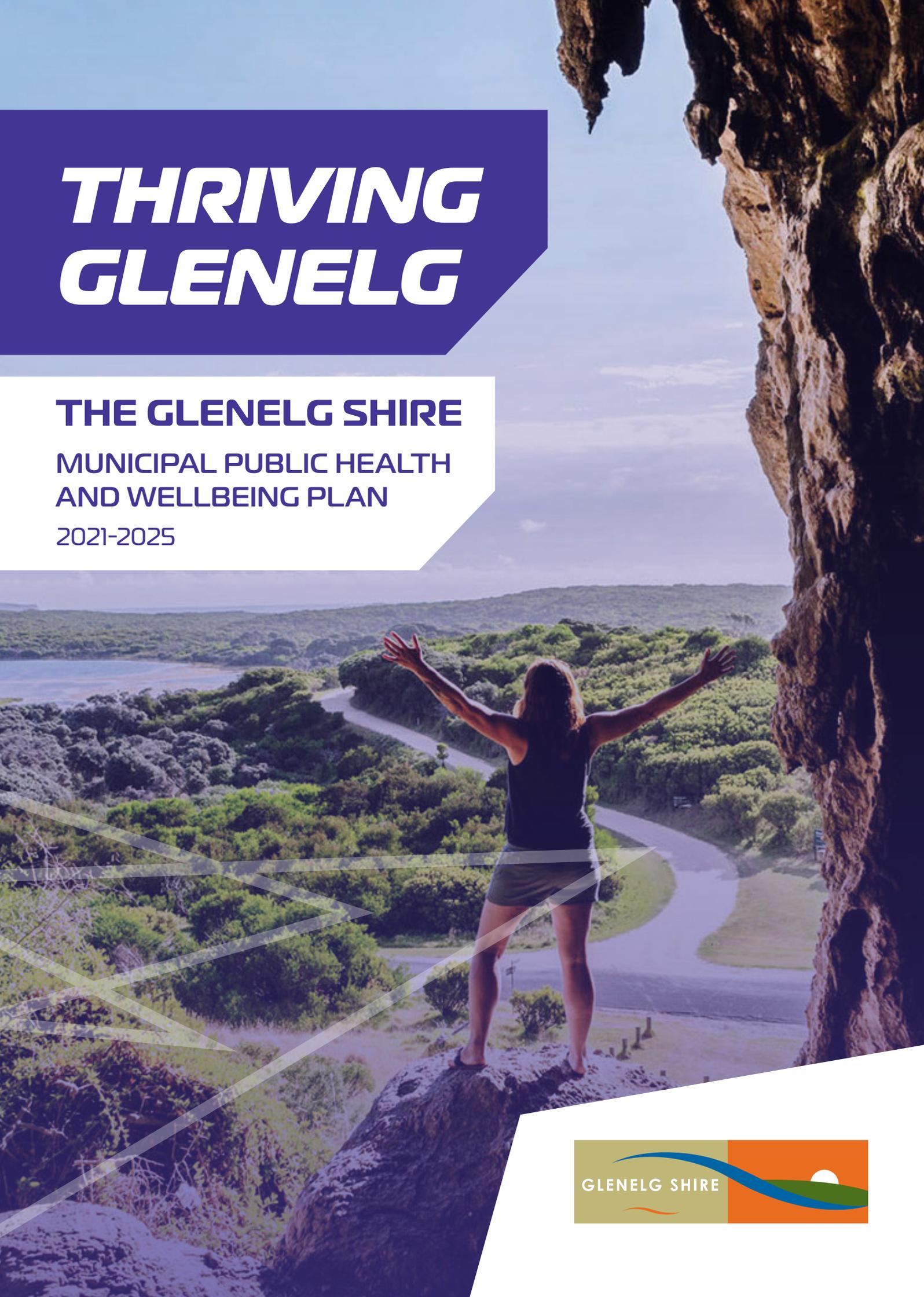


THRIVING GLENELG

THE GLENELG SHIRE

MUNICIPAL PUBLIC HEALTH AND WELLBEING PLAN

2021-2025



ACKNOWLEDGEMENTS

TRADITIONAL OWNERS

Glenelg Shire Council respectfully acknowledges the traditional lands and waters of the Gunditjmara people, Bunganditj people, Jardwadjali people and their respective cultural heritages.

Aboriginal and Torres Strait Islander People provide an important contribution to Australia's cultural heritage and identity.

We respectfully acknowledge the Aboriginal and Torres Strait community living throughout the Glenelg Shire and the contribution they make to the Glenelg Shire's prosperity and wellbeing.



OUR HEALTH PARTNERS

Council acknowledges and values our many partners who play an important role in delivering positive health and wellbeing outcomes for the community. We would like to thank our many service providers that actively participated in the design and development of this plan.



WELCOME

I am delighted to introduce you to the Glenelg Shire Health and Wellbeing Plan. This plan captures our health and wellbeing aspirations for the next four years and maps out a pathway to support Glenelg Shire community members to be active, engaged and thrive in all aspects of life.

As one of Council's key strategic plans, developed concurrently with the Council Plan and directly responding to the Glenelg 2040 Community Plan and Vision, we have undertaken a rigorous community engagement program to ensure that this document is reflective of the needs of Glenelg Shire residents. We know that the health and wellbeing of our community is influenced by a wide range of issues, some of them out of our control, and anticipate that the initiatives outlined will go a long way towards promoting positive health outcomes.

We recognise that better health and wellbeing outcomes for Glenelg Shire's community is a shared responsibility. Improving outcomes relies on collective and sustained effort from a range of partners, including all levels of government, non-government organisations, health professionals, communities, businesses, families, and individuals.

Whilst Council has an integral role to play in the development, delivery and reporting of this plan, many of the initiatives outlined here cannot be delivered by Council, but by our partner organisations. By including the extensive array of health and wellbeing initiatives into one document, we hope to develop a comprehensive plan that holistically addresses community need and can be used over the next four years by Council and partner organisations.

