



GLEN EIRA
CITY COUNCIL



Glen Eira City Council

Municipal Public Health and Wellbeing Plan

2017–2021

Municipal Public Health

and Wellbeing Plan



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Glen Eira City Council's *Municipal Public Health and Wellbeing Plan 2017–2021* is a strategic document that aims to maximise the health and wellbeing of Glen Eira residents.

The Public Health and Wellbeing Act 2008 requires Council to prepare a municipal public health and wellbeing plan within the period of 12 months after each general election of Council.¹

¹ State of Victoria. Section 26 (1) *Public Health and Wellbeing Act 2008*.

0 | Introduction

This *Plan* outlines the role that Council will play in improving the health and wellbeing of Glen Eira residents through Council-run programs and projects, by advocating and working in partnership with health service providers, government bodies, community groups and residents.

It provides an overview of the health and wellbeing of Glen Eira residents, Council's progress to date and our aspirations for health and wellbeing.

The *Plan* also provides a set of strategies and objectives to improve outcomes for the community.

Glen Eira residents enjoy a relatively high level of health and wellbeing when compared against the Victorian average. However, the incidence and burden of chronic disease continues to present key challenges for Glen Eira.

Prevention and early intervention are still the best ways to fight lifestyle related diseases that lead to serious illness. Healthy eating, active lifestyles, tobacco free living, social connection and screening to assist in the early identification of illness, continue to be the focus of effective public health policy to reduce the burden of disease.

Effective leadership, advocacy, planning and service delivery is required on the part of all stakeholders within our City to ensure Glen Eira residents continue to have access to relevant, affordable and effective public health services.

The following public health and wellbeing priority areas have been established through the analysis of health and wellbeing data, and feedback received from local health agencies and community members.

1. Demonstrate leadership, advocacy and collaboration
2. Promote active lifestyles and healthy eating
3. Reduce tobacco, alcohol and other drug consumption
4. Respond to family violence
5. Improve mental health and community connection
6. Enhance public health protection

The *Municipal Public Health and Wellbeing Plan 2017–2021* will be reviewed annually to highlight key milestones and achievements, and provide updates against the health priority areas. An action plan will also be developed each year for the life of the *Plan*.

02 Public health and wellbeing plans

The Victorian Public Health and Wellbeing Act 2008 is central to Victoria's public health.

It aims to:

- protect public health and prevent disease, illness, injury, disability and premature death;
- promote conditions in which people can be healthy; and
- reduce inequalities in the state of public health and wellbeing.

All Victorian local governments are required to develop a public health and wellbeing plan under the provisions of the *Victorian Public Health and Wellbeing Act 2008*.²

Legislation requires that the plan must:

- include an examination of data about health status and health determinants in the municipal district;
- identify goals and strategies based on available evidence for creating a local community in which people can achieve maximum health and wellbeing;
- provide for the involvement of people in the local community in the development, implementation and evaluation of the public health and wellbeing plan;
- specify how Council will work in partnership with the department and other agencies undertaking public health initiatives, projects and programs to accomplish the goals and strategies identified in the *Municipal Public Health and Wellbeing Plan*; and
- ensure consistency with the *Glen Eira Council and Community Plan* and Municipal Strategic Statement.

Health as defined by the World Health Organisation (1946)³ refers to a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity.

Public health refers to 'the organised response by society to protect and promote health, and to prevent illness, injury and disability'.⁴

Public health is what we, as a society, do collectively to assure the conditions in which people can be healthy. 'Public health focuses on prevention, promotion and protection rather than on treatment; on populations rather than individuals; and on the (social/ economic) factors and behaviours that cause illness and injury' (*Victorian Public Health and Wellbeing Plan 2011–2015*).⁵

Council recognises the importance of climate change and its effect on health and wellbeing. As a result, climate change is identified as one of the four key themes in Council's *Environmental Sustainability Strategy 2016–2021*. This *Strategy* sets clear goals to 2021 to accelerate efforts to reduce greenhouse gas emissions and address the impacts that climate change may have on the Glen Eira community. It also sets long-term targets to achieve zero net emissions both from Council operations (2030) and from the community (2050).

The internationally recognised *Social Model of Health* will inform Council's role to improve the health and wellbeing of the community (see appendix A).

2. State of Victoria. Section 26. Public Health and Wellbeing Act 2008.

3. Preamble to the Constitution of WHO as adopted by the International Health Conference, New York, 19 June - 22 July 1946; signed on 22 July 1946 by the representatives of 61 States (Official Records of WHO, no. 2, p. 100) and entered into force on 7 April 1948. The definition has not been amended since 1948.

