



Draft City of Casey

HEALTH AND WELLBEING STRATEGY

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STATEMENT OF ACKNOWLEDGMENT

The City of Casey proudly acknowledges the traditional owners, Casey's Aboriginal communities and their rich culture and pays respect to their Elders past, present and future. We acknowledge Aboriginal people as Australia's first peoples and as the traditional owners and custodians of the land on which we work and live.

DIVERSITY STATEMENT

The City of Casey is home to a remarkable diversity of cultures, languages, faiths, identities, landscapes, and stories. From our first Australians to our most recent arrivals and every wave between, the City of Casey welcomes and represents all community members and their respective ambitions to live healthy, rewarding, and happy lives. These intersecting and overlapping community stories form Casey's collective identity and contribute to its evolving, rich history. We recognise this diversity as our strength and we aim to share, nurture, and celebrate it.

EXECUTIVE SUMMARY

The City of Casey *Health and Wellbeing Strategy 2021-2025* outlines the health and wellbeing priorities for City of Casey over the next four years. The Strategy builds upon strengths from the previous plan and is a key strategic roadmap to maintain and improve public health and wellbeing at a local level.

The Health and Wellbeing Strategy meets the requirements of the *Public Health and Wellbeing Act 2008* and has been developed alongside the *City of Casey Council Plan 2021-2025* as one of five domain strategies providing an integrated strategic planning framework for Council.

The Strategy has been developed in close consultation with the local community and through collaboration with a wide range of agencies, partners, and stakeholders.

It details six health and wellbeing priorities ('health domains') for the Casey community:

- *Alcohol, Drug and Tobacco Use*
- *Climate Change and Health Impacts*
- *Family Violence and Gender Inequality*
- *Healthy Eating and Food Security*
- *Mental Wellbeing and Social Inclusion*
- *Physical Activity and Active Living*

The Strategy also identifies key responsibilities and actions that will enable Council to drive systems change, innovation, and new partnerships critical to supporting community health and wellbeing. The required changes identified are grouped across five strategic themes:

- *Resilient, Safe and Connected Places*
- *Innovative and Responsive Models of Service and Connection*
- *Community Research and Data*
- *Health and Wellbeing Impact Across the Life Course*
- *Bold and Progressive Leadership*

Implementation of the Strategy will be driven by annual action plans which will be designed and delivered in partnership with key stakeholders. Progress against the action plan will be monitored, with reports made to Council and the community on the achievements.

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As part of our ongoing commitment to community engagement, and the aspiration to stand our city in good stead for the future, the City of Casey is excited to launch a further suite of strategic documents.

These documents, which include the Health and Wellbeing Strategy, Environment Strategy, Infrastructure Strategy and Economic Development Strategy are the next layer of Casey's *Integrated Strategic Planning Framework*, and provide further insight and a closer look into some of the major areas that influence the liveability of our municipality.

These strategies have been designed following the adoption of the *Council Plan 2021-25*, and *Long Term Community Vision 2031*, both of which were developed based on the feedback, thoughts and ideas shared by you during the Shape Your City engagement program, in 2020 and 2021.

These strategies deliver on our Vision, which is to *become a more connected, bold and resilient community*.

While the Council Plan sets out **what** our organisation aims to achieve, these strategies set out **how** we are going to achieve that, and some of the key challenges that Council will face and the goals and intentions by Council to move our city forward.

Each strategy focusses on a vitally important area for Council and contains key linkages back to the current Council Plan.

The Health and Wellbeing Strategy builds on the success and strengths from the previous plan and sets out how Council will work in partnership with both the community and other levels of government, to support positive health and wellbeing. It contains six key priorities, which are outlined in the strategy.

Council's Economic Development Strategy then sets out how Council plans to create more jobs, diversify industries and prompt innovation, while supporting our local businesses.

The Environment Strategy outlines how we plan to tackle some of the big issues facing our local environment, how we plan to become more climate change ready, and support a more sustainable approach to the local environment.

Finally, the Infrastructure Strategy plans for the future growth of our community and outlines how Council will provide the adequate infrastructure to meet that demand. The strategy covers community facilities, sport and recreation facilities, drainage, transport, paths and trails, and much more.

I would strongly encourage you to view these strategies and see how we are planning to further support our rapidly growing and diverse community.

Once again, thank you for your continued participation in our community engagement programs and I urge you to regularly visit our online engagement hub, Casey Conversations to see what topics you can have your say on today.

