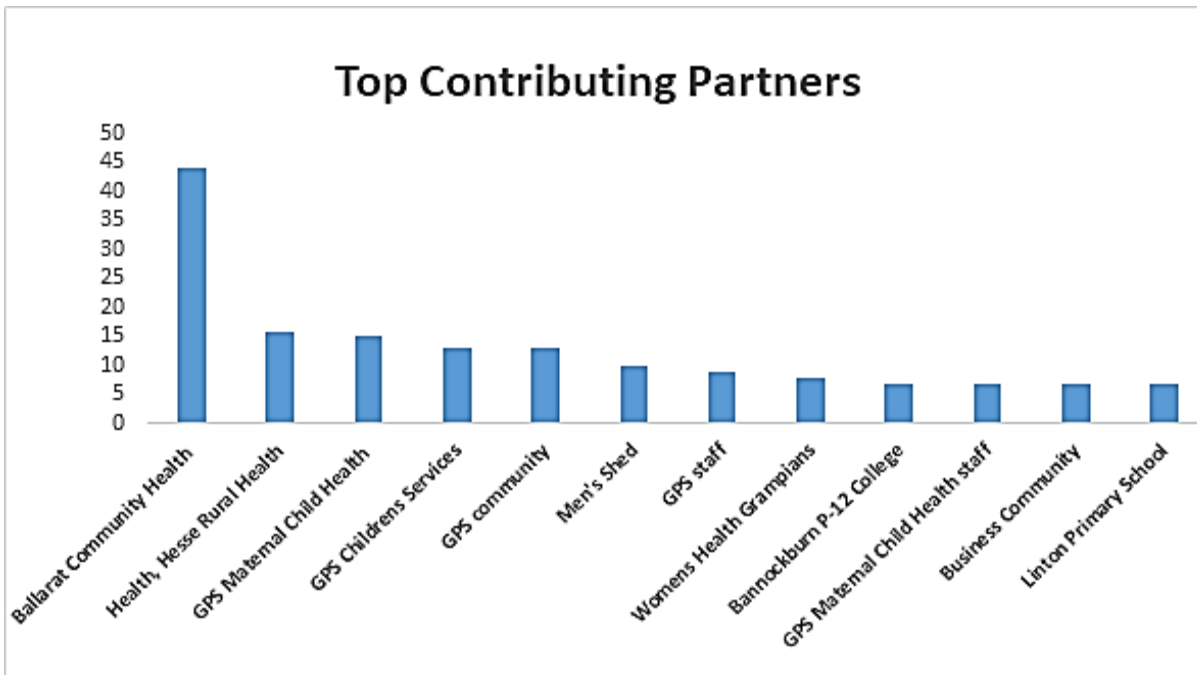


Figure 3. Top Contributing Partners

Target population

Partners reported target populations spanning all population age groups from newborn babies to the elderly. Other target populations included specific vulnerable groups, employees, students, entire communities and hobbyists. Asking this question provided a basis for the identification of opportunistic or new populations who may also benefit from an activity.

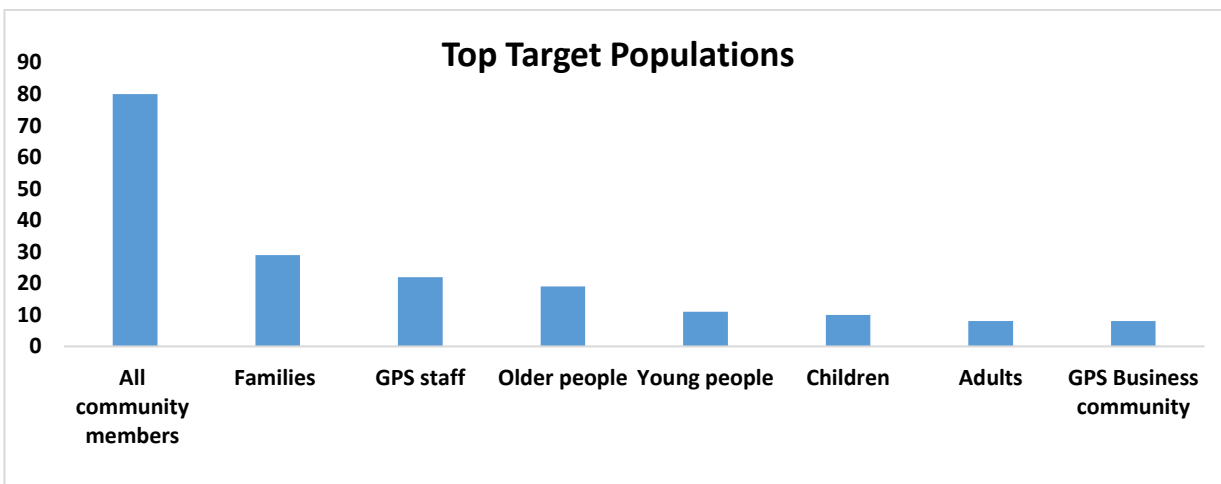


Figure 4. Top Target Populations

Reach

The estimated reach for all activities spanning across the 5 priority areas was 131,658. This reach estimate encompasses participation, social media and other advertising/promotions. The reach for all activities for year 3 of the MPHWP Action Plan represents over 5 times that of the total population of Golden Plains Shire. Increasing active living was the priority area recording the highest reach.

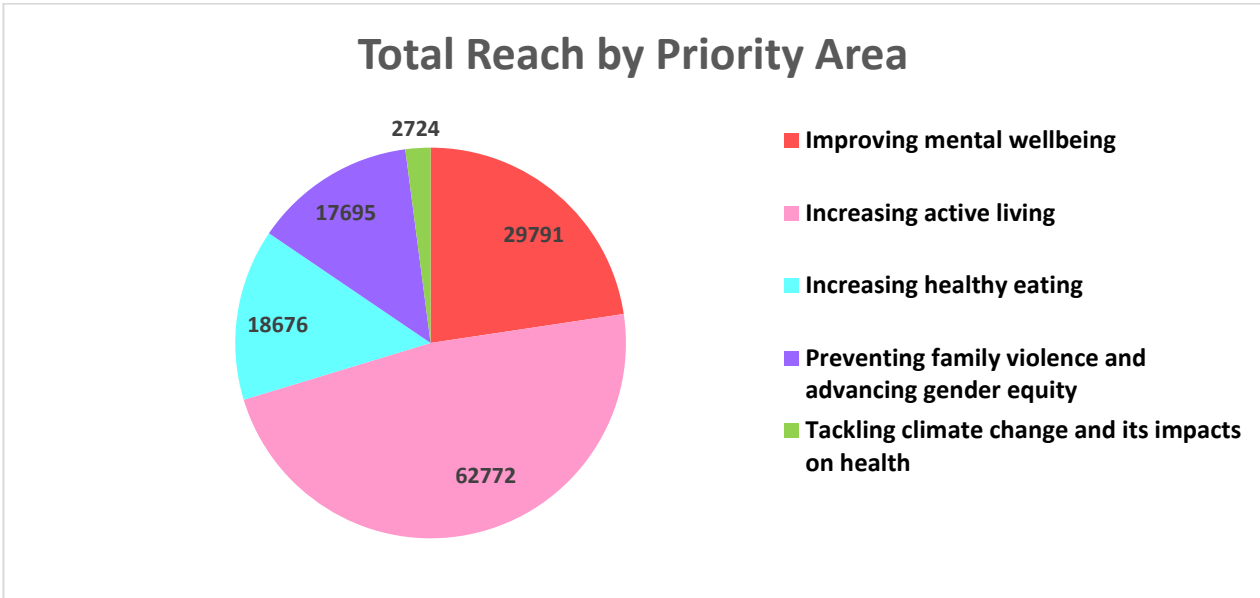


Figure 5. Total Reach by Priority Area

How well did we do it?

What worked well and what could be done differently?

Partners identified multiple aspects of programs and activities which both worked well and could have been done differently. These were categorised into the following broad areas:

Theme	Worked well?	Could be done differently?
Collective action/ Collaboration	<ul style="list-style-type: none"> Establishing many additional partnerships. Leveraging off specialists, industry professionals and existing programs. Intersecting activities to cover an array of priorities. Participation in steering committees, forums and workshops. Knowledge and information sharing. 	<ul style="list-style-type: none"> Information sharing in some instances. Maximising partnership opportunities.
Communication and promotion	<ul style="list-style-type: none"> Communication and promotion. Using a broad range of locations and platforms to promote activities. Contact resources were widely distributed. Leveraging promotion off other programs to enhance reach. 	<ul style="list-style-type: none"> Advertising widely and early to attract participation. Clear promotion planning and design.
Engagement	<ul style="list-style-type: none"> Engagement from community members, partners, staff and leaders. Broad target populations. Connections to indigenous groups. Established rapport with the community. Recruiting new participants. 	<ul style="list-style-type: none"> Schools can be very difficult to engage. Engaging community groups and partners could be improved. Disengaged participants.
Adaptation	<ul style="list-style-type: none"> Successful program expansion. Flexible delivery methods and large array of times and locations. 	<ul style="list-style-type: none"> Poor weather interrupting activities. Utilise existing processes instead of making one from scratch. Using a variety of delivery formats.
Budgets, funding and resources	<ul style="list-style-type: none"> Event catering. Use of funding applications and donations. Infrastructure, resources and supplies were well utilised. 	<ul style="list-style-type: none"> Resource limitations impede the progress of activities creating reliance on external funding streams, annual budgets and staffing resources. Insufficient resources impacted programs.
Infrastructure, locations and facilities	<ul style="list-style-type: none"> Venue and facility upgrades promoting diversity. Use of outdoor venues. 	<ul style="list-style-type: none"> Inadequate equipment. Lack of available infrastructure.
Program design and delivery	<ul style="list-style-type: none"> Using experienced guest speakers and facilitators. Activities that achieve their aims and objectives. Established and sustained programs. Intergenerational programming. Environment and climate considerations in programming. 	<ul style="list-style-type: none"> Tight timelines and resource limitations. In some instances, the activities themselves could have been improved. Multi focus programs and competing priorities impact activities. A need for clear processes and structure. Less quantity and better quality.
Accessibility and travel	<ul style="list-style-type: none"> Online booking systems and remote attendance. Improved infrastructure and equipment for better access. Subsidised participation. 	<ul style="list-style-type: none"> Geographical and financial access. Delivery methods. Diverse/underrepresented group contributions. Registration processes and payment methods.
Evaluation and reporting	<ul style="list-style-type: none"> Formal evaluation and planning processes. Feedback processes. 	<ul style="list-style-type: none"> Participation data collection methods. Follow up evaluations.
Training and capacity building	<ul style="list-style-type: none"> Mentoring opportunities for staff. Embedding education into activities and programs. Improved understanding of food systems for staff. 	<ul style="list-style-type: none"> Content knowledge for staff. Capacity of staff could be developed.
Community involvement	<ul style="list-style-type: none"> Community involvement is identified as an important element to successful activities. 	<ul style="list-style-type: none"> Disengaged community participants.