4. Commonwealth Government of Australia. National Public Health Partnership. 2007.

5. State of Victoria. Victorian Public Health and Wellbeing Plan 2011-15. 2011

03 Why is health planning so important?

Significant developments in health prevention and protection in recent decades have resulted in an increased life expectancy and a reduction in many of the risks to health and wellbeing. However, as some risk factors have decreased over time, others have increased and new risk factors have emerged. It is now estimated that more than one third of all premature deaths in Australia are the result of chronic preventable diseases (Australian Institute of Health and Welfare 2016).

Although the Glen Eira community enjoys a comparatively high level of health and wellbeing, residents are not immune to lifestyle risk factors such as obesity, sedentary behaviour, poor nutrition, smoking and alcohol.

Along with stress, high cholesterol and high blood pressure, these risk factors contribute significantly to the burden of disease in Glen Eira and provide opportunities for improvement through early prevention and management.

The ongoing provision of information, services and programs will enable residents to make healthy lifestyle choices and in turn, ensure a healthy future for Glen Eira.



04

Public health and wellbeing profile of Glen Eira

A comprehensive review of current population and health statistics for the City has been undertaken to inform the development of this *Public Health and Wellbeing Plan*.

Data from the Department of Health and Human Services 2012 shows that life expectancies for the residents of Glen Eira are slightly higher than the Victorian average. The life expectancy at birth for persons in Glen Eira was 81.2 for males, and 85.6 for females, higher than the Victorian state average of 80.3 for males and 84.4 for females.



Overall, Glen Eira residents enjoy a comparatively high level of health and wellbeing.

High levels of household and individual income is experienced, with a significantly lower percentage of Glen Eira residents receiving all forms of income support compared to Victoria. In addition, Glen Eira is ranked one of the lowest in the state in terms of socioeconomic disadvantage.

Self-reported wellbeing is a good predictor of ill-health and other significant health behaviours. The *2015 VicHealth Indicators Survey* asked respondents to rate their wellbeing on a scale of zero to 100. The report highlighted that Glen Eira residents gave their wellbeing an average score of 76.9 out of 100.

Despite this comparatively high level of health and wellbeing, Glen Eira residents are not immune to lifestyle related risks such as insufficient exercise, poor nutrition, smoking and alcohol.

The municipality has one of the highest rates of smoking in the Southern Metropolitan Region.

In terms of nutrition, more than half of Glen Eira residents are not meeting the recommendations for daily fruit and vegetable consumption.

Glen Eira residents also spend a significant amount of time in sedentary behaviour, with less than half of the population spending sufficient time in physical activity.

The incidence of family violence in Glen Eira also continues to rise, with 898 incidents reported to Victoria Police in 2015–16. Since 2011, the number of family violence incidents reported has increased by more than 45 per cent.