Noelene Duff PSM

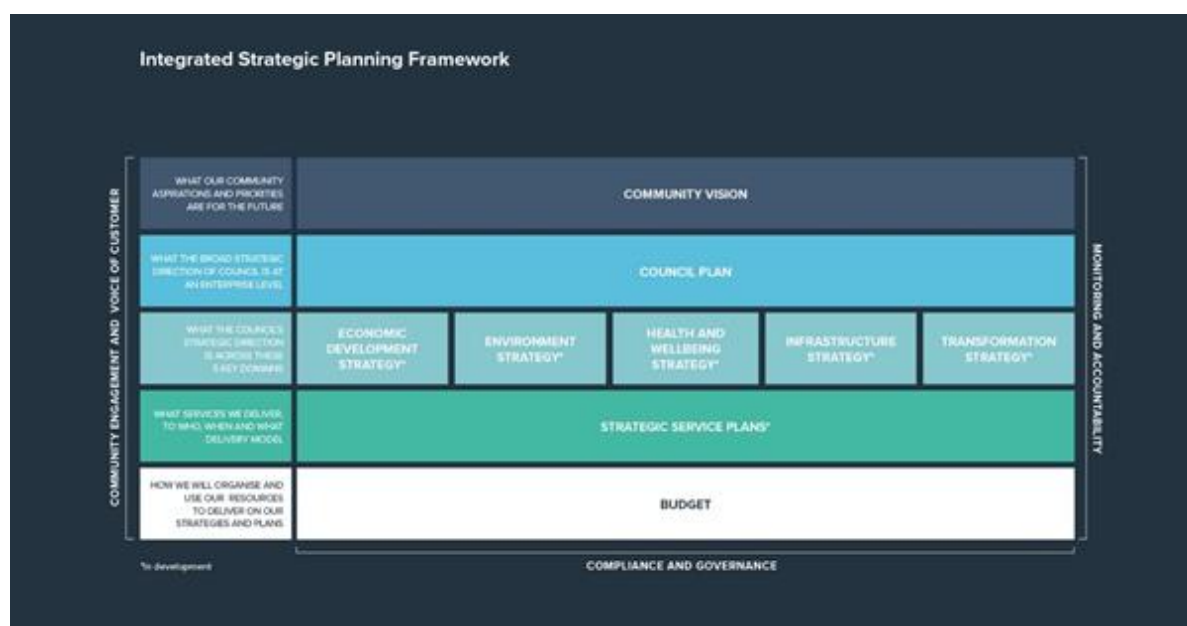
City of Casey Chair of Administrators

OUR INTEGRATED STRATEGIC PLANNING FRAMEWORK

The Health and Wellbeing Strategy is a leading component of Council's Strategic Planning Framework. It will help Council plan, direct resources, and foresee risks and opportunities in relation to health and wellbeing outcomes.

The Strategy will enable alignment of services and programs that maximise impact for the health and wellbeing of the Casey community. The Strategy development is informed by the community vision and aligns strongly with the *City of Casey Council Plan 2021-25* and Organisational Strategy. Integration across Council's five key Domain Strategies will ensure effective collaboration across the organisation and provide platforms to develop high-impact partnerships with service providers, community organisations and other levels of government, which is critical to the Strategy's success.

The following illustration demonstrates Council's Integrated Strategic Planning Framework.



LEGISLATIVE AND POLICY CONTEXT

The Health and Wellbeing Strategy delivers on the legislative requirements of the *Victorian Public Health and Wellbeing Act 2008* and provides an overarching strategic framework for Council and public health sector organisations to work towards positive health and wellbeing outcomes for the broader Casey population, whilst identifying specific areas for improvement to meet the needs of those groups in the community experiencing poorer health and wellbeing.

Local health and wellbeing priorities are influenced by a range of public policy, with different levels of responsibility, funding and regulation at all tiers of government. The development of the Health and Wellbeing Strategy has been guided by international, national, state and local policies and frameworks.