Table 2. What Worked Well and What Could have been done Differently.

Did your activity encounter any obstacles or barriers?

Of those barriers listed by partners, the majority centred around restrictions to budgets, staff capacity, resources and time. Lack of engagement was also highlighted as a barrier.

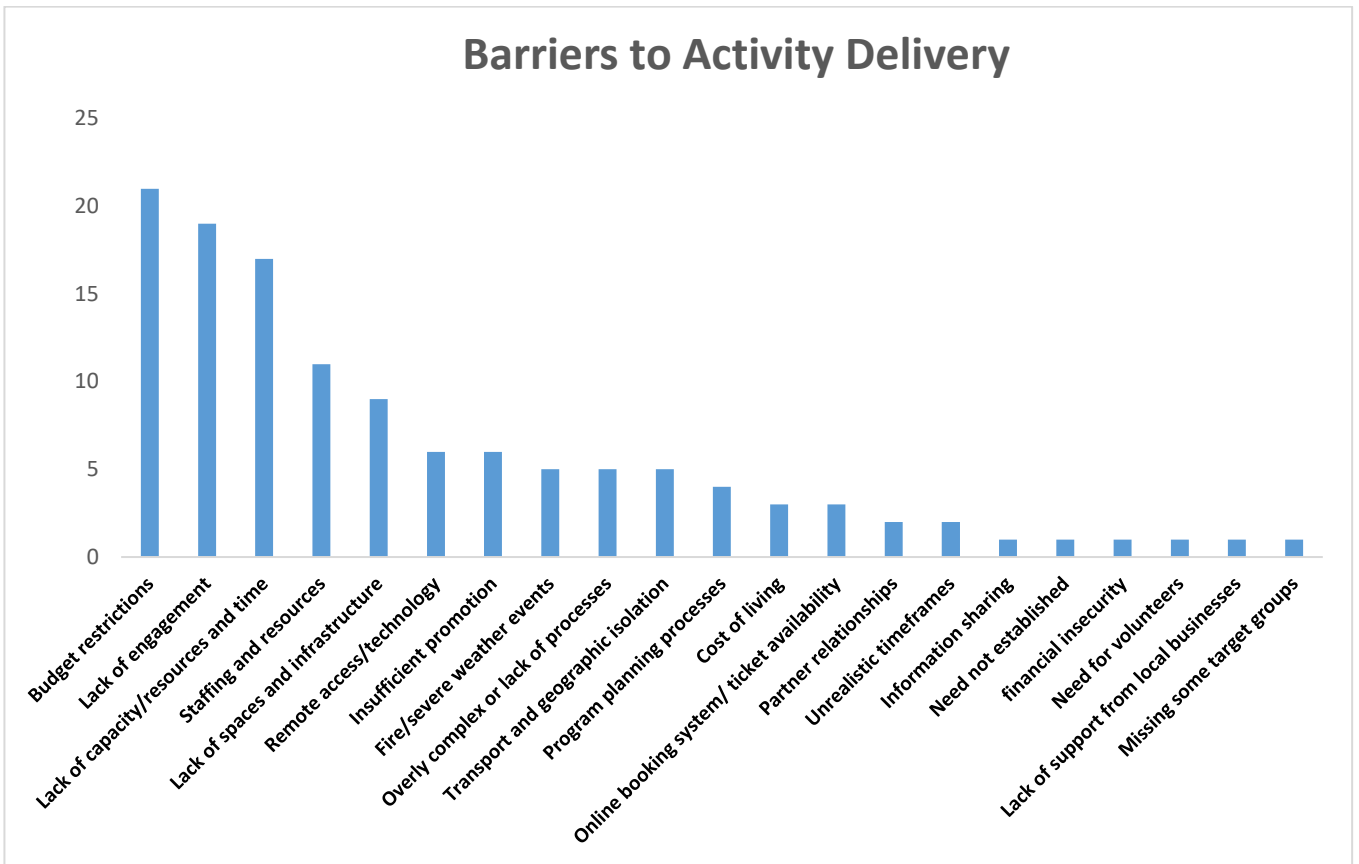


Figure 6. Barriers to Activity Delivery.

What are the changes we are seeing?

What impacts/outcomes have resulted from the activity?

Of the total listed activities, 162 underwent some form of impact/outcome evaluation. Improving mental wellbeing activities had the highest percentage of activities evaluated.

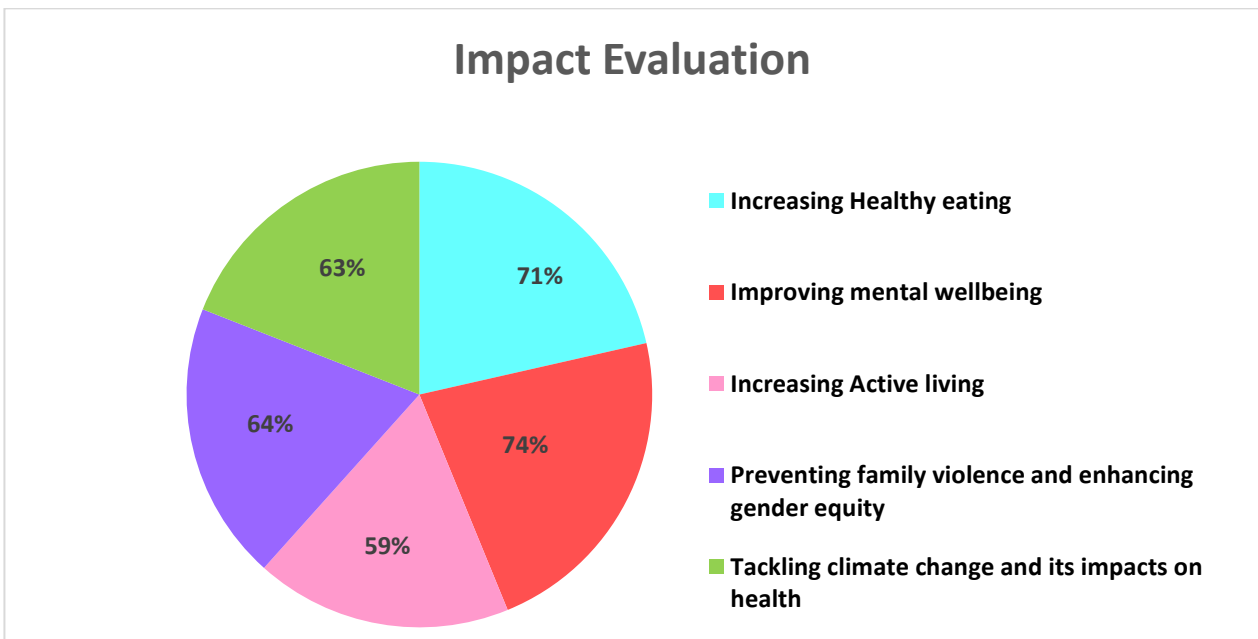


Figure 7. Impact Evaluation by Priority Area

The impacts/outcomes reported by partners have been categorised into the following broad categories.

Improved access: Including access to supports, health services, resources and information as well as improved access to community gardens, healthy food and opportunities to be physically active. A prominent population identified by partners when reporting on access were those geographically isolated communities and individuals.

Knowledge sharing, promotion and communication: Partners have reported improved communication and promotion of activities across a variety of priority areas and programs. Knowledge sharing and collaboration were key themes.

Strengthened partnerships, networks and relationships: It was noted that established and sustained partnerships and positive rapport with community were beneficial outcomes from actions within the plan.

Knowledge, skills and behaviours: Increased awareness and knowledge across areas such as service availability and provision, engaging and communicating with peers, improved knowledge about healthy food choices, active living and connecting with nature. Other impacts included physical balance improvements and improved health and digital literacy.

Increased participation: Increased participation over time in both the activities themselves and other similar activities was identified as a positive impact throughout year 3. Enhanced utilisation of facilities such as play spaces was also noted. Many partners documented that increases in participation appeared to be sustained.

Improved community connection and resilience: An environment of social inclusion and connection has been widely reported by partners across many activities. Improved resilience and connection was linked to enhanced community safety.

Facilities, infrastructure and the environment: Environmental impacts have been documented in areas such as improved garden health and a culture of gardening self-sufficiency. Partners have reported that fostering a learning and knowledge sharing environment has been beneficial to activities. Upgrades to facilities such as breastfeeding friendly places was also recorded.

Improved program design, processes and results: Auditing, evaluation and attention to community feedback has ensured an open-minded approach to program and activity delivery and design allowing for refinement and a better focus on the activities that the community wants and needs. Improved processes, program expansion, and better-quality program delivery has been consistently noted by partners.

How did you measure these impacts/outcomes?

Partners reported measuring their activities impacts and outcomes in a variety of ways, the most common being informal feedback from participants.