Positive health indicators for Glen Eira residents

LIFE EXPECTANCY

81.2(M) 85.6(F) Glen Eira
80.3(M) 84.4(F) Vic Av

Source: Department of Health
and Human Services 2013

RESIDENTS VISITING OPEN SPACE WEEKLY

58.8% Glen Eira
50.7% Vic Av

Source: Community Indicators
Victoria 2016

RESIDENTS ENGAGING IN SUFFICIENT PHYSICAL ACTIVITY

42.3% Glen Eira
41.4% Vic Av

Source: Australian Institute of
Health and Welfare 2016

PREVALENCE OF TYPE 2 DIABETES

3.8% Glen Eira
5.1% Vic Av

Source: National Diabetes
Service Scheme 2017

ASTHMA INCIDENCE PER 100,000 PEOPLE

9.8% Glen Eira
10.9% Vic Av

Source: Department of Health
and Human Services 2013

PREVALENCE OF HYPERTENSION

21.7% Glen Eira
24.5% Vic Av

Source: Victorian Population
Health Survey 2014

PREMATURE MORTALITY RATE PER 100,000 FROM SUICIDE & SELF-HARM INJURIES

3.8% Glen Eira
5.1% Vic Av

Source: Social Atlas of Australia 2013

PREVALENCE OF ARTHRITIS

16.6% Glen Eira
19.8% Vic Av

Source: Social Atlas of Australia 2013

CHILDREN FULLY IMMUNISED AT 12 MONTHS

94.9% Glen Eira
93.7% Vic Av

Source: Department of Health
Statistical Profile 2015

RESIDENTS OVERWEIGHT OR OBESE

56.8% Glen Eira
64.1% Vic Av

Source: Social Health
Atlas of Australia 2013

REGISTERED MENTAL HEALTH CLIENT RATES

7.7% Glen Eira
10.9% Vic Av

Source: Social Atlas of Australia 2013

PARTICIPATION IN CERVICAL CANCER SCREENING

65% Glen Eira
60% Vic Av

Source: Social Atlas of Australia 2013

Negative health indicators for Glen Eira residents

CANCER INCIDENCE PER 1000,000 PEOPLE

549.0	Glen Eira
511.4	Vic Av

Source: Social Atlas of
Australia 2013

PARTICIPATION IN BOWEL CANCER SCREENING

29.6%	Glen Eira
33.5%	Vic Av

Source: Social Atlas
of Australia 2013

RESIDENTS AT RISK OF SHORT-TERM HARM FROM ALCOHOL

33.7%	Glen Eira
29.4%	Vic Av

Source: Victorian Population
Health Survey 2015

PREVALENCE OF CURRENT SMOKERS

18.2%	Glen Eira
13.1%	Vic Av

Source: Victorian Population
Health Survey 2015

GP ATTENDANCE PER 1,000 POPULATION

5,074.9	Glen Eira
5,452.1	Vic Av

Source: Department of Health
and Human Services 2013

RESIDENTS SITTING FOR MORE THAN EIGHT HOURS A DAY

43.2%	Glen Eira
41.4%	Vic Av

Source: Community
Indicators Victoria 2016

RESIDENTS NOT MEETING FRUIT AND VEGETABLE CONSUMPTION GUIDELINES

54.8%	Glen Eira
48.6%	Vic Av

Source: Australian Institute
of Health and Welfare 2016

OLDER LONE PERSON HOUSEHOLDS (65+ YEARS) (SOCIAL ISOLATION)

10.7%	Glen Eira
8.9%	Vic Av

Source: Australian
Bureau of Statistics 2011

GAMING MACHINE EXPENDITURE PER ADULT

650.16	Glen Eira
553.13	Vic Av

Source: Victorian Commission
for Gambling and Liquor
Regulation 2016

05

Involving the community to help develop our plan

Consultation conducted at Caulfield Community Health's falls prevention groups

40 participants

CATCHMENT PLANNING CONSULTATION CONDUCTED WITH FIVE COMMUNITY HEALTH SERVICES

Environmental Sustainability Strategy Survey

300 responses received

Online via *Have Your Say* — Glen Eira Council and Community Plan consultation

74 comments received

148 votes received

TWO COMMUNITY CONSULTATION FORUMS HELD

ONE HEALTH SERVICE PROVIDER FORUM

CONSULTATION POSTCARDS DISTRIBUTED:

30 responses received

Survey conducted at Council's *Healthy Ageing* seminar:

20 participants

Youth Voice Survey ...

200 responses received

PLANNING FORUMS CONDUCTED WITH FIVE NEIGHBOURING COUNCILS

SURVEY CONDUCTED AT COUNCIL'S PARTY IN THE PARK EVENT:

100 responses received

This *Plan* was also influenced by data collected through community consultation conducted by Council in the last six to 12 months in the development of Glen Eira's:

- *Council and Community Plan*;
- *Ageing Strategy*;
- *Disability Action Plan*;
- *Environmental Sustainability Strategy*;
- *Planning Scheme*;
- *Youth Voice Survey*; and
- Early years centre consultations.

Each of these strategies have strong links with the *Municipal Public Health and Wellbeing Plan* and work in conjunction to improve the health and wellbeing of Glen Eira residents.

What the community told us ...



“More opportunities for the community to connect through cultural groups, activities and markets.”

“Public drop-in tai chi classes for health/arthritis.”

“It’s important that we care for people in our community who need support.”

“Mental health services need to work together in to provide more affordable and accessible services.”

“We would like access to health promotion seminars and programs targeting men’s health.”

“Support and encourage more local volunteering.”

“More opportunities for physical activity, exercise programs and walking groups.”

“What is important to me is a community where people feel connected.”

“Drugs and alcohol are an issue for young people in our community.”

“More community grants to support innovative healthy living programs.”

“Creating greater community wellbeing and resilience.”

“Volunteer programs and neighbourhood support programs to visit isolated older adults.”

“More consistent messaging about family violence.”

“Isolation is a problem as you get older.”

“Elderly residents need information on health issues, such as healthy eating, cooking, diet.”