Glenelg Shire Council has a history of strong partnerships with our community health and wellbeing agencies, community groups, sporting clubs and Aboriginal groups. This Health and Wellbeing Plan is the culmination of months of hard work and contributions from over forty of those local partner organisations.

This plan takes an innovative approach to working collaboratively for the benefit of our Glenelg Shire community. The section entitled Our commitment to working together outlines this new strategic approach that Council, together with local service providers and partners, will take to ensure our community reaches its full potential over the coming years. It is there that we have outlined our commitment to strengthening partnerships, reducing duplication in service delivery, and providing an integrated response to health and wellbeing planning.

I am truly excited by the possibilities these enhanced partnerships can provide. I would like to thank the many individuals and service providers that have put thought and effort into the development of this document and have committed to its implementation.

It is through working together that we can achieve great outcomes for the Glenelg Shire community.

Cr Anita Rank



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VISION

OUR COMMUNITY VISION IS:

By 2040, Glenelg Shire is known as a very liveable region of Australia, featuring rich Indigenous heritage, outstanding natural beauty, and providing access to diverse economic and educational opportunities.

OUR HEALTH AND WELLBEING VISION IS:

Glenelg Shire is a thriving, resilient, connected and safe community where all residents can access appropriate services and fully participate in all life has to offer.



ABOUT THIS PLAN

Council is required to develop a four year Municipal Public Health and Wellbeing Plan under the Public Health and Wellbeing Act 2008. It recognises the significant role of councils in improving the health and wellbeing of people who live, work, study and play in their municipality. The Act outlines that a Health and Wellbeing Plan must:

- be consistent with the Council Plan and Municipal Strategic Statement
- look at the health and wellbeing data for its local area
- identify goals and objectives based on available evidence
- specify measures to prevent family violence and respond to the needs of victims of family violence
- allow the community to be involved in its development, implementation and evaluation
- specify how Council will work in partnership with the Department of Health and other agencies to achieve the goals of the Health and Wellbeing Plan.

In addition, the Act requires Councils to have regard to the State Public Health and Wellbeing Plan in developing their Health and Wellbeing Plan. The Victorian Public Health and Wellbeing Plan identifies ten health and wellbeing priorities. Councils are encouraged to concentrate their Health and Wellbeing Plan on four particular areas:

- tackling climate change and its impact on health
- increasing healthy eating
- increasing active living
- reducing tobacco-related harm.

The Climate Change Act (2017) also requires councils to have regard to climate change in preparation of their Municipal Public Health and Wellbeing Plans and is consistent with the focus areas of the Victorian Public Health and Wellbeing Plan.

Under the Disability Act (2006) all Councils are required to develop a Disability Action Plan, which must be reported on annually. The Disability Action Plan has been integrated into this Municipal Public Health and Wellbeing Plan and aims to achieve the following for people with disabilities:

- reduce barriers to accessing goods, services and facilities
- reduce barriers to employment
- promote inclusion and participation in the community
- achieve changes in attitudes and practices which may discriminate.

PLANNING FRAMEWORK

The Glenelg Shire Health and Wellbeing Plan is a key part of Council's Planning Framework. As well as being informed by the Victorian Health and Wellbeing Plan and a detailed analysis of the latest local health and wellbeing data, this document is underpinned by the Glenelg Shire 2040 Community Plan and Vision.

The Glenelg Shire 2040 Community Plan and Vision provides clear direction and outlines the community's long-term vision and aspirations. This document has influenced both the Health and Wellbeing Plan and the Council Plan, which have been developed concurrently. By ensuring alignment and consistency between these three documents, it is expected to increase the impact and reach of Council initiatives and reduce duplication.

An annual Action Plan will be developed, together with all partners, to outline specific initiatives within this Health and Wellbeing Plan including responsibilities, timeframes and resources. Together with the Council Plan, the Health and Wellbeing Plan, will help to shape Council's annual budgets over the four year period.