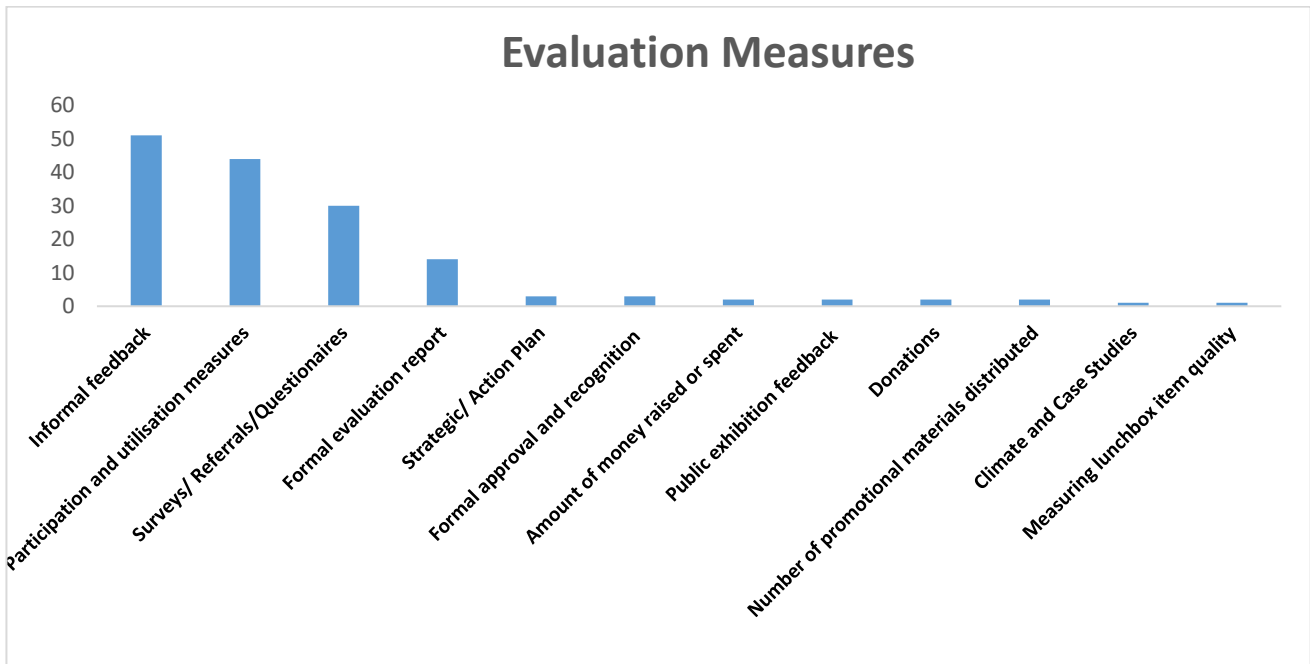


Figure 8. Evaluation Measures

Were there any unintended impacts/outcomes from the activity?

Of the unintended impacts identified by partners, the majority were deemed positive. Unintended impacts varied widely, from increases in positive relationships and participation, to program expansion, and new partnership opportunities. There were new key target population groups identified and surprise interest from different groups to the target populations. Partners noted that some unintended impacts were improved knowledge and understanding in program processes and design resulting in better planning for the future. This outcome was considered positive.

Of those negative unintended impacts, the majority were documented in the areas of resource limitations, and community disengagement. It was noted that some activities were dependant on trust and rapport being established, and this took longer than anticipated. In one activity aiming to address family violence, it was thought that the program may have contributed to a new reluctance from families to disclose incidents.

Partner forum

Across all priority areas, partners reported challenges to access, resources and budgeting. Threats were deemed to include the geographically dispersed nature of GPS making program delivery difficult. It was noted that grant and funding opportunities are becoming increasingly competitive and difficult to secure likely due to increased challenges to financial resourcing. Some solutions identified by partners included recognizing the vital importance of partnerships and leveraging off existing established work to reduce duplication and maximise efficiencies. There was an emphasis on partners establishing community needs through rigorous processes and carefully planning and designing programs. Many partners highlighted the importance of knowledge and information sharing to reduce the strain on resources and unanimously agreed that a shared population health data source and resources for health partners would improve activities.

Strengths included effective partnerships and, in many cases, high social engagement from the community. The focus on prevention was considered a strength and many partners noted that awareness of the impacts on climate on health and also gender equity issues are increasing in the Shire.

New ideas to improve activities included collecting and sharing more data- especially on climate risks and health, better access to health services in the shire via transport support and improved food systems and sustainable farming practices.

Strengths	Challenges
<ul style="list-style-type: none"> • Social engagement is strong in GPS. • Programs and activities have a strong preventative focus. • Partnerships to deliver programs and activities is effective. • Relationships with the community is positive. • Raised awareness of the impacts of climate on health. • Gender equity is strongly represented in health and wellbeing work. 	<ul style="list-style-type: none"> • Access to services. • A rise in family violence. • Access to healthy foods locally. • High staff turnover. • Resources and budgeting. • Rising cost of living impacting communities. • Transport. • Recruiting and retaining volunteers. • Community expectations.
Threats	Solutions
<ul style="list-style-type: none"> • Illness and staffing impacting activity delivery. • Geographically dispersed shire. • Grants are becoming more competitive and difficult to secure. 	<ul style="list-style-type: none"> • Maximising partnerships. • Leveraging off existing work. • Reducing duplication of work. • Careful planning and identification of community needs. • Having a shared source for data and resources for partners.
New Ideas	
<ul style="list-style-type: none"> • Enhanced mental health programs for young people. • Improved local food systems. • Sustainable farming practices. • Maximise promotion of energy efficient housing. • Collect and share more data on climate risk and health. • Enhance councillor involvement to support program and activity delivery. • Improved public transport and access. • Improved access to health services. • More resources and less reporting requirements. 	

Table 3. Summary of Workshop Discussions

Priority area results

Priority	Link
Improving mental wellbeing	<u>Improving Mental Wellbeing Results</u>
Increasing active living	<u>Increasing Active Living results</u>
Preventing family violence and enhancing gender equity	<u>Preventing Family Violence and Advancing Gender Equity results</u>
Increasing healthy eating	<u>Increasing Healthy Eating results</u>
Tackling climate change and its impacts on health	<u>Tackling Climate Change and its Impact on Health results</u>

Table 4. Results by Priority Area

DISCUSSION

This year 3 evaluation of the MPHWP has been effective in documenting short and medium-term outcomes, measuring the successes of our work across our five Health Priority Areas, and for future planning our activities. These results have helped to create an evidence base of our collective work as we progress and contribute to our 5 Health Priority Areas, for now and into the remaining year of the planning cycle. Breaking this information down by Health Priority Areas provides more focused insights, allowing partners to deep dive into their priorities, see their actions within the collective picture and draw their own learnings to inform the rest of the cycle 2021-2025.

The evaluation response rate from partners was higher compared to year two of the plan. With the combined effort of 25 partners, there were 318 activities listed with 243 of these evaluated. This represents a total of 76 per cent of planned activities evaluated, an increase from 69 per cent for year 2.

Asking *“What did we do?”* highlights the breadth of work delivered, documenting the many projects, programs, services and networks (both local and regional) that work collaboratively to deliver activities across the priority areas. It provides insight into additional contributors beyond our ‘active’ partners and shows the value of collaboration and a whole of systems approach to health and wellbeing. It also provides an opportunity to identify and invite additional partners to participate in the MPHWP, recognising their valuable work to improve health and wellbeing outcomes.

This evaluation has identified very high reach of activities. Notably, there are many interpretations of what constitutes reach making it difficult and somewhat inconsistent to measure. This evaluation documented reach across the areas of participation, social media and advertising/promotion. The estimated reach was significantly higher than year 2, suggestive of broader promotion of activities however, this result is difficult to quantify and compare.

Asking *“How well did we do it?”* saw themes around collaboration, communication, promotion, adaptation, resourcing, infrastructure, program design, accessibility, evaluation, capacity building and community involvement. These themes strongly reflect the principles of health promotion and help to highlight both strengths and weaknesses in activities for the purpose of improvement.

What worked well? Centred around the concept of working smarter, not harder with partners documenting successes in partnering and collaboration using existing programs and industry knowledge to deliver impactful activities for the community. Communication and promotion was core throughout activities and efficient use of funding, resources and expertise contributed to success.

What could have been done better? reinforced the importance of maximising partnership and collaboration opportunities. Some community disengagement was identified with partners highlighting a need to focus efforts on broader promotion and careful target group mapping. Resourcing limitations was documented throughout with the resulting impact being programs that are too diluted and multi focused which reduced the overall quality. Some partners suggested a need for clearer processes and structure in programming including in evaluation of activities.

Asking *“Did your activity encounter any obstacles or barriers?”* saw results that aligned with what could have been done better. Of those barriers listed by partners, the majority centred around restrictions to budgets and resourcing. Lack of engagement and a need for effective promotion were also described as barriers. Identifying barriers and what could be done differently is a valuable component to this evaluation as it provides the opportunity to refine and improve activities.

Asking *“What are the changes we are seeing?”* has given more in-depth insights into the impacts of activities beyond short term process measures. These questions established that partners are beginning to observe longer term impacts from their activities across all five categories. This evaluation acknowledges that medium term impacts and outcomes may not be evident in year 3 of a 4-year plan, however the results suggest that partners

may be starting to see some changes. These changes strongly align with the intended outcomes of the activities and the principles of health promotion suggesting that partners are delivering successful programs and activities.

The most common method for measuring change was through informal feedback from participants. Considering partners reported improvements and success across activity planning and design processes, opportunity may exist to improve on evaluation measures utilising a more rigorous and quantifiable approach to collecting outcome data.

Unintended impacts varied widely but were similar to previous years. Identifying new populations of people who benefit from activities to the continuation and expansion of existing activities, partners reported that working collaboratively with new partners allowed them to expand their reach and promotion, improving awareness and engagement in the community and reinforcing the importance of collective action and collaboration.

Year 3 has reported both similarities and differences to year 2 in terms of emerging themes. Collective action, collaboration and communication have been core elements across all years, and it was evident that numerous partners recognise the significance of capacity building to enhance activities. Across all years of the plan, partners have acknowledged the importance of engaging the community in activities, recognising them as vital to what we do.

Partners reported efficiencies in the use of resources and carefully planned design and delivery of activities as a success in year 3. This had not been a predominant theme in previous years where an emphasis was placed more on the resource poor environment. Although year 3 partners have certainly stressed that a lack of funding and resources limit activities, this evidence of efficient planning and design methods may indicate partners are becoming acclimatised and more adaptable to delivering programs in resource poor conditions.

Utilising the partner workshop to discuss not only actions moving forward, but also reflecting on the year gone, identifying emerging themes and sharing new ideas, provides a valuable platform for partners to network, build partnerships, enhance collective work and improve activities.

Recommendations

Measuring the reach of activities is subject to various interpretations and therefore presents inconsistently across partners. The Community Development team will investigate ways in which reach can be better measured.

Collecting data on the impacts and outcomes of activities remains challenging. Partners will be encouraged and supported by the Community Development team to consider ways to embed more formalised evaluation measures into their programming with the aim of improving the quality and measurability of results.

The partner workshop is unique benefit to our small council and a priority for the Community Development team. The workshop will continue again in year 4 with consideration given to increasing the number of networking opportunities made available to partners throughout the year.

To improve networking and participation in the evaluation of the year four MPHWP Action Plan, the Community Development team will work to enhance partner engagement and capacity building, via carefully considered partner mapping and the establishment of a network whereby partners can communicate and share ideas and resources.

CONCLUSION

Year 3 of the MPHWP Action Plan has seen widespread collaboration between internal council departments and external partner organisations across the Shire. The evaluation has been effective in documenting short- and medium-term outcomes and measuring the collective success of our work across our five Health Priority Areas.