“More health promotion seminars for the community.”

“More public health messages on community radio.”

“More community information about smoking restrictions.”

“More health information in different languages and a less complex health system.”

06

National and state public health policy context

State and federal governments play an important role in providing public health and wellbeing funding, legislative regimes and state wide health programs.

The *National Health Priority Areas* initiative is a collaboration across commonwealth, state and territory governments, non-government organisations, health experts, clinicians and consumers. *The National Health Priority Areas Strategy* aims to address specific diseases and conditions that contribute significantly to the burden of illness and injury in the Australian community.

The nine *National Health Priority Areas* are:

- cancer control;
- cardiovascular health;
- injury prevention and control;
- mental health;
- diabetes mellitus;
- asthma;
- arthritis and musculoskeletal conditions;
- obesity; and
- dementia.

Victorian Public Health Priorities

The vision of the *Victorian Public Health and Wellbeing Plan 2015–2019* is ‘a Victoria free of the avoidable burden of disease and injury, so that all Victorians can enjoy the highest attainable standards of health, wellbeing and participation at every age’.⁶

The *Victorian Public Health and Wellbeing Plan* identifies the following six priority areas as the major focus for action over the life of the *Plan*:

1. Healthier eating and active living
2. Tobacco free living
3. Reducing harmful alcohol and drug use
4. Improving mental health
5. Preventing violence and injury
6. Improving sexual and reproductive health

⁶ State of Victoria. *Victorian Public Health and Wellbeing Plan 2015–2019*. P5. 2015.



07 Role of local government

Council has a range of functions determined by the *Public Health and Wellbeing Act 2008*⁷ that relate to the protection, improvement and promotion of the public health and wellbeing of the Glen Eira community.

They include:

- creating an environment which supports the health of members of the local community, and strengthens the capacity of the community and individuals to achieve better health;
- initiating, supporting and managing public health planning processes at the local government level;
- developing and implementing public health policies and programs within the municipal district;
- developing and enforcing up-to-date public health standards, and intervening if the health of people within the municipal district is affected;
- facilitating and supporting local agencies whose work has an impact on public health and wellbeing;
- to improve public health and wellbeing in the local community;
- co-ordinating and providing immunisation services to children living or being educated within the municipal district; and
- ensuring that the municipal district is maintained in a clean and sanitary condition.



These responsibilities are actioned by Council through the delivery of health protection and health promotion programs addressing areas of food safety; tobacco control; infectious disease management; immunisation; and regulation of businesses that pose a threat to public health.

Council also delivers a wide range of services and community infrastructure that directly or indirectly influence the social, economic and environmental influences of health. This includes basic community infrastructure like roads and drainage; waste management services; land use planning; recreational facilities; parks and open space for leisure; and emergency management planning and response.

Council services that support our community, include services for the aged, families, youth and children; arts and culture programs; community events; public libraries; and community development programs.

⁷ State of Victoria. Section 24 Public Health and Wellbeing Act 2008.

08

Our progress to date

Council has already achieved significant progress in providing health and wellbeing initiatives for the Glen Eira community through the previous *Municipal Public Health and Wellbeing Plan 2013–2017*. The highlights according to each priority area from the previous *Municipal Public Health and Wellbeing Plan 2013–2017*, include:

Promote healthy eating and a physically active community	
Annual program of health promotion seminars implemented, with healthy eating and physical activity sessions delivered in partnership with community health centres, including <i>Healthy Eating on a Budget</i> , <i>Eating Well</i> , and <i>Ageing Well</i> .	✓
There were 52 premises that received a <i>Taste4Health</i> award and 14 premises that received a <i>Taste4Health Kids</i> award. These businesses met healthy menu criteria developed in partnership with Bentleigh-Bayside Community Health to provide food low in salt, sugar and fat and high in dietary fibre.	✓
There were 831 socially isolated older residents attended recreational outings and exercise classes each year to improve community connection and mental health.	✓
Promote community wellbeing and connectedness	
A range of community events were held each year, including:	
- <i>Party in the Park</i> (three events held between January to March) — 94,000 attendances 2013–17.	✓
- <i>Carols in the Park</i> — 22,500 attendances 2013–17.	
- <i>Springtime Music Festival</i> — 3,437 attendances 2013–17.	
- <i>Storytelling Festival</i> — 27,300 attendances 2013–17.	
There were 864 local volunteers from 205 community organisations recognised at annual <i>Volunteer Recognition</i> ceremonies for their contributions to the Glen Eira community.	✓
\$1,517,904 in community grant funding provided to local community groups for the delivery of community support services; health education programs; physical activity initiatives; alcohol and drug programs; and community events to facilitate community connections.	✓