GLENELG SHIRE
2040

**COMMUNITY
PLAN AND VISION**
2020 - 2040



**10-YEAR LONG TERM
FINANCIAL STRATEGY**



**MUNICIPAL PUBLIC
HEALTH AND
WELLBEING PLAN**
2021 - 2025



**COUNCIL
PLAN**
2021 - 2025



ANNUAL BUDGET



COMMUNITY OUTCOMES

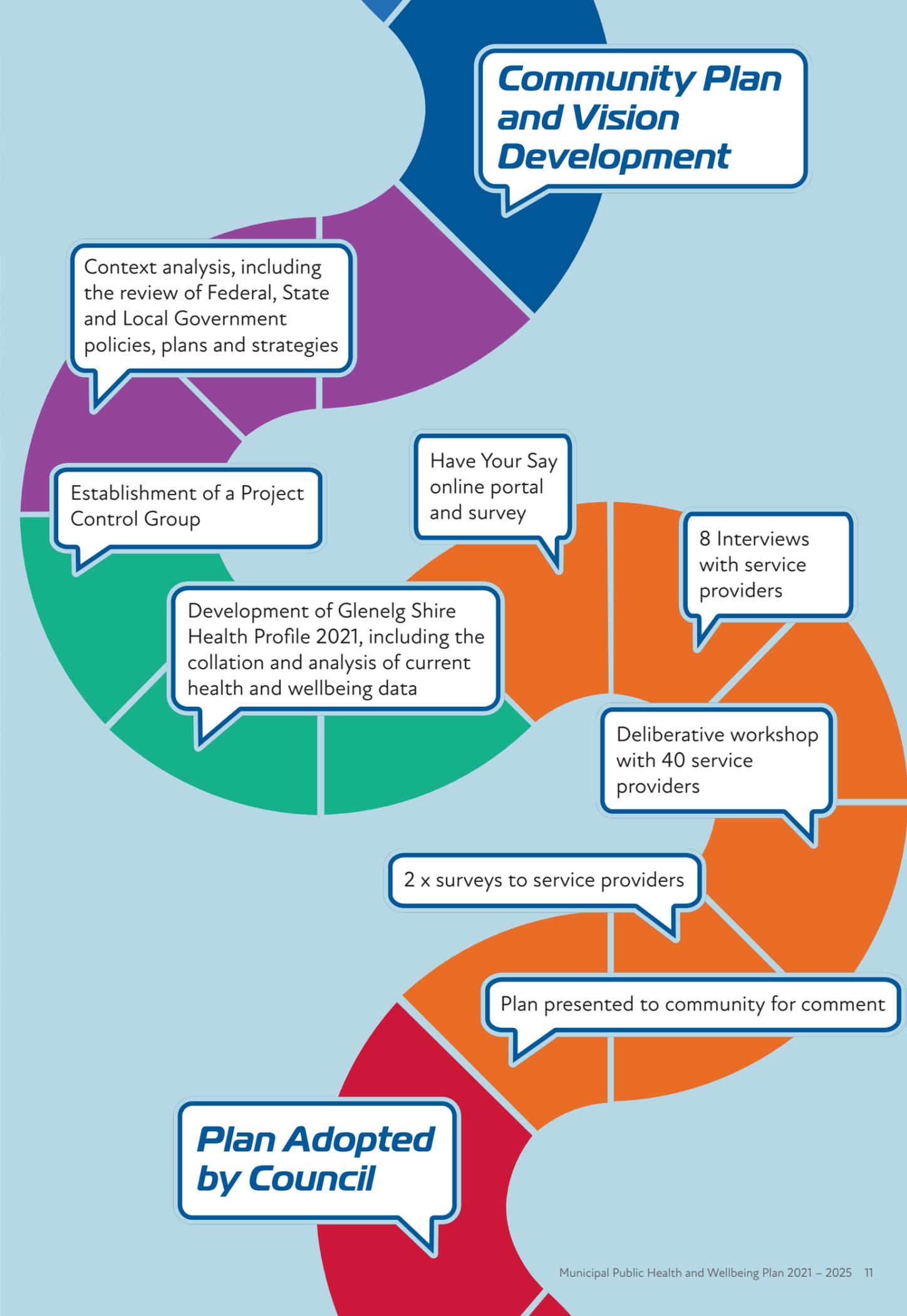
DEVELOPING THE HEALTH AND WELLBEING PLAN

PROCESS OF DELIBERATION

The development of the Glenelg Shire Health and Wellbeing Plan began back in 2019 during the development of the Glenelg Shire 2040 Community Plan and Vision. Participants were asked about the needs and aspirations for the future of the Glenelg Shire. Of the 2,688 comments that were received through the process, 1,268 comments related specifically to the health and wellbeing of residents in the Shire.

This feedback, received from over 1,600 people, has formed the basis of our understanding of community health and wellbeing needs. It was further enhanced by extensive research into local, regional and state trends, as well as a comprehensive engagement process that highlighted additional health and wellbeing considerations.

Understanding that this plan is owned and implemented by all service providers in the Glenelg Shire community, Glenelg Shire Council has taken a deliberative engagement approach to its development. Over 40 local service providers participated in a full day workshop, telephone interviews and a series of surveys. Together, these service providers from across Glenelg Shire have worked closely together to identify each goal, objective and ways in which the plan can be effectively implemented and reported on.



WHO WE HEARD FROM

Glenelg Shire 2040
Community Plan
and Vision:

1,691
participants

Health and wellbeing
survey:

56
participants

Deliberative
workshop:

40
service providers

Telephone interviews:

8
service providers

WHAT WE HEARD

Through the community engagement period we heard that the community wants to:



Build upon our strong
community spirit,
social connectedness
and celebrate
diversity



Participate in community,
leisure, recreational and sport
activities



Access quality
healthcare
services



Recognise and
celebrate
Aboriginal
culture and
heritage



Enhance mental
health support



Ensure people can
access appropriate
and affordable
accommodation



Support
older
people to
live well



Support
people with
disabilities



Address issues of family
violence



Reduce the use of alcohol,
tobacco and other drugs in the
community



Encourage young people
to stay in school and
access further education



Ensure residents are financially
stable and have access to
employment opportunities

During the deliberative workshop, service providers worked together to identify a series of goals and objectives that ensure all of the abovementioned community needs are met. Initiatives, measures and reporting structures were also brainstormed and will be further elaborated upon during the development of the annual Action Plan.

OUR APPROACH



WHAT IS HEALTH AND WELLBEING?

We believe that good health and wellbeing includes all aspects of life that contribute to positive health outcomes, not merely the absence of disease or illness. The Social Determinants of Health, as defined by the World Health Organisation, help to provide a basis for which to understand a broader definition of the term that includes many non-medical factors that impact our health and wellbeing.

The Social Determinants of Health include the social, political, economic, environmental and cultural factors that are as influential on an individual's health as their lifestyle choices, medical or genetic factors. Addressing these factors focuses on the circumstances in which people are born, grow up, live, work and age. It can lead to robust policies and strategies that consider areas such as access to transport, food security, social inclusion and access to health services.