This report will be shared with our health and wellbeing partners to communicate learnings and will inform the remaining years of the 2021-2025 planning cycle. The results will assist in reviewing current activities, and modifying or adjusting projects where necessary, with the opportunity to deliver new and innovative projects and activities. The design of our approach is one that we would like to continue moving forward, to ensure we can deliver and evaluate activities that are comprehensive, effective, sustainable and meet the evolving needs of the community.

Appendix 1– Evaluation template

MHPWP Year 3 Action Plan evaluation - ALL PARTNERS													
Year 3 (July 2023-June 2024) Action plan reporting template Golden Plains Shire Municipal Health and Wellbeing Action Plan 2021-25						Step 1: What did we do?		Step 2: How well did we do it?		Step 3: What are the changes we are seeing?		Additional comments	
Order	Org	Priority	Strategy	Action/activity description	1. Partners involved. <i>List any partners who contributed to the activity</i>	2. Who was the target population for this activity?	3. How many people did this activity reach?	4. What worked well and what could be done differently? (briefly describe)	5. Did your activity encounter any obstacles or barriers? <i>If yes provide comment on what how and why</i>	6. What impacts/outcomes have resulted from the activity?	7. How did you measure these impacts/outcomes?	8. Were there any unintended impacts/outcomes from the activity? <i>Were there any surprises? Include both positive and negative</i>	Is there anything else you would like to include about your activity?
		1. Improving Mental Health		1.1 Educate the community about mental wellbeing and mental illness									
		1. Improving Mental Health		1.2 Lobby, advocate, collaborate and develop strategic relationships with community and partners to improve access to mental health support services									
		1. Improving Mental Health		1.3 Provide local opportunities for community to build social connections									
		1. Improving Mental Health		1.4 Support people of all ages and abilities to maximize their potential for meaningful participation in community life									
		2. Increasing Active Living		2.1 Provide and support programs, activities and initiatives that facilitate increased participation in physical activity									
		2. Increasing Active Living		2.2 Provide and maintain quality indoor and outdoor spaces for physical activity, organized sport and active recreation									
		2. Increasing Active Living		2.3 Maintain and strengthen relationships with local sporting clubs, associations and regional sports assemblies to support collaboration									
		2. Increasing Active Living		2.4 Support an inclusive environment that enables people to be active every day									
		3. Preventing family violence and advancing gender equity		3.1 Provide and support programs, activities, and spaces that promote gender equity and respectful relationships									
		3. Preventing family violence and advancing gender equity		3.2 Demonstrate leadership on gender equity, social inclusion and respect for wellbeing for all groups in the community									
		3. Preventing family violence and advancing gender equity		3.3 Maintain and enhance community safety to enable people to feel safe in their local communities, with a focus on preventing family violence									
		3. Preventing family violence and advancing gender equity		3.4 Improve access to an integrated response to support those experiencing family violence									
		4. Increasing healthy eating		4.1 Provide and support programs, activities, and initiatives that encourage healthy eating and decrease consumption of discretionary foods									
		4. Increasing healthy eating		4.2 Support socio-cultural approaches to healthier eating and drinking									
		4. Increasing healthy eating		4.3 Support programs, activities and spaces that increase food security across the community									
		4. Increasing healthy eating		4.4 Lobby, advocate, collaborate and develop strategic relationships with community and partners to improve healthy eating and access to safe, affordable and nutritious food									
		5. Tackling climate change and its impact on health		5.1 Increase community understanding of actions they can take to stay healthy in a changing climate									
		5. Tackling climate change and its impact on health		5.2 Support and encourage community to prevent, prepare, respond and recover from health impacts associated with emergencies and natural disasters									
		5. Tackling climate change and its impact on health		5.3 Provide and support mitigation and adaptation-focused activities that enable health co-benefits to be realised									
		5. Tackling climate change and its impact on health		5.4 Promote and support healthy and sustainable food systems									

Appendix 2 – Improving Mental Wellbeing Results

OUTCOMES	
<ul style="list-style-type: none"> • Improved awareness and understanding of mental wellbeing and mental illness 	
<ul style="list-style-type: none"> • Improved access to mental health support services 	
<ul style="list-style-type: none"> • Increased opportunities for social connection and meaningful participation in the community 	
STRATEGIES What we are going to do	ACTIONS How we will go about it
1.1 Educate the community about mental wellbeing and mental illness	<ul style="list-style-type: none"> • Support capacity building at local schools, sporting clubs and community groups • Increase knowledge and skills in community around mental wellbeing • Deliver activities and programs that engage youth • Promote and raise awareness of mental health initiatives e.g. R U OK? Day
1.2 Lobby, advocate, collaborate and develop strategic relationships with community and partners to improve access to mental health support services	<ul style="list-style-type: none"> • Explore opportunities to build new partnerships with service providers • Advocate for more mental health support services including outreach • Advocate for more public and community transport • Seek funding opportunities for mental health projects, initiatives and services
1.3 Provide local opportunities for community to build social connections	<ul style="list-style-type: none"> • Support local sporting and community groups to provide participation and engagement opportunities • Provide programs, activities and spaces for people of all ages and abilities to build social connections • Support local community events e.g. Farmer’s markets, festivals, community gardens • Explore avenues to enhance existing and establish new partnerships with organisations to increase opportunities to engage, participate and connect
1.4 Support people of all ages and abilities to maximise their potential for meaningful participation in community life	<ul style="list-style-type: none"> • Provide opportunities for capacity building and leadership in community groups • Connect community groups with funding opportunities e.g. Community Strengthening Grants • Encourage and support volunteering

Figure 9. Improving Mental Wellbeing Action Plan

What did we do?

Partners

16 partners evaluated 86 activities directly related to the Improving mental wellbeing priority area:

EXTERNAL	INTERNAL
Ballarat Community Health (Ballarat)	GPS, Community Development
Ballarat Community Health (Dereel)	GPS, Community Inclusion
Geelong Regional Library Corporation	GPS, Childrens Services
Hesse Rural Health	GPS, Kindergartens
Leisure Networks	GPS, Economic Development
Sports Central	GPS, Health and Wellbeing
	GPS, People and Performance
	GPS, Recreation and Community Facilities
	GPS, Strategic Planning
	GPS, Youth

Table 5. Partners Involved in Improving Mental Wellbeing Activities

Activities

Key activities included:

- Community based group activities such as gardening, meditation, flower pressing, and arts and craft groups.
- 'Achievement program' support to schools
- Promotion and distribution of mental wellbeing resources to the community.
- Activation of Council spaces to promote social connection.
- Club volunteer training programs to support the community volunteers and sports coaches- 'tackle your feelings' program.
- Support capacity building at local schools, sporting clubs and community groups
- Advocacy for increased mental health services in the shire.
- 'Bystander training'.
- 'Mental health first aid' training.
- GPS careers expo.
- Council wide audit of financial wellbeing activities.
- Outdoor theatre events.
- Direct mental health service provision.
- Community playgroup support.
- Maternal child health sleep and settling programs.
- Development of virtual library spaces to enhance belonging and connection.
- Coaching young people for success program.
- Youth support card distribution and promotion.
- FReeZA events for young people.
- Life skills and capacity building.
- Employee wellbeing program.
- Social club events.
- Development of the Disability and Access Inclusion Plan.
- Facilitate a business mentoring service.
- 'Bins for Blokes' program.

Target population

Partners identified the following key target populations for Improving mental wellbeing activities:

- Young people
- Adults
- Families
- Parents
- Women
- Men
- LGBTQIA+ people
- Those with lived experience of mental ill health
- GPS staff
- Farmers
- Geographically isolated people
- Vulnerable families
- Sporting clubs
- Coaches and officials
- GPS business community

How well did we do it?

What worked well?

- Having information and brochures in multiple locations.
- Counselling being available for children and adults.
- Having guest artists share/teach.
- Program location and day of the week.
- Eventbrite booking system made processes easier.
- The food van was very popular.
- Variety of delivery platforms (online, social media, hand delivered)
- Offering free health checks with a nurse in conjunctions with a vaccination clinic.
- Strong promotion and advertising
- Leveraging off existing community activities.

- Face to face opportunities, with sessions facilitated in both the North and South of the Shire.
- Leveraging Council funds to seek external financial contributions to support infrastructure upgrades.
- Taking a collaborative approach during the design phase to ensure community needs are met and mutual outcomes achieved.
- Delivering these sessions online was key to the success of the program.
- Where there were existing gaps in PHN Allied Health Services, we were able to share resources provided by Hesse Rural Health to our GP's to bridge the service gap slightly
- The needs assessment was thorough and covered multiple topics. It utilised a wide array of resources.
- The program was redesigned based on the feedback received by alumni which worked very well with the new members of the program. Additionally, a hybrid method to deliver the sessions worked very well.
- Conducting an audit was useful in identifying gaps in financial wellbeing.
- Training all network members give them the opportunity to easily transfer roles between the members, as required.
- MCH nurses who preceptor students gain new knowledge and feel empowered by passing on their knowledge.
- Assisted in developing skills with technology by offering a range of opportunities for community members to learn.
- Craft based activities work very well, all activities have been unique and appealing to a wide audience.
- Offering a range of sessions works well.
- Utilising different providers to target different population groups.
- Engaging a local First Nations artist to produce a mural worked really well for fostering conversations around First Nations culture and community and for strengthening relationships.
- Geographical inclusivity, ensuring transport and/or activities were delivered across the Shire.
- Implementation of Eventbrite strongly boosted numbers and enable reminders to be sent.
- Online learning modules expanded to include modules on: conflict resolution, coping with change in the workplace, developing resilience, resilience in self, safety and wellbeing at Golden Plains, safety and wellbeing for leaders, WHS risk management training.
- Council involvement in process streamlined things and gave organisers confidence.
- Informative and great discussions around sensitive topics
- Review of the program and tools to support community planning enhanced engagement and participation.

What could be done differently?

- Inadequate lighting.
- The event was on the same night as another event, which meant there were less attendees.
- Meeting in a public space discouraged attendance.
- Refining content, formatting and scheduling of social media promotion posts to obtain the best reach.

- The project took a long time to come to fruition which disengaged some parties.
- Better distribution of a needs assessment.
- The delivery of infrastructure is reliant on the rezoning and development of land, which progresses delays progress.
- More notice required for participants.
- Need to explore online streaming or recording options.
- Data collection.
- Facilitators could be better prepared.
- Registration process were difficult to navigate.
- Additional follow up for programs post activity.