Improve mental health

There were 6077 disadvantaged, isolated or at risk young people supported annually through Council's Youth Services support programs. ✓

There were 18 health promotion projects and programs provided to the community to improve mental health, including *Dementia Awareness Community Forum*, *Anxiety — Learn, Think, Do*, *Positive Pathways to Mental Health*, *Cyberbullying* and *Introduction to meditation*. ✓

Six major national and state awareness campaigns related to mental health promoted to the community through *Glen Eira News* (Council's monthly newspaper), Council's website, community flyers and community banners, including *Fluro Friday Mental Health Week*, *16 Days of Activism Awareness Campaign*, *R U OK Day*, and *White Ribbon Day*. ✓

Reduce harm from tobacco, alcohol and drugs

From 2013–2016, Council's environmental health officers conducted 273 tobacco inspections of tobacco retailers, eating establishments and licensed premises. ✓

Eight Responsible Service of Alcohol training sessions (two each year) for sporting clubs and the general public. ✓

Men's health forums — harmful effects of alcohol, tobacco and other drugs and parent education sessions on binge drinking, and harmful effects of drugs on young people. ✓

Deliver public health protection

From 2013–2016, Council's environmental health officers undertook 3,312 food safety assessments of registered food businesses. ✓

More than 49,500 vaccinations administered from 2013–2016. More than 90 per cent of children are currently up-to-date with vaccinations meeting national immunisation targets. ✓

There were 112 cases of infectious disease investigated in conjunction with the Department Health and Human Services and controls put in place to protect the community. ✓

Deliver public health leadership

There were 22 health promotion initiatives implemented in conjunction with Department Health and Human Services, primary care partnerships or local community health centres. ✓

Development of a new *Community Heatwave Plan* to better respond to extreme temperatures and promotion of heat health information through Council publications and website to protect vulnerable members of the community. ✓

Flood safety information promoted to the community to increase community resilience and capacity to respond and recover from extreme storm events. ✓

09

Public health and wellbeing priorities 2017–2021

The *Municipal Public Health and Wellbeing Plan 2017–2021* identifies six priority areas, and 24 health and wellbeing strategies. Each priority area includes a range of activities where Council can influence the health and wellbeing outcomes of the community. The focus of the *Plan* will be on addressing the health issues identified through research, community consultation and in state and national health strategies.

Council also recognises the need for inclusion of all community members, including Aboriginal and Torres Strait Islander residents, culturally and linguistically diverse communities, people with disabilities and LGBTIQ (Lesbian, Gay, Bisexual, Transgender, Intersex and Queer) community members across the priority areas and strategies contained in the *Plan*.

The six priority areas of the *Municipal Public Health and Wellbeing Plan 2017–2021* are:





PRIORITY 01:

Demonstrate leadership,
advocacy and collaboration

PRIORITY 01: DEMONSTRATE LEADERSHIP, ADVOCACY AND COLLABORATION

OBJECTIVE:

To facilitate partnerships, lead key local health and wellbeing awareness initiatives, and advocate on behalf of the community to improve outcomes for the community.

Why is this important for the Plan?

- The *Public Health and Wellbeing Act 2008* requires Council to specify how it will work in partnership with the Department of Health and Human Services and other agencies undertaking public health initiatives, projects and programs.
- The Department of Health and Human Services southern region works collaboratively with the health and community service sector, including local government, to develop integrated community health service systems that address overall population health requirements.
- The Southern Metropolitan Primary Care Partnership is a voluntary alliance of local government, community health and primary health organisations, working together to improve health outcomes throughout southern Melbourne.

Why is it a priority for Glen Eira?

- Strong partnerships with external organisations and stakeholders are required to maximise effort to address health and wellbeing outcome initiatives within the municipality.
- State and regional public health planning bodies provide an opportunity for Council to advocate on behalf of residents for public health and wellbeing issues to be addressed at the local level.
- Council works closely with and supports local community groups to implement community support and public health initiatives through an annual community grants funding program.

STRATEGIES:

- 1.1 Assist in building strong and effective partnerships with local health and wellbeing service providers to deliver quality outcomes, reduce duplication and fragmentation of effort.
- 1.2 Increase the availability of public health and wellbeing information in the local community.
- 1.3 Advocate on behalf of residents to state and federal governments for affordable, accessible and appropriate public health and wellbeing services.
- 1.4 Actively contribute to state and regional health planning networks and forums to assist in planning, promoting and delivering relevant public health and wellbeing initiatives.