Council's State-legislated obligation to develop a Municipal Public Health and Wellbeing Plan (MPHWP) is fulfilled by this Health and Wellbeing Strategy 2021-25 and this title will be used in place of 'MPHWP'. As per the *Public Health and Wellbeing Act 2008* (Vic.) the Strategy must

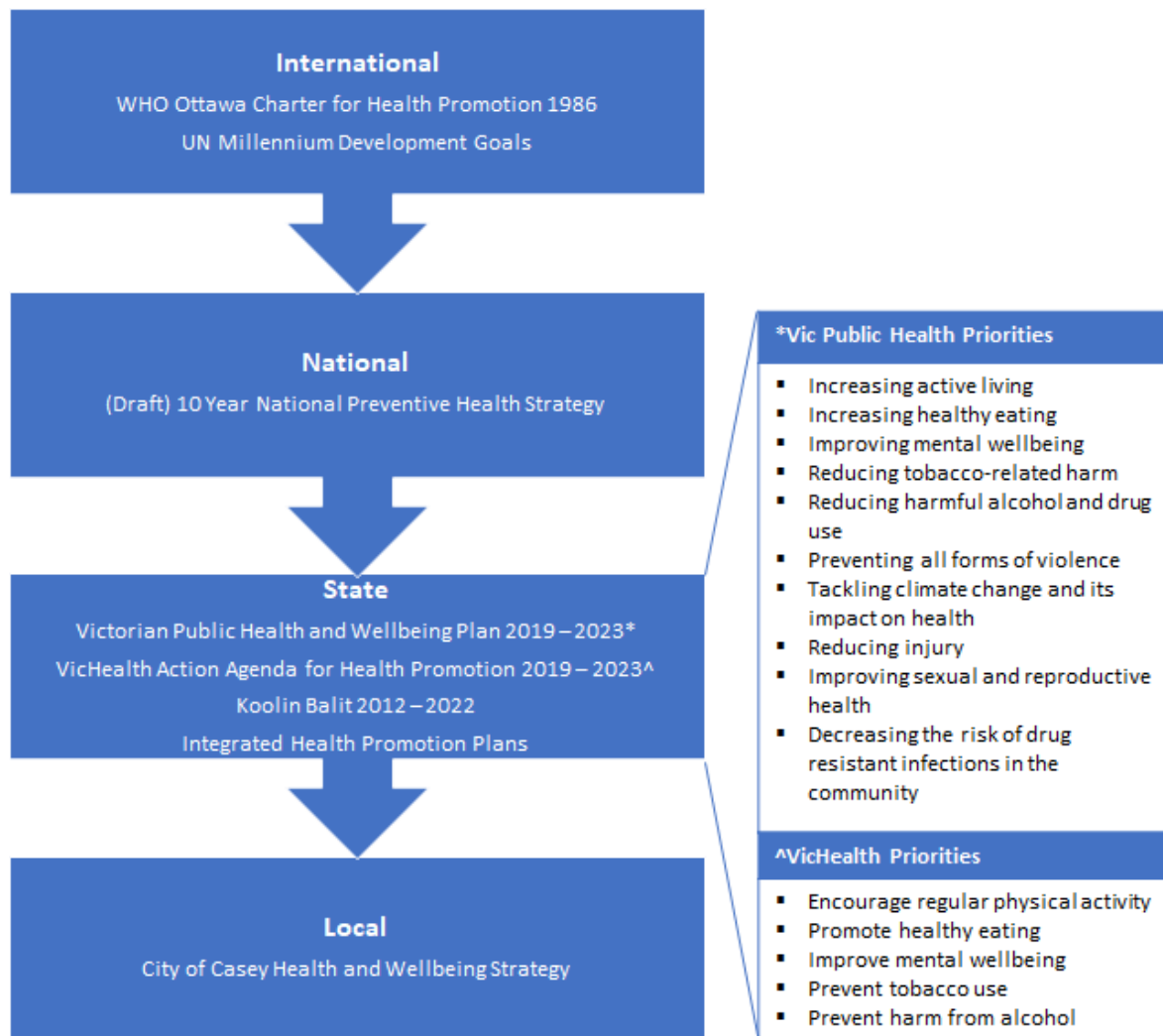
- involve community in the Strategy's development, implementation, and evaluation

- identify key health and wellbeing priorities for the municipality through examination of health and wellbeing data
- specify how Council will work in partnership with the Department [of Health] and other agencies to accomplish the goals and strategies
- specify measures to prevent family violence and respond to the needs of victims of family violence in the local community.

Within this 2021-25 cycle, the development of the Strategy must also have regard to

- the State Health and Wellbeing Plan 2019-23 and be reviewed annually and amended (if necessary)
- Local Government Act 2020
- Gender Equality Act 2020
- Climate Change Act 2017.