Did your activity encounter any obstacles or barriers?

The majority of activities delivered did not encounter any obstacles or barriers. Those barriers listed included:

- Poor weather conditions.
- Registration systems not used which created more work.
- Technology issues such as inability to live stream sessions, technology not being compatible with other systems/devices and participants not being able to use technology.
- Participant geographical isolation impacted attendance.
- Staff resourcing.
- Low community engagement.
- High staff turnover.
- Reduced volunteering.

What are the changes we are seeing?

What impacts/outcomes have resulted from the activity?

Of the 86 activities listed for Improving mental wellbeing, 71 per cent underwent some form of impact evaluation. The following areas of impacts were identified:

- Improved access to support and information.
- Improved social connection.
- Photography skills improved
- Improved communication for the community.
- Updated policies and processes.
- Brand recognition has improved and Council have established relationships with local providers.
- Improved volunteer knowledge and capacity to respond to legislative changes and community expectations.
- Community members are upskilled to assist a friend, family member or other members of the community who are developing a mental health problem or experiencing a mental health crisis.
- Access to more Allied Health Services for our local GP's.
- Since the needs assessment was completed, GPS has been able to engage with Headspace who is providing opportunities for young people to gather regularly to discuss mental health and wellbeing.
- We now have a community garden space that can be used for ALL community members and groups to foster social connections.
- The group was able to develop a sustainable community project idea that encouraged community participation.
- Students have greater awareness of the harms of vaping.
- This work has resulted in increased knowledge of financial wellbeing for internal staff.
- The training gives the network the skillset to run meetings effectively, and provide timely mental health first aid if/when required.
- Cape Clear now host community movie events monthly and have utilised the projector screen at multiple events.
- Community Playgroups have a huge impact on connection, relationships health and

wellbeing. Proactive - prevention and early intervention.

- Raising awareness.
- Less barriers for parents accessing services.
- People have access to a broad range of resources, there has been an increase in usage of online content which is free and accessible.

- Improved health service environment for consumers.
- Greater confidence in business operator in self-belief that they can operate business.
- Community members who utilise male facilities around the Shire feeling included and no longer feeling shamed.
- Older people more confident on the roads.

How did you measure these impacts/outcomes?

Most activities under Improving mental wellbeing was collected using participation and attendance counts, both informal and formally collected positive community feedback, community surveys and counts of promotional materials distributed.

Were there any unintended impacts/outcomes from the program/activity?

Multiple unintended impacts have arisen through programs and activities that improve mental wellbeing both positive and negative:

- Extension of craft group to other days.
- The event will now be held annually with additional capacity due to popularity.
- Higher participation numbers at all events.
- Bystander training was extended to the entire year 9 cohort instead of just the disengaged group.
- This work has helped to bolster the relationship between GPS and give where you live.
- Positive new stakeholder relationships with small townships and Council.
- Some clients have formed friendships outside of the groups and have started walking and meeting socially.
- High levels of parent engagement in Teesdale, Meredith and Inverleigh wanting regular access to maintain and enhance the outdoor playing space for the children.
- We were able to offer employment to trainees at the conclusion of their traineeship.
- Positive media coverage for shire on 3AW, The Age and MMM.
- Several suppliers that we didn't know existed have been found through the Business Directory.

Of those negative unintended impacts, two were listed and included families becoming disengaged as a result of service provider/referral services being located outside shire. Another partner noted:

“It was alarming to find out about the limited resources available to support mental wellbeing for young people in the shire. Most services rely on digital sessions which created a gap as face to face mental health support is sometimes warranted.”

Appendix 3 – Increasing Active Living results

OUTCOMES	
<ul style="list-style-type: none"> • Increased opportunities to be physically active 	
<ul style="list-style-type: none"> • Accessible places and spaces that support physical activity for all 	
STRATEGIES What we are going to do	ACTIONS How we will go about it
2.1 Provide and support programs, activities and initiatives that facilitate increased participation in physical activity	<ul style="list-style-type: none"> • Deliver physical activity programs across the Shire • Seek opportunities to apply for funding to deliver innovative physical activity initiatives • Participate in regional networks and alliances to collaborate on joint initiatives e.g. TGC • Apply a gender lens to planning physical activity initiatives that support women and girls to be active • Support community led physical activity initiatives through Council grants
2.2 Provide and maintain quality indoor and outdoor spaces for physical activity, organised sport and active recreation	<ul style="list-style-type: none"> • Ensure Council facilities are welcoming and inclusive for all • Maintain parks, ovals, trails, paths and open spaces to provide quality places to be active • Support and promote active travel in the Shire
2.3 Maintain and strengthen relationships with local sporting clubs, associations and regional sports assemblies to support collaboration	<ul style="list-style-type: none"> • Maintain existing, and build new relationships with sporting clubs across the Shire • Support and actively participate in regional/state recreation and sporting partnerships • Support local clubs to apply for funding to improve and expand participation • Engage and support local clubs to develop inclusive policies and practices
2.4 Support an inclusive environment that enables people to be active every day	<ul style="list-style-type: none"> • Promote, encourage and provide opportunities for women and girls to participate in physical activity • Support people of all ages to be active • Raise awareness of socio-cultural practices in active living • Provide opportunities for people of all abilities to participate in physical activity • Support inclusive environments for LGBTQIA+ communities to be active

Figure 10. Increasing Active Living Action Plan

What did we do?

Partners

14 partners delivered 57 activities directly related to the Increasing active living priority area:

EXTERNAL	INTERNAL
Ballarat Community Health (Ballarat)	GPS, Community Development
Ballarat Community Health (Dereel)	GPS, Community Inclusion
Geelong Regional Library Corporation	GPS, Childrens Services
Hesse Rural Health	GPS, Economic Development
Leisure Networks	GPS, Health and Wellbeing
Sports Central	GPS, People and Performance
Women’s Health Grampians	GPS, Recreation and Community Facilities
	GPS, Strategic Planning

Table 6. Partners Involved in Increasing Active Living

Activities

Examples of key activities included:

- Facilitating the Heart Foundation Walking Group Program.
- Steady Feet Exercise classes.
- Cardio Drumming classes.
- Living Longer Living Stronger exercise Program.
- Supporting services with achieving Physical Activity benchmark in Achievement Program.
- Delivery of 2nd year Active Golden Plains "Spring into Summer" program.
- Developed and implemented the "Change our Game" Fair Access Policy.
- Contribute to assessment of Community Grant applications with a focus of physical activity and recreation initiatives.
- Plan and implement open space, tracks and trails and community facility improvement works.
- Deliver funded capital improvement projects including Rokewood Netball Tennis Upgrade, Leighdale Equestrian Undercover arena, Meredith Skate Park, Inverleigh Active Youth playspace and Lethbridge Playspace.
- Explored partnership opportunities with State Sporting Association and other bodies to identify physical activity and participation opportunities.
- Support development of young carers groups and introduce active participation offerings - through a Lacrosse Program for young people and a 'Train the Trainer' upskilling program to ensure there are local deliverers.
- Promote WHG CoRE initiative and WHG/Sports Central's Act@Play program to increase uptake from sporting clubs and foster inclusion, respect and equality.
- Partner with WHG and our Equality for All (E4A) advocates and Youth Advocates (YA) to consider necessary safety and inclusion features for women of all backgrounds accessing facilities.
- Promotion of WHG newsletter for sport sector "CoRE inside" as well as sport communication collateral.
- Prepare a comprehensive Open Space Strategy for the municipality to identify existing open space and future open space needs as population increases.
- Considered open constructed waterways as part of larger residential precincts which allow for and encourage linear open space which is ideal for physical activity.
- Apply a gender lens to planning physical activity initiatives that support women.
- Bush Kindergarten sessions.
- With community, develop and launch a new Disability Access and Inclusion Plan, considering both physical accessibility and non-physical barriers to participation.
- Organisational promotion and participation in a walkathon/step challenge.
- Investigated partnership with local gyms to provide discounted gym memberships for staff.
- Development and promotion of the Three Trails Network, the Moorabool Valley and parks and gardens across Golden Plains Shire.
- Identify and deliver programs for older adults that support increased activity and participation in physical activity
- Promote and encourage community apply for funding under the Community Strengthening Grants Program- Healthy, Active, Living Funding Stream.
- Distribute information to clubs and associations through e-newsletter.

Target Population

- All community members
- Over 50 years
- All community members
- Older Adults
- Smythesdale community
- Women & Girls who are not regularly active
- Sporting Clubs and Management Entities
- GPS community groups, clubs and associations
- Young people
- Adults
- Mothers of young children/mothers groups
- Families
- Staff
- School aged children
- Potential Tourists to Golden Plains Shire

How well did we do it?

What worked well?

- Consistent day of the week worked well.
- Offering classes alongside other sessions expanded reach and opportunity.
- Screening and assessment prior to commencing.
- Subsidised session fees
- Qualified and experienced staff.
- Strong promotion and advertising.
- Utilisation of existing community activities.
- All of Shire approach.
- Participating in regional LGA forums where discussion focused on the development of policies, communications strategies and future action plans to support community response was incredibly valuable.
- Council was represented at the 'Change our Game' forums which focused on the development and implementation of the 'Fair Access Policy'.
- Council benefited from partnering with sports associations developing regional plans. This provided us with some audit reports for sporting infrastructure specific to their sport, i.e. Tennis Victoria and Football Victoria facility audits.
- The program became sustainable being delivered by a local organization.
- Outreach and engagement went well.
- New car park at Bannockburn has increased disabled car parks. Other services have accessible parks close to doors. All services are wheelchair and pram friendly. MCH rooms have been updated to decrease heightened sensitivity on walls.
- The communication and collaboration with both these community stakeholders was positive and both continue to be supportive of the use of in-venue facilities.
- Teddy Bears Picnic was run as an intergenerational event. Connected elderly patrons with families of young children. Bringing people together worked very well in an outdoor setting.
- Developing this plan was very important and it was beneficial that an external review was done, the review was able to be objective and comprehensive.
- The school was really eager and supportive to participate in Ride2School Day. Partnering with supportive teachers made it really easy to get the school involved.
- The collaboration between Sports Central, Golden Plains Shire and topic experts led to high quality presentations.
- The face-to-face workshops were well promoted.
- The online webinars and workshops will be promoted via the Recreation Development Officers at Golden Plains Shire in the future.

What Could be Done Differently?