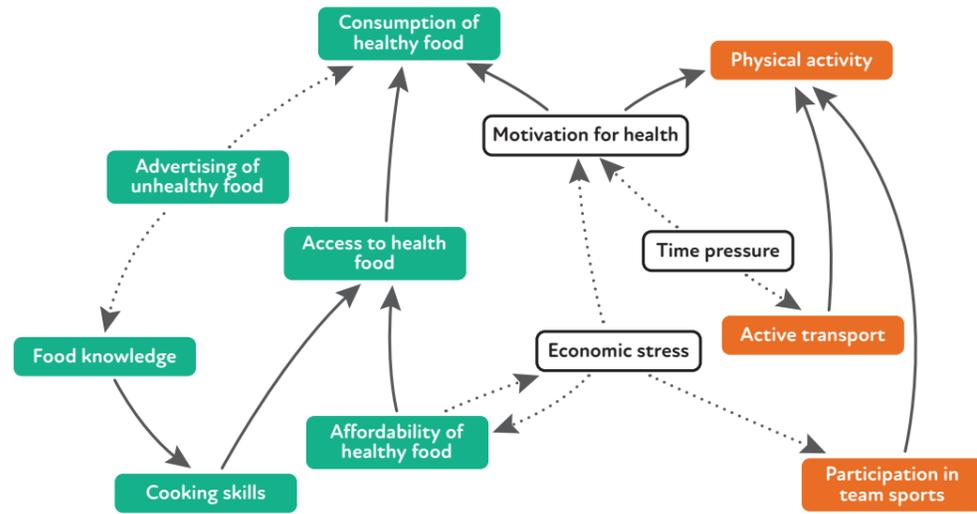
Figure 1: Social determinants of health



A SYSTEMS APPROACH TO HEALTH PLANNING

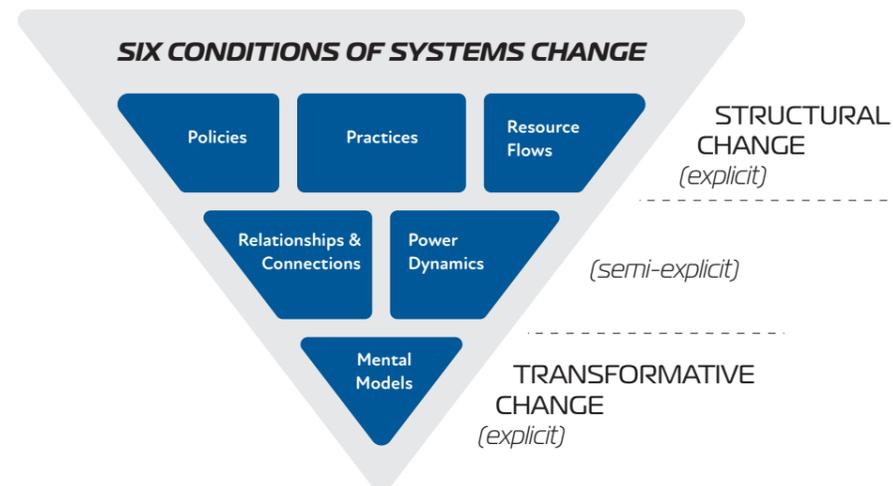
Through using a systems-based approach we aim to identify and understand the complex relationships between various factors that can influence health and wellbeing. This is achieved by taking a holistic view of health outcomes as demonstrated in Figure 2. This approach provides a useful way to unravel complex connecting factors that are relevant to local communities.

Figure 2: Example of a systems map showing the various factors that impact on healthy eating and physical activity.



Conditions that hold issues in place can then be addressed to achieve long term change. These conditions can be implicit such as policy, practices and resources, or can be more explicit such as relationships, power and norms, as shown in Figure 3.

Figure 3: Shifting the conditions that hold the issue in place



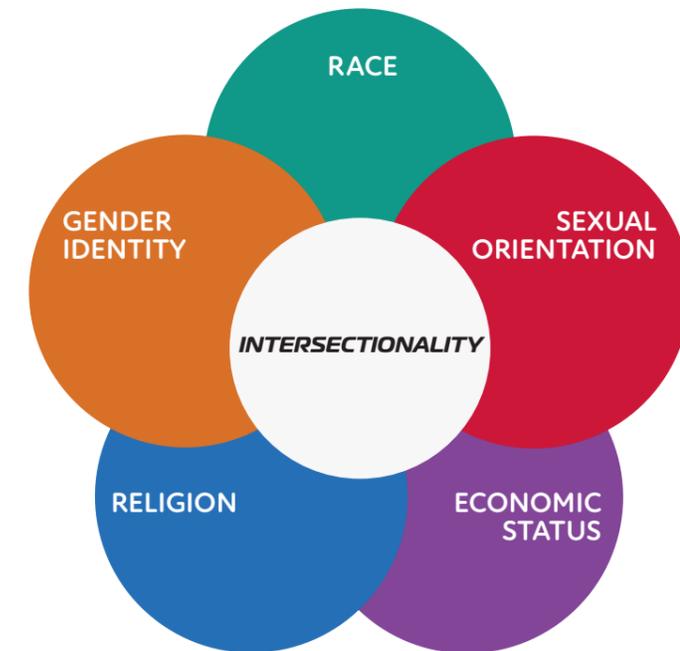
Source: Kania, J, *The Water of Systems Change*, 2018, p.4.

EMBRACING INTERSECTIONALITY

Intersectionality refers to the ways in which different aspects of a person's identity can expose them to overlapping forms of discrimination and marginalisation. Aspects of a person's identity can include characteristics such as Aboriginality, sexual orientation, gender identity, ethnicity, religion, mental health or socioeconomic status.

Glenelg Shire Council and its partners are committed to working with an intersectional approach, specifically through: understanding the social characteristics that may result in discrimination; considering how people experience multiple and intersecting forms of discrimination; hearing the voices of communities that may be facing discrimination and marginalisation; ensuring programs and activities are inclusive; and striving to address discriminatory practices.

Figure 4: Intersectionality example



COUNCIL'S ROLE

In developing this Health and Wellbeing Plan, Council has taken an integrated whole of community approach. Whilst some of the goals and objectives outlined below are the responsibility of Council to oversee and implement, many of the initiatives will be delivered by community-based service providers that are partnering in the development and implementation of this plan.

Glenelg Shire Council will support the collaboration between partner organisations, provide an integral advocacy role, lead the development of annual action plans, report on progress made, and provide specific services where appropriate (such as Children's Services or Aged and Disability Services).

OUR COMMITMENT TO WORKING TOGETHER

Glenelg Shire communities can reach full potential when we work in collaboration, share resources and build our capacity to deliver change. By embracing risk, learning and building upon previous experience and supporting new and innovative practices, together we can foster thriving communities now and into the future.

We aim to work together to implement the Glenelg Shire Municipal Public Health and Wellbeing Plan in new and innovative ways. We will report on the work we do and the growth we make in this area.