The broader policy context in which the Health and Wellbeing Strategy has been developed is illustrated in the following diagram.



COMMUNITY ENGAGEMENT

The Strategy was developed through extensive research, community, and sector engagement to ensure that it reflects and responds to the needs of the Casey community.

In 2020, City of Casey undertook three rounds of community surveys to understand the impact of the COVID-19 pandemic on the Casey community. The survey responses illustrated that the pandemic had magnified and exacerbated health and wellbeing issues for Casey such as financial hardship, housing stress, declining mental wellbeing, food insecurity and difficulties in accessing health services.

In September 2020 Council launched the Shape Your City engagement program to help guide the development of the Long-Term Community Vision, Council Plan, Budget, and key Domain Strategies, including the Health and Wellbeing Strategy. In the second phase of consultation, more than 6,600 community members shared their views on the future of Casey. The top three community aspirations were that a future Casey could be described as

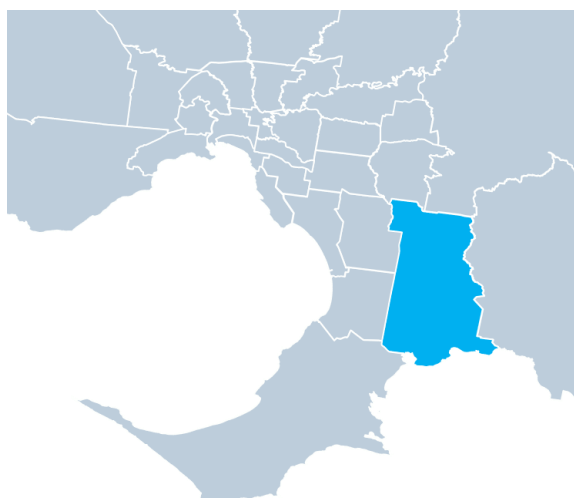
- a truly safe place without crime (35 per cent)
- clean and friendly with more open and green space (26 per cent)
- an inclusive and diverse community (14 per cent)

Following this, 30 community members deliberated on decisions about infrastructure and service delivery in Casey. As part of this, an online workshop was held to introduce the key principles of health and wellbeing and discuss how these apply to key health and wellbeing issues.

From May to July 2021 input was gained from Council staff and 45 organisations operating in Casey to further shape the Strategy.

Community and stakeholder insights informed the principles that have guided the Strategy's development and will underpin the approach for implementation and evaluation.

<p><i>Health Equity</i></p> <p>we strive for the absence of unfair and avoidable differences in health across groups and places and recognise that different groups may require different levels and types of support.</p>	<p><i>Primary Prevention</i></p> <p>we seek to address the social determinants of health before illness occurs. This includes systems and structural change in social, economic, environmental, and built environments.</p>
<p><i>Community Engagement</i></p> <p>we carry out the work <i>with</i> the community at every stage, seeking to deeply understand the underlying issues and gain insight into what actions will be effective.</p>	<p><i>Evidence-Informed</i></p> <p>we research and evaluate, seeking out best practice interventions that have worked elsewhere and learn from and share our local successes and failures.</p>
<p><i>Partnership Driven</i></p> <p>we recognise our role within the broader system and know change can only occur through greater alignment and collaboration across external and internal contexts.</p>	



A Diverse and Growing Population

The City of Casey is a growing and diverse community. The most recent official population estimate for the City of Casey is 364,600 (ABS, 2020) with pre-pandemic forecasts predicting this to grow to approximately 550,000 by 2041 (.id consulting). The largest increase in persons between 2016 and 2031 is forecast to be in ages 10-14 years (.id consulting).

The present-day population estimate for Aboriginal and Torres Strait Islander peoples within Casey is 1,941 or 0.6 per cent, with largest populations in Cranbourne, Doveton, and the coastal villages (ABS, 2018). Almost a third of Casey's population were born overseas in non-English speaking countries and almost 40 per cent speak a language other than English at home. The three largest birthplaces of recently arrived residents in 2016 was India, Afghanistan and Sri Lanka. Casey has over 100 faith groups represented and a growing number of community members who are Muslim or Hindu. As of June 2020, there were 558 asylum seekers in Casey, living mostly in Doveton/ Eumemmerring, Hampton Park, Hallam and Endeavour Hills. Asylum seekers are mainly aged between 26-45 and are predominantly men. An estimated 5.6 per cent of Casey's adult population identify as part of LGBTIQ+ communities, representing around 15,000 residents (VAHI, 2020).