PRIORITY 02:

Promote active lifestyles
and healthy eating

PRIORITY 02: PROMOTE ACTIVE LIFESTYLES AND HEALTHY EATING

OBJECTIVE:

To encourage regular physical activity and promote the consumption of safe and nutritious food.

Why is this important for the Plan?

- Unhealthy eating and low fruit and vegetable consumption are risk factors in the development of a number of chronic diseases, including coronary heart disease, stroke and many types of cancer (*Australian Institute of Health and Welfare 2016*).
- Difficulty accessing healthy, nutritious foods is a contributing factor to being overweight or obese, as those in low and middle socioeconomic areas are more likely to be exposed to cheaper, less nutritional food outlets. This can often result in poor choices of more affordable, energy dense foods (*Heart Foundation 2011*).
- Increased levels of physical activity help to decrease the risk of being overweight or obese, which is a major risk factor for diseases such as heart disease, cancer, stroke and respiratory diseases (*VicHealth 2012*).
- Sedentary behaviour is associated with poorer health outcomes, including an increased risk of type 2 diabetes (*VicHealth 2012*).

Why is it a priority for Glen Eira?

- Only 7.3 per cent of adults in Glen Eira meet the recommended daily intake of five serves of vegetables. This is slightly lower than the Victorian average of 7.4 per cent (*Australian Institute of Health and Welfare 2016*).
- More than half (54.8 per cent) of the Glen Eira population does not meet both fruit and vegetable consumption guidelines. This is higher than the Victorian average of 48.6 per cent (*Australian Institute of Health and Welfare 2016*).
- More than half (52.6 per cent) of Glen Eira residents do not spend sufficient time in physical activity. This is higher than the Victorian average of 50.4 per cent (*Australian Institute of Health and Welfare 2016*).
- Glen Eira residents engage in high levels of sedentary behaviour, with 30.4 per cent of people spending eight or more hours a day sitting, compared to the Victorian average of 23.8 per cent (*Australian Institute of Health and Welfare 2016*).
- 56.8 per cent of Glen Eira residents are overweight or obese. Though this figure is lower than the Victorian average of 64.1 per cent, rates of being overweight or obese are continuing to rise as are the risks of developing associated health conditions (*Australian Bureau of Statistics 2017*).

STRATEGIES:

- 2.1 Promote national, state and regional campaigns and initiatives to raise awareness of the importance of healthy eating and physical activity.
- 2.2 Continue to enhance the built environment of our City and partnerships with local community and sporting organisations to provide safe, accessible, inclusive environments for physical activity.
- 2.3 Promote the availability of safe, healthy and nutritious food in the City.
- 2.4 Encourage people to consume recommended daily intake of fruit and vegetables, and reduce consumption of sweet drinks and unhealthy food.



PRIORITY 03:

Respond to family violence

PRIORITY 03: RESPOND TO FAMILY VIOLENCE

OBJECTIVE:

To work in collaboration with local organisations to improve access to information and services to reduce family violence.

Why is this important for the Plan?

- Australia's first Royal Commission into family violence included in their report a recommendation for councils to report on the measures they propose to take to reduce family violence and respond to the needs of victims.
- Intimate partner violence is the biggest contributor to ill health and premature death of Victorian women aged 15 to 44 years (*Victorian Health Promotion Foundation 2017*).
- Preventing family violence is a major priority for the Victorian government. *The Victorian Public Health and Wellbeing Plan 2015–2019* identifies preventing violence and injury as one of its key strategies for promoting health and wellbeing.

Why is it a priority for Glen Eira?

- Implementing a whole community approach will allow for more efficient utilisation of resources to address the issue, and will allow the community to adopt mutually respectful attitudes, behaviours and beliefs.
- There was a 12.3 per cent increase in family violence incidents in Glen Eira from 2015–16 — one of the largest increases in the Southern Melbourne Region (*Crime Statistics Agency 2016*).
- Family violence is now a high priority for Victoria Police evidenced through the development of the Code of Practice for the Investigation of Family Violence, the establishment of family violence teams, and the leadership it has shown in transforming the way police respond to family violence incident.
- The Municipal Association of Victoria has been funded by the *Community Crime Prevention Program* to deliver the *Local Government Preventing Violence Against Women* initiative. This *Program* recognises the important role of local government in the prevention of violence against women as both a service provider, and a major employer.