COMMITMENT 1:

Fostering leadership and building collaboration

Together we will:

- advocate to create systemic change
- take a cross-sector and intersectional approach to address complex issues
- foster community leadership and utilise lived experience
- collaborate, share resources and strengthen partnerships
- implement the Glenelg Shire Municipal Public Health and Wellbeing Plan.



COMMITMENT 2:

Building a culture of innovation and learning

Together we will:

- develop skills, capacity and mentoring opportunities
- develop shared measurement, evaluation and learning plans
- support opportunities for idea generation and shared problem solving
- implement new and responsive community-led solutions
- track and learn from our collective experiences.



INTEGRATE GLENELG

Integrate Glenelg is a new initiative that will oversee, facilitate, evaluate and report on the implementation of the Commitments outlined in this Plan.

The Glenelg Shire area has many great collaborative initiatives that are focussed on tackling single components and issues that impact on the community's health and wellbeing. Integrate Glenelg aims to facilitate stronger integration across multiple and inter-related issues and initiatives to achieve even better community outcomes. Integrate Glenelg aims to 'work smarter not harder' by addressing these common challenges together in a more strategic and integrated way.

Workshops and discussions between local collaborative initiative partners, including Live4Life (youth mental health), Beyond the Bell (education attainment), Hands Up Casterton (young people reaching their full potential) and SEA Change Portland (healthy and well community), have identified many common challenges and a desire to work together to address these. Many of these challenges have informed the Commitments in the Glenelg Shire Municipal Public Health and Wellbeing Plan 2021-25.

Integrate Glenelg aims to be accessible for all stakeholders to contribute to and benefit from the outcomes.

THE GLENELG COMMUNITY

Nestled in Victoria's far southwest corner, covering an area of 6,212 square kilometres, Glenelg Shire is renowned for its landscapes, natural beauty, expansive beaches, rugged coastline and large national parks.

The Traditional Owners of the region are the Gunditjmarra, Bunganditj and Jardwadjali people, with 2.4% of the population identifying as Aboriginal or Torres Strait Islander - higher than the Victorian average. The Shire had an approximate population of 19,859 in 2020 with approximately 70% of residents residing in the key population centres of Portland, Heywood and Casterton.

With a strong sense of community spirit and pride, we have high rates of participation with nearly one in every three residents doing voluntary work. Our residents are passionate about sport and recreation, have active lifestyles and meet physical activity guidelines more than many other parts of Victoria.



OUR GLENELG SHIRE

2.4%

of the population identifies as Aboriginal or Torres Strait Islander descent, significantly higher than other parts of regional Victoria

70%

Key population centres of Portland, Heywood and Casterton have 70% of residents

47 years

The median age of Glenelg Shire residents is 47 years, which is 10 years older than the Victorian median

Glenelg Shire is a predominantly **rural area**

Budj Bim is a **UNESCO World Heritage site**, recognising Gunditjmarra people's continuing and strong connection to Country

The percentage of **young people** reduced from 38.9% in 2011 to 26.9% in 2016

Glenelg Shire is located on **Gunditjmarra, Bunganditj and Jardwadjali Country**

The **current estimated population** in Glenelg Shire is 19,859 and is expected to increase slightly to 20,109 by 2025

Glenelg Shire has the lowest **population density** in Victoria of 0.03 persons per hectare

Glenelg Shire 2040 Community Plan and Vision showed a strong desire by many residents to acknowledge, protect and **celebrate Aboriginal heritage** and culture

OUR SUPPORT SERVICES

Whilst the Glenelg Shire community has a number of challenges relating to its health and wellbeing, there has been a lot of work in recent years to address these issues. Glenelg Shire has a strong network of services that work to support the community to keep well and healthy.

GP Services

Residents of Glenelg Shire visit their GP more often than residents of neighbouring areas

Mental Health

Residents of Glenelg Shire are more than twice as likely to use mental health services than other residents around Victoria



13 primary schools, 4 secondary schools, 1 TAFE and 1 Special Development School are in Glenelg Shire

There are **1.05 GPs per 1,000 people** in Glenelg Shire, lower than the Victorian average



The number of partner organisations supporting the implementation of the Health and Wellbeing Plan 2017-2021 has almost doubled, from 22 partners in year one, to 40 partners in the 2021 year

33.9% of residents have **private health insurance**, compared to the Victorian average of 48%

162 young people sought help for their **mental health** and 71 for **alcohol and other drug-related support** through Headspace Portland in the 2020-2021 financial year



Glenelg Shire has 73 sporting clubs and recreational groups

OUR COMMUNITY RESILIENCE, CONNECTEDNESS AND PARTICIPATION

A well-connected and engaged community is proven to be more resilient and able to support physical and mental health. Communities that are more resilient generally have greater rates of community connectedness and belonging and are more able to stay balanced or bounce back after hardship. Participating in community life through activities such as employment, education, volunteering or social activities can also have significant influence on community levels of health and wellbeing. Recent research shows that the COVID-19 pandemic has shifted community values with increased emphasis placed on social connectedness and infrastructure to support positive physical and mental health.

 **14%**

Approx. 2,400 (14%) of Glenelg Shire residents live in poverty, most of those are women and people older than 65

 **82.7%**

82.7% of residents are born in Australia and 89.8% speak English only at home

 **1/4**

Over one quarter of all Glenelg Shire households were classified as low-income households



29% of residents do voluntary work, this is higher than the regional Victorian average of 24.3%


1 in 3

Almost 1 in 3 households are lone person households



7 out of 10

7 out of 10 residents have not finished secondary school

There are 21 free public **Wi-Fi access** points around Glenelg Shire, with 9 newly installed over the 2021 year

Connectedness can be challenging outside of Portland, with lower access to the internet and public transport and high reliance on **social support services**

There are two Aboriginal **Community Controlled Health Services** in the Shire: DWECH and Winda Mara

720 residents are registered to Council's **online engagement** portal, Your Say

There are few **affordable housing** options for lower income households in Glenelg Shire

Communities within Glenelg Shire highly value opportunities to **participate** in community life, events and recreation activities

The **Aboriginal community** has a higher number of early school leavers, lower incomes, higher proportion of one parent families and higher unemployment rates than the non-Aboriginal population

In June 2020, Glenelg Shire had a higher **unemployment rate** than its neighbours

40% of residents are **employed** in the agriculture, forestry or fishing industries

OUR HEALTH AND WELLBEING



In the 2017-2018 financial year, 22.2% of babies in Glenelg were fully breastfed at 6 months, compared to 22.0% around Victoria. These figures are well below the Australian National Breastfeeding Strategy's aim for at least 50% of babies to be breastfed to around 6 months by 2025.