- Lack of purpose built facilities and equipment requires portable equipment to be used.
- Clients need to pay for sessions via phone or visiting site.
- Data collection could be improved.
- Registration processes could be improved.
- Tracks and Trail priorities need to be taken from the recently developed strategy and put through the project pipeline to help with prioritisation and annual planning.
- The current budget is not sufficient and restricts our ability to deliver.
- Ongoing work and advocacy is required to seek approval and funding to deliver a new Open Space Strategy which will help guide future planning and investment.
- To improve delivery and mitigate project risks, project budgets and timelines need to start considering things such as traditional owner consultations, landowner approval

and environmental impact studies, as these things take time and money.

- When doing a similar project next time, it would be important to include a follow up check-in post project.

- A shared timetable would have helped with communication.
- Better establishment of community need to inform program type and design.
- Significant budget cuts impacted programs

Did your activity encounter any obstacles or barriers?

- A bush fire impacted the walking group.
- Bad weather impacted infrastructure development progress.
- Budgets.
- No new land available to collect development contributions.
- Recruitment of Family Day Care educators across Golden Plains Shire continues to be a challenge.
- Remoteness and geographic isolation of participants.
- Turnover of key workers and reduced team resourcing and budget.
- Reduction in funding for programs.

What are the changes we are seeing?

What impacts/outcomes have resulted from the activity?

Of the 57 activities listed for Increasing active living, 46 per cent underwent some form of impact evaluation. The following areas of impacts were identified:

- Improved balance and mobility.
- Council awarded a combined \$78,102.50 to successful groups to deliver 13 projects across 4 categories: Environment and Sustainability, Healthy Active Living, Community Safety, and Creative Community.
- Increased utilisation and long-term amenity the of Bannockburn Recreation Precinct Play Space and Open Space Area.
- Increased utilisation of all spaces, positive community feedback and partnership development with community groups and local agencies including VicPol and Progress Associations.
- Improved understanding of responsibilities associates with managing an incorporated association.
- Commitment from sporting clubs to develop action plans to implement the Fair Access Policy.
- Uptake of club development support from Golden Plains Soccer Club, Leighdale Equestrian Centre, and the establishment of new incorporated association in Lethbridge and Linton to manage two community facilities.
- This has led to projects being added to the project pipeline following their assessment using the capital projects assessment tool.
- It has helped develop masterplan priorities and seek community feedback when developing priority lists.
- Parents are continuing to stay connected and socialise.
- Improved social connections, opportunities for all community members to socialise.
- improved physical health literacy levels.
- Increased physical activity participation.
- Increased number of bikes in the school bike shed.
- Increased visitation to Three Trails Network.
- Facilitation at Beyond the Valley Music Festival raised money for community groups.
- Increased visitation to Three Trails Network.
- Improved skills, knowledge and confidence across the topics delivered in the webinars and workshops.

How did you measure these impacts/outcomes?

Most activities under Increasing active living was collected using participation, attendance and utilisation/visitation data counts, both informal and formally collected positive community feedback, community surveys and testimonials and annual project evaluations. In one activity impacts were measured by calculating the total dollars raised.

Have any unintended impacts/outcomes arisen from the program/activity?

Multiple unintended impacts have arisen through programs and activities that increase active living, all were deemed positive by partners:

- Program has expanded with walkers now meeting outside of scheduled times.
- Improved balance and strength has enabled participants to join other programs.
- Participants have continued with cardio drumming at home with their own equipment.
- Publication of information on Rail Trail Australia's social media channels.

Appendix 4 – Preventing Family Violence and Advancing Gender Equity results

OUTCOMES	
<ul style="list-style-type: none"> Increased education and awareness around gender equity and respectful relationships Increased initiatives addressing gender equity Improved access to an integrated response system to support those experiencing family violence 	
STRATEGIES What we are going to do	ACTIONS How we will go about it
3.1 Provide and support programs, activities, and spaces that promote gender equity and respectful relationships	<ul style="list-style-type: none"> Participate in regional networks and alliances to collaborate on regional initiatives Partner with specialist organisations and service providers to develop resources, educate community and deliver programs Advocate and support the delivery of gender equity training to schools, sporting clubs and community groups Support schools to participate in Respectful Relationship training as part of curriculum
3.2 Demonstrate leadership on gender equity, social inclusion and respect for wellbeing for all groups in the community	<ul style="list-style-type: none"> Support Council to adopt and implement recommendations of Gender Equality Act Lobby and advocate for funding to support gender equity and social inclusion programs Lead events and activities that support gender equity and social inclusion e.g. 16 Days of Activism, International Women’s Day
3.3 Maintain and enhance community safety to enable people to feel safe in their local communities, with a focus on preventing family violence	<ul style="list-style-type: none"> Support community led safety initiatives Provide safe and accessible community spaces Work collaboratively with internal and external partners to apply a prevention lens to safety plans
3.4 Improve access to an integrated response to support those experiencing family violence	<ul style="list-style-type: none"> Build partnerships with family violence prevention services to enhance integration Advocate and provide more services including outreach Promote family violence support services and raise awareness of services they offer Support community to access support services and streamline referral pathways

Figure 11. Preventing family violence and enhancing gender equity action plan

What did we do?

Partners

15 partners delivered 49 activities directly related to preventing family violence and advancing gender equity:

EXTERNAL	INTERNAL
Ballarat Community Health (Ballarat)	GPS, Community Development
Ballarat Community Health (Dereel)	GPS, Community Inclusion
Geelong Regional Library Corporation	GPS, Childrens Services
Leisure Networks	GPS, Economic Development
Sports Central	GPS, Health and Wellbeing
Women’s Health Grampians	GPS, People and Performance
	GPS, Recreation and Community Facilities
	GPS, Strategic Planning
	GPS, Youth

Table 7. Partners Involved in Preventing Family Violence and Enhancing Gender Equity Activities.

Activities

Examples of key activities include:

- Walk Against Violence, during the 16 Days of Activism.
- 16 Days of Activism Artwork.
- Provide information and resources on supports available for those experiencing family violence.
- Supporting schools with Puberty, sexual health and wellbeing, safe environments and respectful relationships resources and training.
- Develop and implement Change our Game Fair Access Policy.
- Explore opportunities to improve lighting and access at council managed facilities.
- Design and deliver gender equity training to schools, sporting clubs and community groups.
- Support Council to conduct a Gender Impact Assessments (GIA) when reviewing the Facilities Strategy Gender Impact Assessment, in particular consideration of menstrual products & condom vending machines.
- Assess Council's Rainbow Readiness as part of the Vic Health Local Government Partnership.
- Provide safe and accessible community spaces.
- Promote family violence support services and raise awareness of services they offer.
- Aboriginal and Torres Strait Islander Cultural Competence Course.
- Design and deliver a workplace culture program that embeds the values and behaviours of kindness, trust and customer focus. All of these actions will promote equity and respectful relationships.
- Deliver Love Bites Training at Bannockburn College.
- Youth Support Card providing contact details of family violence providers across the region.
- Ongoing implementation and review of Gender Equality Action Plan.
- Deliver unconscious bias training.
- Delivery of parental leave kit/resource for all parents.
- Review and implementation of flexible work arrangements procedure promoting gender inclusivity.
- Provide all staff with access to information and training to build their confidence to identify and respond to family or gendered violence and discrimination.
- Submit annual Diversity Action Plan to the Department of Health and Human Services which outlines programs and activities undertaken to support gender equity and diversity.

Target population

- All community members
- Children
- Staff
- Families
- Women & Girls
- Sporting Clubs and Management Entities
- Community clubs
- Family violence support agencies
- Vulnerable Parents
- Library staff
- Geographically isolated community members.
- Business Community in Golden Plains.
- Older persons
- Club and association administrators

How well did we do it?

What worked well?

- Partnering with heart foundation walk enhanced attendance.
- Good promotion across a wide range of media.
- A Steering Committee worked well.
- Participating in regional LGA forums where discussion focused on the development of policies, communications strategies and future action plans to support community response was incredibly valuable.
- The face to face workshops also helped discuss the potential impacts on community and the expectations from the State Government with those most impacted.
- Council was represented at the 'Change our Game' forums which focused on the development and implementation of the 'Fair Access Policy'.
- Street and play space lighting installed as part of the Inverleigh Active Youth Space Upgrade.
- Workshop component - clubs learning from each other on what they do in the women and girls/gender equity space.
- Referral process is simple.
- Consultation with staff worked well.
- Able to build connections with organisations who care for elderly people and isolated individuals.
- Communication and education throughout the 16 Days of Activism Against Gender-Based Violence. Promotion of family violence guide and provisions under the Enterprise Agreement shared throughout 16 days of activism."
- Promotion of support services and resources was delivered effectively.

What could be done differently?

- Greater understanding from the community about places they feel safe.
- Use of an existing template rather than building a resource from scratch.
- Improved promotion.
- Less sessions. Targetted sessions would have worked better.
- Engagement could have occurred earlier.
- Use of an online format made it hard to engage the participants.
- Some families may not be ready to disclose family violence which should be considered in planning and timeframes.

Did your activity encounter any obstacles or barriers?

- Poor weather conditions.
- Project timelines were not long enough.
- Poor community engagement.
- Community misconceptions and reluctance for further education as well as social media campaign backlash.
- Using an online format.
- The stickers from the art work were hard to peel off.
- Participant financial insecurity.
- Participant geographical isolation.
- Families not ready to engage with family violence supports.
- Lack of knowledge and understanding from VicPol on family violence issues.
- Optional learning modules/training creates low uptake from employees.
- Staff turnover.
- Budget restrictions and funding cuts.

What are the changes we are seeing?

What impacts/outcomes have resulted from the activity?

Of the 49 activities listed for preventing family violence and enhancing gender equity, 47 per cent underwent some form of impact evaluation. The following areas of impacts were identified:

- Improved access to support and information.
- Improved understanding of responsibilities associates with managing an incorporated association.
- Commitment from sporting clubs to develop action plans to implement the Fair Access Policy.
- Improved sense of safety.
- Clubs were introduced to the Fair Access Policy as well as understanding their roles and the benefits of gender equity.
- Promote inclusive behaviours and actions prioritising the choices and leadership of woman with disabilities.
- Improved understanding of healthy relationships.
- Strengthened relationships between Council and local businesses.
- Improved connectedness and understanding of the availability of services.
- Improved knowledge sharing.
- Improved confidence and competency in managing a flexible workforce.
- Increasing the awareness of our leaders in relation to family violence.

How did you measure these impacts/outcomes?

Most activities under preventing family violence and enhancing gender equity was collected using participation, attendance and utilisation/visitation data counts, both informal and formally collected community feedback, community surveys and project evaluations.