Five per cent of the Casey population live with a profound or severe disability. The proportion of people living with a disability increases in older age cohorts. Many older people living with a disability live alone, the number of women being double that of men and 12 per cent of the Casey population care for a person living with disability.

Health and Wellbeing Insights

The Strategy has been informed by research into local health data. The data reveals significant health challenges for the Casey community with the municipality trailing the Victorian benchmark on several key health measures (VPHS, 2017). Over a quarter of the Casey population rate their health as either 'poor' or 'fair' (alternative selections are 'good', 'very good' or 'excellent'). Self-reported health is considered a reliable indicator of a person's health status and Casey has one of the highest 'fair/poor' rates found across Victoria (VPHS, 2017).

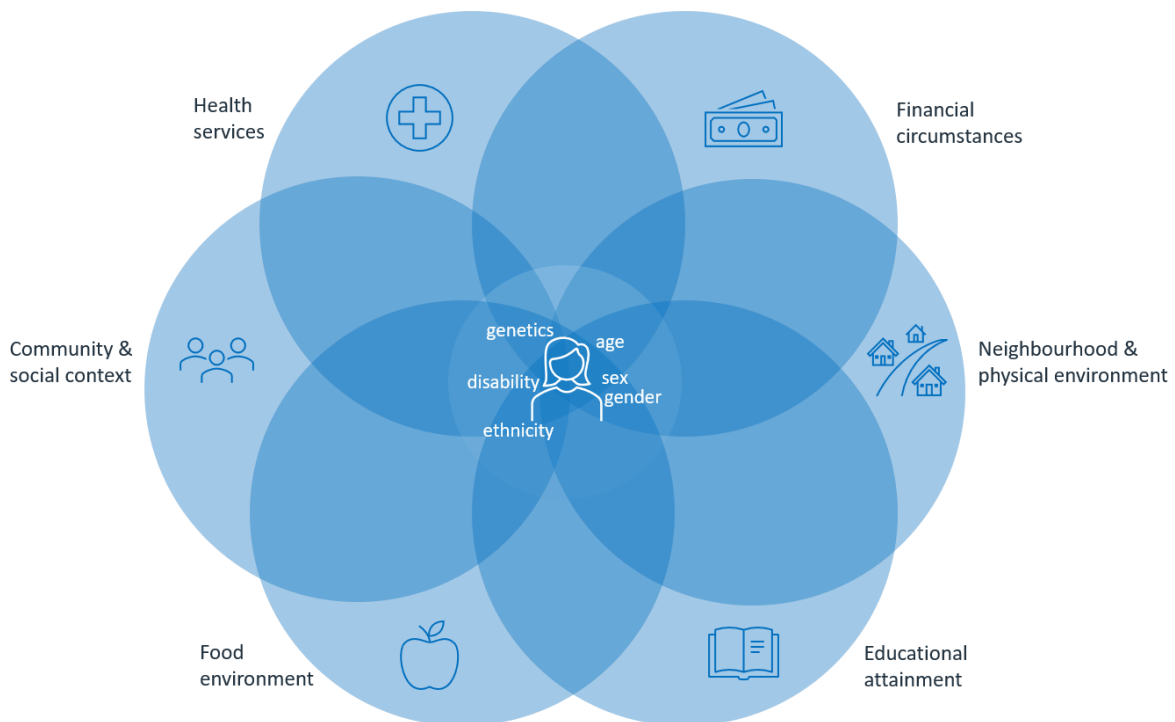
Health & Wellbeing Outcomes (% of adult population) - 2017	Casey	Victoria
Self-reported health is fair/poor	26%	20%
Psychological distress is high or very high	19%	15%
Inadequate physical activity	51%	44%
Consume recommended quantity of vegetables per day	3.5%	5.4%
Meeting neither fruit nor vegetable consumption guidelines	56%	52%
Either overweight or obese	58%	51%

Health data suggests over half of Casey adults are overweight or obese, most Casey residents do not consume adequate vegetables, a fifth consume excessive take away food, and half do not undertake adequate physical activity. Rates on these measures are amongst the poorest found across Victoria. In the first wave of the COVID-19 pandemic there was a positive impact for many on health behaviours with an increase in people reporting healthier food habits (15 per cent) and physical activity (26 per cent), whilst having a negative impact on others, with increased takeaway food consumption (24 per cent) and consumption of alcohol (17 per cent), tobacco, and other drugs (4 per cent) (*VPHS 2017; City of Casey COVID-19 Impact Tracking Survey Wave 3*).