 **Lower Rates**

Residents have lower rates of asthma and osteoporosis

 **1/4**

More than one quarter of the population has a disability



Glenelg Shire has the third highest rate of obesity in Australia



More residents in Glenelg Shire meet physical activity guidelines than in other parts of Victoria



Community reported greater concerns for their mental health during COVID-19 pandemic



Glenelg Shire has a male suicide rate 31% higher than the Victorian average

45.7% rate their **health** as excellent or very good

A high proportion of adults are at risk of **alcohol-related harm**

Females in Glenelg Shire have higher rates of **anxiety and depression** than males

Life expectancy is 3 years less than the Victorian average

Smoking rates in Glenelg Shire are higher than neighbouring areas

Children in Glenelg Shire are more likely to be **overweight** or **obese** compared to neighbouring areas

Glenelg Shire has high rates of **family violence**

Glenelg Shire has high rates of **avoidable deaths**

Top **causes of death** are due to coronary heart disease, diabetes, chronic obstructive pulmonary disease, stroke and lung cancer

Glenelg Shire residents are eating less **fruit** and **vegetables** in recent years

Personal safety of elderly people who are living by themselves is a community concern during severe weather events such as bushfires and floods

GUIDING PRINCIPLES

Four principles guide the work that we do towards the goals and objectives:



BY COMMUNITY FOR COMMUNITY:

We will work with our communities wherever possible to ensure they are empowered to solve and act on issues affecting them.



EVIDENCE INFORMED:

We will collect, share and use local and regional data, trends and learnings to inform our practice.



SUPPORTING INNOVATION:

We will embrace new thinking and approaches, take calculated risks and challenge the status quo.



SYSTEMS APPROACH:

We will work together with community members to identify all conditions that contribute to health and wellbeing problems. We aim to address these explicit, semi-explicit and implicit conditions in a holistic manner.

Although the Guiding Principles are all equally important, they may not be relevant to all initiatives within this Municipal Public Health and Wellbeing Plan. As part of the planning process, the Guiding Principles will be considered and underpin initiatives, where relevant.

GOALS AND OBJECTIVES

GOAL 1:

BUILDING HEALTHY AND WELL COMMUNITIES

A healthy and well community is one where people have a range of opportunities to participate in daily life, be physically active and mentally well.

To support physical and mental wellbeing, individuals require safe environments, access to and knowledge about healthy food and lifestyle options. Research suggests that diversity, inclusion and culture all support the social and economic health of a community. Through acknowledging and embracing our differences, we can instil even more pride and belonging in our Glenelg Shire communities.

★ OBJECTIVE 1.1:

INITIATING OPPORTUNITIES FOR HEALTHY AND ACTIVE LIVING

This objective includes initiatives that will:

- increase breastfeeding rates
- provide healthy food options
- address issues of food security
- provide access to sport and informal recreation opportunities
- provide reproductive education and health services
- support smoking cessation
- reduce harmful impacts of drug and alcohol use
- deliver health promotion programs
- support early years development
- support healthy and active ageing
- increase positive public health outcomes through improved quality and taste of water supplies for Portland and Heywood.



KEY EVIDENCE

Glenelg Shire residents generally have good health with 45.7% of residents rating their health as excellent or very good, higher than the Victorian average of 41.6%. Only 19.4% of Glenelg Shire adults rate their health as fair or poor, indicating slightly better perceived health than the Victorian average of 20.3% [1].

The population of Glenelg Shire is expected to change over the coming years. By 2035, the largest increase in persons is expected to be in the 75-79 age group, with the largest age group predicted to be 65-69 years. [5] With an ageing population it is usual to see an increased proportion of residents with disabilities and requiring assistance.

Objective 1.1 is supported by key data:

52.5% of residents are considered overweight or obese. [1]

57.3% of residents did not meet fruit and vegetable consumption guidelines. [1]

48.5% of years 2,4 and 6 students are overweight or obese. There was a significant increase from the previous study which (32.6%). [2]

70.9% of years 4 and 6 students met the recommended daily intake of fruit, whilst **21.1%** met the guidelines for vegetable intake. [3]

In the 2017-2018 financial year, **22.2%** of babies in Glenelg Shire were fully breastfed at 6 months, compared to **22.0%** around Victoria. These figures are well below the Australian National Breastfeeding Strategy's aim for at least 50% of babies to be breastfed to around 6 months by 2025. [4]

14.7% of year 4 and 6 students consumed takeaway food consumption more than once a week, a significant increase from 2015 (4.5%). [3]

39% of residents do not meet the physical activity guidelines, lower than the Victorian average (44.1%). [1]

24.4% of residents are current smokers, significantly higher than the Victorian average (16.7%). [1]

64.2% of residents are at increased risk of alcohol related harm, higher than the Victorian average (59.5). [1]

75% of residents do not drink the tap water in Portland and Heywood
44% of year 4 and year 6 children in Portland do not drink the recommended amount of water per day. [less than 5 glasses of water per day] Water consumption by adults and children is significantly lower than the Victorian average.

★ OBJECTIVE 1.2:

BUILDING MENTALLY WELL COMMUNITIES

This objective includes initiatives that will:

- support mental wellbeing and mental health education
- advocate for increased service levels
- encourage young people to seek help early and support early intervention
- support holistic approaches for early intervention and postvention.

KEY EVIDENCE

Overall, many Glenelg Shire residents report feeling as though life is worthwhile; **84.3%** of the adult population reported high or very high feelings of life being worthwhile. [1]

27.8% of adult residents have never been diagnosed with anxiety or depression, which is similar to the Victorian average of 27.4%. [1]

15.5% of residents reported high or very high levels of psychological distress.