Have any unintended impacts/outcomes arisen from the program/activity?

Multiple unintended impacts have arisen through programs and activities that prevent family violence and enhance gender equity, the majority were deemed positive by partners:

- The mayor attended and this had a surprisingly positive impact on the participants.
- This group will be considered for inclusion into the MPHWP partners network.
- MCH are sourcing additional supports for families eg. food hampers and clothing.
- Increased support for families.
- Identified that a review of our Gender Equality Action Plan needs to be undertaken.

Of those negative unintended outcomes, it was suggested that an increased focus on family violence may actually result in less families disclosing incidents due to lack of understanding and fear that Child Protection will become involved.

Appendix 5 – Increasing Healthy Eating results

OUTCOMES	
<ul style="list-style-type: none"> Increased understanding of healthy eating and associated health implications 	
<ul style="list-style-type: none"> Improved access to safe, affordable and nutritious food 	
STRATEGIES What we are going to do	ACTIONS How we will go about it
4.1 Provide and support programs, activities, and initiatives that encourage healthy eating and decrease consumption of discretionary foods	<ul style="list-style-type: none"> Deliver innovative healthy eating initiatives across the community Provide education and promotion to schools, community groups, sporting clubs and workplaces on healthy eating and discretionary foods Participate in regional networks and alliances to collaborate on healthy eating initiatives Support community led healthy eating initiatives e.g. healthy eating grants funded through Council’s Strengthening Community Grants program
4.2 Support socio-cultural approaches to healthier eating and drinking	<ul style="list-style-type: none"> Promote healthy eating/drinking regional campaigns Seek opportunities to deliver innovative healthy eating initiatives that take a socio-cultural approach Explore socio-cultural norms around healthy eating, drinking and breastfeeding
4.3 Support programs, activities and spaces that increase food security across the community	<ul style="list-style-type: none"> Support community projects that increase food security e.g. community gardens Educate the community about food sustainability and home grown produce Explore opportunities to establish local food security initiatives
4.4 Lobby, advocate, collaborate and develop strategic relationships with community and partners to improve healthy eating and access to safe, affordable and nutritious food	<ul style="list-style-type: none"> Support the development and implementation of policy and initiatives in workplaces that encourage healthy choices Advocate for food security initiatives and outreach e.g. food relief services Build relationships with local food producers to support access to local produce

Figure 12. Increasing Healthy Eating Action Plan

What did we do?

Partners

11 partners delivered 45 activities directly related to increasing healthy eating.

EXTERNAL	INTERNAL
Ballarat Community Health (Ballarat)	GPS, Community Development
Ballarat Community Health (Dereel)	GPS, Community Inclusion
Geelong Regional Library Corporation	GPS, Childrens Services
Hesse Rural Health	GPS, Economic Development
	GPS, Health and Wellbeing
	GPS, People and Performance
	GPS, Youth

Table 8. Partners Involved in Increasing Healthy Eating Activities.

Activities

Key activities included:

- Promote and maintain the Food is Free pantry at the Community Centre.
- The Dereel Garden Group.
- Monthly fresh fruit, vegetables and bread delivered from the Foodbank 'Farms to Families' market for local residents to access at the Community Centre.
- Promoting Go 4 Green and Vic KEW within schools.
- Supporting schools with canteens to work through the Healthy eating oral health benchmark of the Achievement Program.
- Supporting community settings if in need of food support, including invitations to Farms to Families markets and distributing excess produce.
- Promoting water as drink of choice in schools.
- Limiting SSB in schools through Vic KEW program.
- Supporting settings with Achievement program Healthy Eating Oral Health.
- Supporting settings with Smiles 4 Miles program.
- Supporting settings in promotion of breastfeeding through the Achievement Program.
- Participate in regional networks and alliances to collaborate on healthy eating initiatives.
- Creating and expanding breast feeding friendly spaces.
- Provide education and promotion to schools, community groups, sporting clubs and workplaces on healthy eating and discretionary foods.
- Educate the community about food sustainability and home grown produce
- Advocate for food security initiatives and outreach e.g. food relief services
- INFANT program
- Provision of Seed Library boxes in addition to the one currently available at Bannockburn Library.
- Healthy eating options provided at all Youth activities.
- Delivery of employee wellbeing program in 2024
- Work with social club to deliver activities that promote healthy eating choices.
- Target healthy eating operators to establish a new business.
- Engagement with community groups-walking and exercise groups.
- Promote and encourage community to apply for funding under the Community Strengthening Grants Program under the Healthy, Active, Living Funding stream.
- Deliver the Farmers Market Program.

Target population

- All Community members
- Children
- Food Security Stakeholders
- Staff
- Families
- Health Promoters
- Breastfeeding mothers
- All primary schools in the Shire
- Parents of young children and babies
- Kindergarten Children
- Older adults
- Adults
- Community Groups

How well did we do it?

What worked well?

- Cross generational planting sessions with young children.
- Supporting Linton with VKEW also offered Health Promoters the opportunity to reach other health promoters in the area.
- Offering face to face and online meetings.

- Partnerships and collaborations with internal council teams
- Building momentum. After one school signed up for the program, we invited them to participate in a similar one.
- Hydration stations for refilling bottles present at 12 markets.
- Attendance at each Farmers Market meant that our Choose Water campaign had a significant community reach.
- Supporting healthy and sustainable food systems, and increasing understanding of the actions to stay healthy in a changing climate.
- The project facilitated a connection between First Nations representatives and existing gardens members and their communities.
- Parents have access to support and referral services with breastfeeding.
- Program provides free toothbrushes and paste for Supported Playgroup families.
- There is a great interest in gardening within the local community.
- We have a strong connection with the volunteers who manage the community garden in the library courtyard and continue to work with them where possible.
- Participation in both G21 region Communities of Practice and the Central Highlands Community of Practice.
- Successfully targeted healthy eating based operator. The operator then sublet space to - which increases health outcomes.
- Funding guidelines were reviewed and applications numbers improved.
- Increase in the number of fresh produce stallholders.
- No plastics policy for market stallholders.

What could have been done differently?

Partners documented that understanding and mitigating resource issues with budgets, time, staffing and food donations could be done differently.

Did your activity encounter any obstacles or barriers?

- The donation space became an unintended dropping point for other items.
- Fires damaged some of the gardens.
- Restrictions to budget and suitable spaces
- Rising cost of living makes it harder to eat healthy.
- Dentist cost and availability.
- Poor community engagement.
- Competing time and capacity constraints for schools.
- Funding cuts and budget restrictions.
- Staff turnover.

What are the changes we are seeing?

What impacts/outcomes have resulted from the activity?

Of the 45 activities listed for preventing family violence and enhancing gender equity, 58 per cent underwent some form of impact evaluation. The following impacts were identified:

- Improved access to food for those who need it.
- Increased awareness of food insecurity.
- Improved social connection.
- Students and staff are enjoying the benefits of a healthier food environment.
- Improved healthy eating and oral health.
- Registered breastfeeding spaces are now on the Aust. Breast feeding associations website.
- We now have a community garden space that can be used for all community members and groups to educate about food and food security.

- Vulnerable families are better educated and given tools to assist in making healthy eating choices.
- Kindergarten Families have been able to access free dental care/advice.
- Not able to provide for all families in need.
- People are more aware of growing their own food.
- Community members who use the library are utilising the produce grown.
- Improved collective impact and strengthened regional approach.
- Increased quantity of produce harvest from the garden.
- Self-reported increase consumption of vegetables.
- Improved feelings of social connection.
- Operation of healthy eating based operator.
- Increase in fresh produce stallholders.

How did you measure these impacts/outcomes?

Most activities under increasing healthy eating was collected using participation and attendance and data counts, both informal and formally collected community feedback, community surveys and annual project evaluations. Other measures included the consumer tracker that records foodbank consumers and the produce harvest tracker.

Were there any unintended impacts/outcomes from the activity?

Multiple unintended impacts have arisen through programs and activities that increase healthy eating, the majority were deemed positive by partners:

- Some community members started to collect food for rough sleepers and off grid communities.
- Expansion of partnership opportunities.
- Families started asking more questions about budgeting and eating healthier on a budget.
- Many of the volunteers are reporting increased feelings of social cohesion and connection.
- We were not expecting the high level of community support the project has received.

The only negative unintended outcome related to food donation services running out of food and increasing demands on food donations.

Appendix 6 – Tackling Climate Change and its Impact on Health results

OUTCOMES	
<ul style="list-style-type: none"> • Increased sustainable food production initiatives 	
<ul style="list-style-type: none"> • Improved understanding of how to address the impact of climate change on health 	
STRATEGIES What we are going to do	ACTIONS How we will go about it
5.1 Increase community understanding of actions they can take to stay healthy in a changing climate	<ul style="list-style-type: none"> • Support programs that increase awareness of, and participation in, health-promoting and emissions-reducing activities e.g. active transport, healthy eating • Build collaborative partnerships to support whole-of-community action to mitigate emissions and adapt to climate change • Engage with the community to raise awareness about climate change and its impacts on health and build capacity to take action to stay healthy in a changing climate
5.2 Support and encourage community to prevent, prepare, respond and recover from health impacts associated with emergencies and natural disasters	<ul style="list-style-type: none"> • Raise awareness of link between climate change and mental health e.g. climate anxiety and event related depression e.g. drought • Educate community about the link between climate emergencies and family violence • Partner with community and emergency management agencies to improve community preparedness and resilience to natural disasters e.g. bushfires • Support integrated and streamlined planning for climate emergencies
5.3 Provide and support mitigation and adaptation-focused activities that enable health co-benefits to be realised	<ul style="list-style-type: none"> • Promote active transport e.g. walking, cycling, skating and scooting • Advocate for more public transport • Support the consumption of locally produced fruit and vegetables
5.4 Promote and support healthy and sustainable food systems	<ul style="list-style-type: none"> • Support community led sustainable food system initiatives e.g. community gardens • Provide education and promotion on growing produce at home • Deliver programs around food sustainability and reducing food wastage • Deliver waste management/recycling practices and education programs

Figure 13. Tackling Climate Change and its Impact on Health Action Plan.

What did we do?

Partners

12 partners delivered 42 activities directly related to Tackling climate change and its impacts on health:

EXTERNAL	INTERNAL
Ballarat Community Health (Ballarat)	GPS, Community Development
Ballarat Community Health (Dereel)	GPS, Community Inclusion
Geelong Regional Library Corporation	GPS, Childrens Services
Hesse Rural Health	GPS, Economic Development
Women’s Health Grampians	GPS, Environment and Open Spaces
	GPS, Health and Wellbeing
	GPS, Recreation and Community Facilities

Table 9. Partners Involved in Tackling Climate Change and its Impacts on Health Actions.