Almost a fifth of adults report high levels of psychological distress which has intensified during the COVID-19 pandemic, with two in five residents reporting a decline in mental wellbeing. A variety of factors have led to this decline with concerns regarding COVID-19 health impacts, reduced social contacts, and increased financial pressures all contributing (*City of Casey COVID-19 Impact Tracking Survey Wave 3*).

Casey has the highest number of family violence incidents across Victoria with more than 13 callouts per day ([Crime Statistics Agency](#)). During the pandemic five per cent of residents felt 'neutral' or 'unsafe' from family violence with the rate of incidents increasing by 18 per cent in the final quarter of 2020 compared with the same time the previous year (*City of Casey COVID-19 Impact Tracking Survey Wave 3; Crime Statistics Agency*). Increased gender equality and respectful relationships are integral to reducing levels of family violence. There are higher levels of support for gender equality in the Metropolitan southeast compared with Casey and women fare poorly in Casey on many indicators of gender equality.

These health outcomes represent symptoms of broader issues and causes. In developing health responses, we recognise that factors such as socio-economic position, early life, social exclusion, employment and work, housing and homelessness and the built and natural environments can strengthen or undermine the health of individuals and communities. These are known as the social determinants of health (see diagram on following page).



For example, eating healthy food involves more than just making healthier choices. A person's financial circumstances (affordability), ability to get to healthy food outlets (accessibility), where they live (availability), and the knowledge and skills required to have a healthy diet (food literacy) impact their ability to eat well. Coordinated action on all these aspects is needed to improve healthy eating outcomes for the community. Action on healthy eating also has climate change co-benefits. A healthy and sustainable food system can significantly reduce greenhouse gas emissions from food production, transport and waste (*Victorian public health and wellbeing plan 2019-2023*).

An important way of maximising opportunities for a healthy and happy population is by addressing the social determinants of health in which people *grow, live, work, and age*. Council plays a role in influencing the broader determinants of health through activities such as service design and delivery, social cohesion initiatives, public health education, and advocacy.

STRATEGIC THEMES AND HEALTH DOMAINS

The Strategy focuses on six key health priorities that respond to the above research and the broader determinants of health (called *Health Domains*).

Health Domains

The Health Domains are key health challenges that confront Council, services, and the community. They are:

- physical activity and active living
- healthy eating and food security
- climate change and health impacts
- mental wellbeing and social inclusion
- alcohol, drug and tobacco use
- family violence and gender equality.

Strategic Themes

The Strategy also identifies approaches that will enable a whole-of-organisation impact in public health (called *Strategic Themes*). The Strategic Themes seek to organise our systems and approach to better effect change now and into the future. They are:

- *Resilient, Safe and Connected Places*: place-based practice leads to strong and resilient local networks and neighbourhoods with relevant services, amenities and increased social cohesion
- *Innovative and Responsive Models of Service and Connection*: attract greater service presence and offer more opportunities for social and service connection including leveraging emerging digital technologies with equitable access
- *Community Research and Data*: integration and analyses of key research and datasets to determine community needs across the municipality and inform decision-making
- *Health and Wellbeing Impact Across the Life Course*: integrate a life course approach to health and wellbeing and coordinate interventions across Council departments.
- *Bold and Progressive Leadership*: pursue and 'go big' on high value social impact items and quit low value activity. Take the lead on inclusion initiatives.

Integration of Strategies from Health Domains and Strategic Themes

Strategies from both the strategic themes and health domains are integrated to provide a holistic framework to improve health, wellbeing and equity in Casey. The table on following page outlines the overall framework for the Strategy. It details both the strategic themes for systems change and the priority domains for action on health and wellbeing. These will form the foundation for implementation through annual action plans (this is further detailed in Implementation Section). Use the following strategies key to identify where each sits across the five themes.