17.6% of residents sought professional help for mental health issues during 2016. [1]



★ OBJECTIVE 1.3:

CREATING RESPECTFUL, INCLUSIVE, CULTURALLY AWARE & SAFE COMMUNITIES

This objective includes initiatives that will:

- promote gender equity
- support the prevention of family violence
- acknowledge, recognise and value Aboriginal Culture
- encourage culturally safe organisations and communities
- support people identifying as LGBTIQ+
- celebrate diversity and build social inclusion
- address issues of community safety
- address disadvantage
- support connection to place through increased recreational and public art opportunities.

KEY EVIDENCE

Residents of Glenelg Shire would like to foster social inclusion, embrace diversity and enhance community safety. As 2.4% of the Glenelg Shire community identifies as Aboriginal or Torres Strait Islander, almost three times higher than the State average, [5] residents have demonstrated a strong desire to acknowledge, protect and celebrate Aboriginal heritage and culture. There is an overall sentiment with the Shire of feeling safe and trusting of other residents. This is reflected in data that shows:

81% of residents agreed that people in their neighbourhood can be trusted, higher than the proportion Victorian average of 71.9%. [7]

93.6% of residents agreed that they felt safe walking alone during the day, which is similar to the Victorian estimate of 92.5%. [7]

62.3% of residents agreed that they felt safe walking alone in their local area after dark, which is significantly higher than the Victorian average of 55.1%. [7]

7768 (approx) criminal offences per 100,000 population which has been consistently higher compared to other regions in the Wimmera South West Area. [6]

SEIFA Index of 947, indicating a higher level of disadvantage than many other parts of Victoria and a higher level of disadvantage than its neighbouring local government areas. [5]

GOALS AND OBJECTIVES

GOAL 2:

BUILDING STRONG COMMUNITIES

A strong community is one where people can live, work and play in a safe environment and be resilient when faced with challenging situations.

Addressing such needs as secure housing, financial stability, community connectedness, access to education and employment, as well as addressing the impacts of climate change, all contribute to the foundations of a strong and resilient community. Whilst Glenelg Shire has a vibrant community spirit, safe neighbourhoods and high rates of volunteerism, we can still do more to support community resilience and active participation in community life.

★ OBJECTIVE 2.1:

ENHANCING ACCESSIBLE NEIGHBOURHOODS, SERVICES AND ACTIVITIES

This objective includes initiatives that will:

- support access to secure and appropriate housing
- provide and advocate for enhanced access to health, wellbeing and mental health services across the lifespan
- support connectivity through providing accessible footpaths, tracks and trails
- address transport and infrastructure needs to increase access to services
- support digital connectivity and literacy.



KEY EVIDENCE

Objective 2.1 refers to all of the infrastructure and services that are often the backbone of thriving and healthy communities. Community organisations, through the consultation period, identified the lack of appropriate and affordable housing as a key concern currently within Glenelg Shire. The challenges of travelling in and around Glenelg Shire for those without access to a personal vehicle, along with the lack of sufficient digital connectivity were further highlighted in the feedback received during the development of the Community Plan and Vision.

Seven out of 10 (**70.2%**) residents feel that they live in a closeknit neighbourhood, which is significantly more than the Victorian estimate of 61.0%. [7]

3.2% of private dwellings are government and/or community owned social housing. [9]

21.4% of households did not have an internet connection at their home. [5]

★ OBJECTIVE 2.2:

BUILDING RESILIENT AND SOCIALLY CONNECTED COMMUNITIES

This objective includes initiatives that will:

- strengthen belonging and community pride
- support volunteering recruitment, retention and recognition
- address issues of loneliness
- provide opportunities for social connection and community participation
- support climate change adaptation
- respond to public health issues
- support the prevention and response of emergencies such as bush fires, flooding or other natural disasters.

KEY EVIDENCE

Objective 2.2 is supported by key data:

29.4% of households in Glenelg are lone-person, higher than the regional average of 27%. [5]

29% of residents aged over 15 have spent time in the past twelve months doing voluntary work, higher than the regional Victorian average of 24.3%. [5]

77.5% of residents agreed that people in their neighbourhood are willing to help each other out, higher than the Victorian estimate of 74.1%. [7]

70.2% of residents felt that they live in a close-knit neighbourhood, which is significantly more than the Victorian estimate of 61.0%. [7]

14% of Glenelg Shire residents live in poverty, with the following attributes of note:

- **54%** are women adults
- **13%** are older people aged 65 and older
- **43%** have a disability
- **28%** are in either full or part-time employment
- **55%** either own their own home or are servicing a mortgage
- **43%** of adults live with dependent children [12]



Research has shown that Glenelg Shire is likely to experience the impact of climate change over the next decade, through:

- an increase in average temperatures and the number of very hot days
- a reduction in average annual rainfall
- an increase in the frequency and intensity of storm events
- sea level rise and increased risk to coastal areas
- an increase in the annual number of very high or extreme fire danger days and likelihood of bushfires
- increased risks to life and property from natural hazards such as bushfires and floods
- pressures on natural ecosystems
- long-term implications for water supply and reliability.

Those living in poverty and on low income are especially vulnerable to the impacts of climate change and energy security. Extreme weather events will have a significant impact on those living in remote parts of the Shire, especially where there is limited telecommunications, digital connectivity and transport infrastructure. [10]

★ OBJECTIVE 2.3:

SUPPORT PARTICIPATION IN EDUCATION, LIFELONG LEARNING AND EMPLOYMENT

This objective includes initiatives that will:

- address school retention and readiness
- build pathways for employment opportunities
- provide formal and informal learning opportunities and upskilling
- support financial stability.

KEY EVIDENCE

Community priorities for the future of Glenelg Shire include a desire to encourage diverse employment opportunities, support young people to retain and grow the population through educational opportunities and pathways to employment.