STRATEGIES:

- 3.1 Provide community leadership to prevent violence against women.
- 3.2 Promote and participate in national, state and local initiatives that raise awareness of family violence.
- 3.3 Foster joint planning and action with local support organisations to reduce the incidence of family violence.
- 3.4 Provide community information and referral to support families at risk of family violence.



PRIORITY 04:

Reduce tobacco, alcohol
and other drug consumption

PRIORITY 04: REDUCE TOBACCO, ALCOHOL AND OTHER DRUG CONSUMPTION

OBJECTIVE:

To reduce the impact of smoking, alcohol and other drugs on the community.

Why is this important for the Plan?

- Smoking remains the leading preventable cause of many cancers, respiratory, cardiovascular and other diseases (*VicHealth 2012*).
- Alcohol misuse can result in more than 200 types of short and long-term preventable harms, including accident and injury, cancer, heart attack and stroke (*VicHealth 2012*).
- Illicit drugs cause significant harm to individuals and the broader community, including loss of workplace productivity, and the cost to our health and criminal justice systems (*VicHealth 2012*).

Why is it a priority for Glen Eira?

- Glen Eira has one of the highest smoking rates in the Southern Metropolitan Region, with 18.2 per cent of residents identifying as current smokers. This is significantly higher than the Victorian average of 13.1 per cent (*Australian Institute of Health and Welfare 2016*).
- About one-third (33.7 per cent) of Glen Eira residents were identified as being at risk of short-term harm from alcohol (five or more drinks in a single occasion) in a given month. This was higher than the Victorian estimate of 29.4 per cent (*Australian Institute of Health and Welfare 2016*).
- Glen Eira had 284 alcohol-related ambulance attendances in 2013–14. This was an increase of 20 per cent from 2012–13 (*Turning Point 2015*).

STRATEGIES:

- 4.1 Promote awareness of the dangers of smoking, alcohol and drug use.
- 4.2 Encourage a reduction in smoking rates in Glen Eira.
- 4.3 Implement the Victorian *Tobacco Act 1987* and provide education and enforcement in relation to the sale and advertising of tobacco in local premises, and monitoring smoke-free dining and smoke-free outdoor areas.
- 4.4 Continue to work with and support local community and sporting organisations to promote responsible serving of alcohol, promote smoke-free environments and a safe drinking culture.



PRIORITY 05:

Improve mental health
and community connection

PRIORITY 05: IMPROVE MENTAL HEALTH AND COMMUNITY CONNECTION

OBJECTIVE:

To promote social inclusion and improve mental health in the community.

Why is this important for the Plan?

- Our social connections, including the people we know, the friends we confide in, the family we belong to, and the community we live in are central to mental health and wellbeing (*VicHealth 2012*).
- Social participation in activities such as volunteering has shown to build social connectedness (*VicHealth 2012*).
- Social isolation can lead to stress, anxiety, depression, decreased resilience to traumatic events and suicide (*VicHealth 2012*).
- Mental illness is one of Australia's top three leading causes of disease burden, and the largest contributor to the disability burden in Victoria (*VicHealth 2012*).

Why is it a priority for Glen Eira?

- Fewer Glen Eira residents (27.4 per cent) report participating in volunteering compared to Melbourne (28 per cent) and Victoria (33 per cent) (*Department of Planning and Community Development 2010*).
- 26.7 per cent of households in Glen Eira are lone person households. This, combined with a high number (19.9 per cent) of residents aged 60 years and over is likely to result in an increase in social isolation (*Australian Bureau of Statistics 2017*).
- Only 59.8 per cent of residents perceive their neighbourhood to be a close-knit neighbourhood. This is lower than the Victorian average of 61 per cent (*Department of Health 2013*).

STRATEGIES:

- 5.1 Work in partnership with local community organisations to deliver information and seminars to improve mental health.
- 5.2 Provide opportunities for increased social connectedness through participation in arts and culture, recreation, sporting and other community activities.
- 5.3 Support local community organisations to provide local cultural events and festivals.
- 5.4 Promote inclusion of diverse groups including people with disabilities, people who identify as Aboriginal or Torres Strait islander people, culturally and linguistically diverse communities and LGBTIQ community members.



PRIORITY 06:

Enhance public
health protection

PRIORITY 06: ENHANCE PUBLIC HEALTH PROTECTION

OBJECTIVE:

Protect the community from transmissible disease and assist the community to respond to and recover from natural disasters.

Why is this important for the Plan?