Activities

Key activities included:

- Dereel DIY event aims to build household and community resilience in the lead up to fire season.
- Dereel Community Blanket Drive
- Golden Plains Food Forum.
- Promoting Go 4 Green and Vic Kids Eat Well programs within schools.
- Supporting Schools to complete new Climate and Health component of the Achievement Program.
- Partnering with agencies in Emergency Management to assist in preparing the community for emergencies.
- Deliver information sessions to the community on the impact of natural disasters and family violence.
- Engage with the community to raise awareness about climate change and its impacts on health and build capacity to take action to stay healthy in a changing climate.
- Support the consumption of locally produced fruit and vegetables.
- Develop a mental wellbeing co-benefits tool to document the climate co-benefits for health and wellbeing activities and programs.
- Deliver programs on food sustainability and reducing food wastage.
- Provide education and promotion on growing produce at home.
- Provide SMS/email alert to families based on Vic Emergency information as needed.
- Work with promotion officers to embed climate action into programming.
- Produce management plans for reserves in Golden Plains Shire which look to increase low impact recreational activities like walking and bird watching.
- Participation in the Grampians Regional Climate Adaptation Group to plan and support adaptation activities that can assist with emergencies and natural disasters.
- Participation in the Barwon South West climate alliance and support to deliver the Resilient Community Assets Project.
- Progress an electric vehicle transition plan for Council and progress actions in the climate emergency plan.
- Work in the Integrated Water Management Forums for the Barwon and Central Highlands Regions to promote IWM activities which have health benefits (e.g. increasing green spaces in small towns).
- Waste communications plan which includes ways to reduce food waste.
- Encourage activities like gardening to grow food at home through community grants programs, provision of compost bins at whole sale price and partnerships with other teams in Council.
- Advance regional knowledge in and constructive debate around complex challenges such as reconciliation, climate change, social equity, population growth.
- Continue to provide Seed Library resource and related programming to support the physical health and food security across the community.
- Providing awareness of health and wellbeing issues in relation to weather changes in the Winter months.
- Delivery and set up of Community Recovery Hubs, across Teesdale, Inverleigh, Shelford, Lethbridge and Meredith.
- Promote and encourage community to apply for funding under the Community Strengthening Grants Program under the Environment and Sustainability Funding Stream.

Target population

- Women
- All community members
- Children
- Staff
- Families
- Older people

- Community Groups

How well did we do it?

What worked well?

- Online event improved access for isolated communities.
- Meeting with school staff as well as the school's Environmental Leaders.
- The development of the strategy benefited from a collaborative approach and engaging internal departments, external stakeholders and the wider community.
- Providing multiple opportunities using different consultation methods definitely assisted in reaching a wide and diverse audience.
- Empowering residents to make eco-conscious choices and inspire environmentally friendly purchasing decisions across four essential product categories: nappy products, sanitary products, incontinence products and portable drinking containers.

What could be done differently?

A key learning during this process related to our own internal knowledge regarding our lack of assets. This process highlighted that there are many tracks and trails with supporting infrastructure throughout the Shire we simply weren't aware of. Greater effort visiting townships and places within the Shire is critical.

Did your activity encounter any obstacles or barriers?

- Poor weather conditions.
- Finding suitable times to meet with schools is challenging.
- A lack of data and evidence was an obstacle to the development of this template.
- Manual registration processes were cumbersome.
- Limited budget and staffing resources.
- Poor community engagement.

What are the changes we are seeing?

What impacts/outcomes have resulted from the activity?

Of the 42 activities listed for Tackling climate change and its impacts on health, 45 per cent underwent some form of impact evaluation. The following impacts were identified:

- Improved health literacy for participants.
- Improved access for isolated communities
- Improved knowledge and awareness of food systems and climate.
- Staff have a better understanding of how to link climate co-benefits to their health and wellbeing work.
- More donations provided to vulnerable people.
- Approximately 1000 trees, shrubs, ground covers and grasses planted by community members in Council reserves.
- Improved community resilience.
- Progress in emission reduction goals.
- Students learnt new ideas relating to indigenous traditions, culture and history. An increased awareness of the rich cultural of indigenous people.

- Increased social cohesion, wellbeing, socialisation and the sharing of knowledge between community members.
- Better disaster management preparedness.

How did you measure these impacts/outcomes?

Most activities under increasing healthy eating was collected using participation and attendance and data counts, both informal and formally collected community feedback, community surveys and annual project evaluations. Other measures included counts of tubestock planted and compost bins purchased.

Have any unintended impacts/outcomes arisen from the program/activity?

Unintended impacts included improved partnerships between LGAs and the extent of community generosity when it comes to donating and volunteering.

Appendix 7- Municipal Public Health and Wellbeing Plan 2021-2025- Monitoring and Evaluation Report Infographic

Municipal Public Health and Wellbeing Plan 2021-2025- Monitoring and Evaluation Report (Year 3 - 2023-24)

THE MUNICIPAL PUBLIC HEALTH AND WELLBEING PLAN



HEALTH AND WELLBEING PRIORITIES

- IMPROVING MENTAL WELLBEING** (Icon: Head with heart)
- INCREASING ACTIVE LIVING** (Icon: Running person)
- PREVENTING FAMILY VIOLENCE AND ADVANCING GENDER EQUITY** (Icon: Hand)
- INCREASING HEALTHY EATING** (Icon: Apple and carrot)
- TACKLING CLIMATE CHANGE AND ITS IMPACT ON HEALTH** (Icon: Cloud with sun and rain)

MONITORING AND EVALUATING THE ACTION PLAN

WE ASK

- What did we do?
- How well did we do it?
- What are the changes we are seeing?

PARTNER FORUM

- Forward planning
- Strengths, Challenges, Threats, Solutions
- Reflections, new ideas and knowledge sharing

PARTNERS



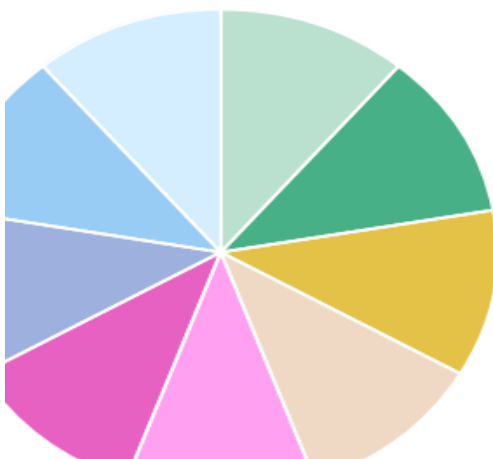
PARTNER ANALYSIS



23 PARTNERS
12 EXTERNAL + **11** INTERNAL

177 ADDITIONAL CONTRIBUTORS

- Health organisations
- Local sporting clubs
- State-wide and national sporting agencies
- Local community groups
- Service providers
- Government agencies and departments
- Education institutions
- NFP organisations
- Local businesses



PARTNERS

EXTERNAL

- Ballarat Community Health (Ballarat)
- Ballarat Community Health (Dereel)
- Bannockburn Surgery
- Barwon Public Health Unit
- Geelong Regional Library Corporation
- Geelong YMCA
- Haddon Community Learning Centre
- Hesse Rural Health
- Leisure Networks
- Sports Central
- Women's Health Grampians
- Western Victoria PHU

INTERNAL

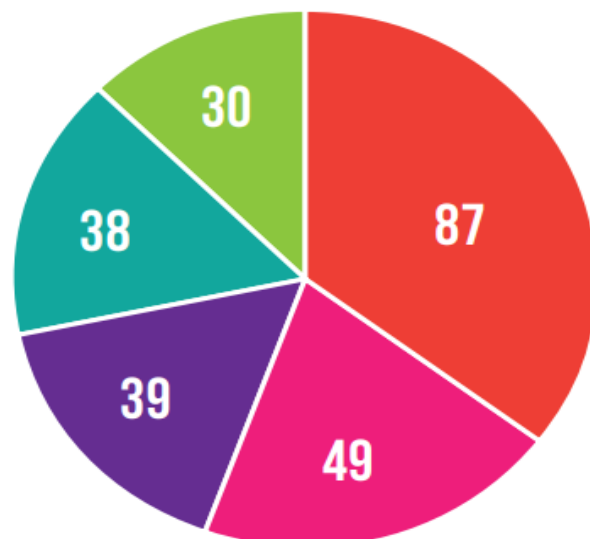
- Golden Plains Shire, Community Inclusion
- Golden Plains Shire, Community Development
- Golden Plains Shire, Community Safety
- Golden Plains Shire, Economic Development
- Golden Plains Shire, Environment and Open Spaces
- Golden Plains Shire, Health and Wellbeing
- Golden Plains Shire, Childrens Services
- Golden Plains Shire, People and Performance
- Golden Plains Shire, Recreation and Community Facilities
- Golden Plains Shire, Strategic Planning
- Golden Plains Shire, Youth

ACTIVITIES



NUMBER OF ACTIVITIES EVALUATED

-  Improving mental health
-  Increasing active living
-  Preventing family violence and advancing gender equity
-  Increasing healthy eating
-  Tackling climate change and its impact on health



POPULATION AND REACH



131,658

THE ESTIMATED REACH
FOR ALL ACTIVITIES

=



5x

POPULATION
OF GOLDEN
PLAINS SHIRE!

TARGET POPULATIONS INCLUDE

- Newborn babies
- Children
- Young people
- Adults
- Older adults
- Vulnerable groups
- Employees
- Students
- Hobbyists
- Women
- People with disabilities



KEY FINDINGS



IMPACT AREAS



KNOWLEDGE SHARING
Processes and design
PARTNERSHIPS AND NETWORKS
Community connection and resilience
Behaviour **COMMUNITY PARTICIPATION**
Skills and confidence **ACCESS**
COMMUNITY PARTICIPATION
Environments

COLLABORATION
Communication and promotion
EFFICIENT USE OF RESOURCES
Leveraging off experts and knowledge sharing
CLIMATE AWARENESS
Gender equity



KEY SUCCESSES



CHALLENGES



RISING COST OF LIVING
Enhanced capacity building
RESOURCES AND FUNDING
Evaluation and measuring outcomes
ACCESS TO SERVICES Transport
Community engagement

NEW IDEAS

- Improved local food systems
- More mental health programs
- Climate considerations in all programming
- Data and resource sharing
- Keep working to improve access