In 2016, Glenelg had an estimated population of **5,272** young people aged 24 years or younger (26.9% of the total population). [5]

20.8% of residents aged 20-24 years left school before completing year 11 or an equivalent, which is consistent with data across the great South Coast. [9]

13.8% of 15-24 year olds were not employed or attending an education institution, higher than the average across regional Victoria (10.6%). [5]

33.7% of families with children under 8 years have parents who both did not complete year 12, higher than the Victorian average of 21.2%. [9]

4.1% unemployment rate, which is higher than neighbouring local government areas like Moyne (2.4%) and Southern Grampians Shire (3.2%) [11]. This is also likely to increase post COVID-19.

12.4% of residents receive the JobSeeker or Youth Allowance, higher than the regional Victoria average (10.5%). [5]

33.7% of households are in the lowest income quartile group (\$0-\$494 per week), this is higher than the regional Victoria average (30.7%). [5]

COMMUNITY QUOTES

“I’d love to see only real food at sports clubs & schools. Only water fountains, no plastic water bottles or soft drink.”

“Sense of social connectedness, social support and feelings of safety.”

“Better and more reliable internet connection.”

“Therapy dogs and activities for older people to keep them active and healthy.”

“A Shire that protects our community, our environment and is aware of climate change.”

“Ban smoking and alcohol at the skatepark.”

“We need financial support for people sleeping and experiencing homelessness.”

“We need some recreation activities for young kids.”

“The shire needs improved public transport like rail to Melbourne.”

“Combined social isolation and mental health issues – big problem and getting worse.”

“Employment and job opportunities, especially for young people.”

“Better and more mental health services.”

“I’d like to see more diversity of employment and better local education so that we don’t lose young people.”

“Better supports for medical professionals to stay on and not leave.”

“Better support for professionals to stay on and remain in the region.”

“A future Glenelg that showcases our rich history with the focus on Aboriginal history and showcases our inclusion.”

“A place that is welcoming and non discriminatory regardless of age, gender, sexuality, culture, background and past history. We are all loveable and should be respectfully treated.”

MEASURING OUR PROGRESS



Glenelg Shire Council will work with its health and wellbeing partners to develop an annual integrated action plan. This plan will outline what initiatives will be undertaken within a 12 month period to achieve the goals and objectives of the Health and Wellbeing Plan. This will ensure a collaborative approach is undertaken to identify and deliver opportunities to improve health and wellbeing across population groups and service delivery areas.

Each annual action plan will identify progress evaluation measures to ensure actions can be tracked and reported to Council and key stakeholders. Action plans will be reviewed and updated annually.

In order to meaningfully evaluate the impact of the Health and Wellbeing Plan, a biennial survey will be developed by Council in collaboration with Integrate Glenelg and its partners. This will facilitate impact and outcome evaluation, allowing for the tracking of goals and objectives and assisting in the identification of emerging health and wellbeing issues.

Alongside the quantitative data evaluating the Health and Wellbeing Plan (e.g. survey results, state government reported data and pre-post program evaluations), case studies, narratives and storytelling will be utilised. These detailed and innovative reporting techniques allow for an in-depth exploration of how health and wellbeing programs impact on individuals and communities. This can often be lost when looking at data collated across programs, objectives or goals. Case studies, stories and narratives facilitate a rich understanding of the community's experience and the far-reaching impact of the Glenelg Shire Health and Wellbeing Plan. This method will also be used to measure the impact of Commitment 1 and 2 on the health and wellbeing partners.

Table 1: Measuring the Health and Wellbeing Plan

LEVEL	EVALUATION TYPE	EXAMPLES OF EVALUATION METHODS	REPORTING FREQUENCY
Goals	Outcome evaluation	<ul style="list-style-type: none"> Survey State government data (e.g. VicHealth indicators) Full evaluation in line with development of the next Health and Wellbeing Plan (in year four) 	Biennial
Objectives	Impact evaluation	<ul style="list-style-type: none"> Survey State government data (e.g. VicHealth indicators) 	Biennial
Actions and Commitments	Progress evaluation	<ul style="list-style-type: none"> Narrative Case studies No. of participants Program evaluation e.g. participant knowledge or behaviour change 	Yearly

APPENDIX

REFERENCES

- [1] Department of Health and Human Services, Victorian Population Health Survey 2017 data tables, accessed February 2021, <https://www2.health.vic.gov.au/>
- [2] GLOBE, Great South Coast Childhood Obesity Monitoring System. Global Obesity Centre, Deakin University, 2020, accessed February 2021, <https://globalobesity.com.au/>
- [3] Southwest PCP, Health and Wellbeing Trends for Great South Coast, October 2020
- [4] Department of Health and Human Services, Maternal and Child Health Services Annual Report 2017-18, South-Western Victoria Region
- [5] id consulting pty ltd, 2020, Glenelg Shire Social Atlas, accessed January 2021, <http://atlas.id.com.au/>
- [6] Crime Statistics Agency, 2020, Data Tables LGA Recorded Offences Year Ending September 2020, accessed February 2021, <https://www.crimestatistics.vic.gov.au/>
- [7] VicHealth, Indicators Survey 2015, access February 2021, <https://www.vichealth.vic.gov.au/>
- [8] Australian Institute of Health and Welfare, 2019, Specialist Homelessness Services Collection (SHSC) data cubes 2011/12 to 2019/20, <https://www.aihw.gov.au/>
- [9] Great South Coast, "Health and Wellbeing Profile," 2020
- [10] Glenelg Hopkins Management Authority, Climate change strategy Glenelg Hopkins CMA, Responding to Climate Change in the Glenelg Hopkins Region, 2016, <https://info.ghcma.vic.gov.au/>
- [11] Department of Education, Skills and Employment, 2020, LGA Data tables - Small Area Labour Markets - June quarter 2020, accessed February 2021, <https://lmip.gov.au/>
- [12] Tanton, R., Peel, D. and Vidyattama, Y., (2018), 'Poverty in Victoria', National Centre for Social and Economic Modelling Institute for Governance and Policy Analysis (IGPA), University of Canberra. Report commissioned by VCOSS





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