Strategies Key

Physical Activity & Active Living [PA+AL]

Healthy Eating & Food Security [HE+FS]

Climate Change & Health Impacts [CC]

Mental Wellbeing & Social Inclusion [MW+SI]

Alcohol, Drug & Tobacco Use [AOD]

Family Violence & Gender Inequality [FV+GE]

Systems Change [SYSTEMS]

RESILIENT, SAFE, AND CONNECTED PLACES	INNOVATIVE AND RESPONSIVE MODELS OF SERVICE AND CONNECTION	COMMUNITY RESEARCH AND DATA	HEALTH AND WELLBEING ACROSS THE LIFE COURSE	BOLD AND PROGRESSIVE LEADERSHIP
<ul style="list-style-type: none"> •Co-design with the community, inclusive open space, playgrounds, and nature play spaces [PA+AL] 	<ul style="list-style-type: none"> •Co-design innovative programs and initiatives that support participation of those least likely to be physically active [PA+AL] 	<ul style="list-style-type: none"> •Improve the local evidence base and monitoring of data related to gender equality and health [FV+GE] 	<ul style="list-style-type: none"> •Support the development and implementation of policies and programs that promote food security in at-risk groups [HE+FS] 	<ul style="list-style-type: none"> •Lead a strategic approach to family violence prevention and gender equality [FV+GE]
<ul style="list-style-type: none"> •Promote local opportunities for participation in all forms of physical activity [PA+AL] 	<ul style="list-style-type: none"> •Engage with community members and sector partners to co-design service referral pathways and identify advocacy agenda [PA+AL] 	<ul style="list-style-type: none"> •Support community skills and knowledge in healthy food preparation [HE+FS] 	<ul style="list-style-type: none"> •Lead initiatives for communities to co-design local solutions to support preparedness and resilience in at-risk groups [CC] 	<ul style="list-style-type: none"> •Support local and regional partnerships and collaboration [AOD]
<ul style="list-style-type: none"> •Strengthen and support capacity of community settings, including sports clubs and neighbourhood houses, to respond to alcohol, drug and tobacco issues [AOD] 	<ul style="list-style-type: none"> •Strengthen the capacity of the emergency food relief sector to provide food that is fresh, healthy, and culturally appropriate [HE+FS] 	<ul style="list-style-type: none"> •Improve the local evidence base and monitoring of climate related health impacts [CC] 	<ul style="list-style-type: none"> •Support communities to co-design innovative programs, events and activities [MW+SI] 	<ul style="list-style-type: none"> •Support the integration of the principles of access and inclusion into the policies and programs of Council, Council partners and community organisations [MW+SI]
<ul style="list-style-type: none"> •Support access to healthy food and drink options in public settings including schools and early childhood services, sport and recreation, events and workplaces [HE+FS] 	<ul style="list-style-type: none"> •Develop a regional partnership response to the recommendations of the Royal Commission into Victoria's Mental Health System [MW+SI] 	<ul style="list-style-type: none"> •Develop research partnerships to explore new and emerging alcohol, drug and tobacco issues [AOD] 	<ul style="list-style-type: none"> •Embed social impact valuations in Council decision-making [SYSTEMS] 	<ul style="list-style-type: none"> •Define and leverage Council's role as a leader on changes within the sector (e.g. reforms, royal commissions) [SYSTEMS]
<ul style="list-style-type: none"> •Support local and regional partnerships to plan and resource community climate resilience work [CC] 	<ul style="list-style-type: none"> •Develop virtual platforms to augment existing opportunities for social connection [SYSTEMS] 	<ul style="list-style-type: none"> •Establish shared knowledge ecosystem of community needs in central research hub [SYSTEMS] 	<ul style="list-style-type: none"> •Strengthen alternative approaches to health and wellbeing, including arts-based practice and social prescribing [SYSTEMS] 	<ul style="list-style-type: none"> •Embed understanding and value of Aboriginal and Torres Strait Islander culture, knowledge and history within Council to drive equitable decision-making [SYSTEMS]
<ul style="list-style-type: none"> •Design community facilities and spaces to promote accessibility, connection and inclusion [MW+SI] 	<ul style="list-style-type: none"> •Increase digital equity to future-proof participation in community life [SYSTEMS] 	<ul style="list-style-type: none"> •Align health and wellbeing metrics to external framework (e.g. Sustainable Development Goals) [SYSTEMS] 	<ul style="list-style-type: none"> •Partner with Strategic Service Planning to integrate best practice in health and wellbeing in Council service design [SYSTEMS] 	<ul style="list-style-type: none"> •Embed deep understanding regarding intersectionality and equity within Council systems and drive progressive community dialogue [SYSTEMS]
<ul style="list-style-type: none"> •Strengthen the social context of place development by integrating organisational-wide place-based principles and practice (link to Infrastructure Strategy) [SYSTEMS] 	<ul style="list-style-type: none"> •Establish a framework to attract Community Service Organisation to Casey [SYSTEMS] 	<ul style="list-style-type: none"> •Build and strengthen an organisational culture of research, evaluation, and reflective practice [SYSTEMS] 		<ul style="list-style-type: none"> •Address persistent and emerging employment vulnerability by leveraging Casey's strategic regional economic advantage in the strongest recovering employment sectors (i.e. Education & Training and Healthcare and Social Assistance) [SYSTEMS]
<ul style="list-style-type: none"> •Support community-led COVID-19 pandemic recovery and strengthen public health response for current and future disease prevention [SYSTEMS] 		<ul style="list-style-type: none"> •Align strategic environment internally and externally towards shared objectives and evidence [SYSTEMS] 		
<ul style="list-style-type: none"> •Create safe and inclusive neighbourhoods and improve perceptions of community safety through social cohesion initiatives with a particular focus on areas with high rates of crime, and ensuring the perspectives of women, young people, LGBTIQ+ and CALD communities are considered [SYSTEMS] 				