- Enforcement of public health standards relating to food safety; infectious disease; residential noise; asbestos removal; rooming houses and general sanitation; and cleanliness of the City, protect the community from disease and illness.
- Immunisation against disease is still the most effective public health intervention to prevent disease and the spread of disease.
- Extreme weather events that occur as a result of climate change, such as heatwaves and floods, negatively impact upon the health and wellbeing of the community, particularly vulnerable persons such as young children and the elderly.

Why is it a priority for Glen Eira?

- Under the *Public Health and Wellbeing Act 2008*, Council is required to develop and enforce up-to-date public health standards and intervene if the health of residents is affected.
- Under the *Public Health and Wellbeing Act 2008*, Council is required to co-ordinate and provide immunisation services to children living or being educated in the City.
- The *Emergency Management Act 2013* requires Council to develop an *Emergency Management Plan* to assist the community to respond and recover from emergencies, including extreme weather events.

STRATEGIES:

- 6.1 Protect the community from illness through education and enforcement of public health standards at local food premises; rooming houses; tattooists; beauty therapy businesses; and local swimming and spa pools.
- 6.2 Respond to community concerns about local issues that may be dangerous to health.
- 6.3 Co-ordinate, promote and deliver vaccination programs to protect the community from vaccine preventable disease.
- 6.4 Review Council's *Emergency Management Plan*, *Heatwave Plan*, *Flood Plan* and *Pandemic Plan* annually, and provide the community with up-to-date information to better respond to and recover from emergencies and extreme weather events.

10 References

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Legislation

State of Victoria 2008, *Public Health and Wellbeing Act 2008*.

Models to improve public health and wellbeing

Council will adopt and embed proven internationally recognised approaches into its public health and wellbeing leadership, partnership, advocacy, planning and service delivery activities. The internationally recognised *Social Model of Health* and the *Ottawa Charter of Health Promotion* will inform Council's role to improve the health and wellbeing of the community.

Social Model of Health

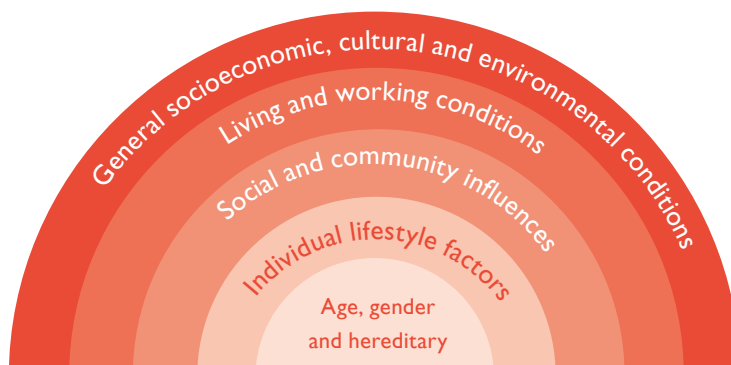
The *Social Model of Health* outlines the interrelated factors that contribute to an individual's health and wellbeing. The *Social Model of Health* began to emerge in the 1970s, as people began to realise that not only people's behaviors, but their environment, upbringing and sociocultural situation impact health. It's based on the understanding that for health gains to occur, social, economic and environmental determinants must be addressed.

The Ottawa Charter of Health Promotion

The *Ottawa Charter of Health Promotion*⁸ is the leading international approach to health promotion which has been developed from the *Social Model of Health*. It defines health promotion as the process of enabling people to increase control over, and improve their health.

The model set out below highlights five action areas:

1. Build healthy public policy — governments make laws which affect the health of communities and individuals.
2. Create supportive environments for health — healthy lifestyle is made easy when your community infrastructure supports better health.
3. Strengthen community action for health — acting as a community makes promoting and achieving health more attainable.
4. Develop personal skills — enables people to take control of their own health and then pass these skills on to others.
5. Re-orient health services — health services and professionals should be involved in areas, such as education, policymaking and community action.



The five priority action areas of *Ottawa Charter for Health Promotion* are also used to evaluate the success and sustainability of health promotion initiatives.

8. World Health Organization, Health and Welfare Canada, and Canadian Public Health Association. 1986. *Ottawa Charter for Health Promotion: an international conference on health promotion —the move towards a new public health*. Nov. 17-21, Ottawa.

Ottawa Charter of Health Promotion



Not only people's behaviours, but their environment, upbringing and sociocultural situation impact health. It's based on the understanding that for health gains to occur, social, economic and environmental determinants must be addressed.





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