HEALTH DOMAINS

This section details the outcomes sought within the health domains, how we plan to get there, and how we will monitor progress. As the 'systems change' strategies outlined above are our enablers towards health domain improvements, they will not be fully expanded on here.

HEALTH DOMAIN 1: ALCOHOL, DRUG AND TOBACCO USE

LONG TERM OUTCOME SOUGHT

Reduced harm from alcohol, drug, and tobacco use

HOW WE WILL MONITOR CHANGE

Alcohol - Lifetime risk - proportion (%) of adult (18+ years) population, by lifetime risk of alcohol related harm (*Victorian Population Health Survey*)

Alcohol – single occasion - proportion (%) of adult (18+ years) population, by risk of injury from a single occasion of drinking (*Victorian Population Health Survey*)

Smoking - proportion (%) of adult (18+ years) population, by smoking status (*Victorian Population Health Survey*)

Illicit drugs - Rate of Illicit drug-related hospital admissions per 10,000 population (*Turning Point AOD statistics*)

Pharmaceutical drug harm - Rate of pharmaceutical drug-related hospital admissions per 10,000 population (*Turning Point AOD statistics*)

HOW WE WILL MAKE A DIFFERENCE

STRATEGIC OBJECTIVE	STRATEGIES
1.1 Foster a positive alcohol culture in the Casey community	1.1.1 Support local and regional partnerships and collaboration
1.2 Develop innovative responses to alcohol, drug and tobacco issues and build sector capacity	1.2.1. Develop research partnerships to explore new and emerging alcohol, drug, and tobacco issues
	1.2.2 Strengthen and support capacity of community settings, including sports clubs and neighbourhood houses, to respond to alcohol, drug and tobacco issues

POLICY THAT SUPPORTS ACTION ON ALCOHOL, DRUGS AND TOBACCO HARM

<ul style="list-style-type: none">• The National Drug Strategy 2017–2026• Victoria's Ice Action Plan• City of Casey Events Policy• City of Casey Community Safety Strategy	<ul style="list-style-type: none">• City of Casey Liquor Licensing at Council Recreation Reserves Policy• City of Casey Community Local Law 2018• Enliven South Eastern Melbourne Alcohol and Other Drugs (AOD) Catchment Based Plan 2019-2021
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HEALTH DOMAIN 2: CLIMATE CHANGE AND HEALTH IMPACTS

LONG TERM OUTCOME SOUGHT

Reduced health impacts resulting from climate change

HOW WE WILL MONITOR CHANGE

Community knowledge of the health impacts of climate change (Council survey)

Hospital emergency presentations - climate change related health conditions (thunderstorm asthma, heat conditions)

HOW WE WILL MAKE A DIFFERENCE

STRATEGIC OBJECTIVE	STRATEGIES
2.1 Support communities to build resilience and mitigate the health impacts of climate change	2.1.2 Support local and regional partnerships to plan and resource community climate resilience work
	2.1.3 Improve the local evidence base and monitoring of climate related health impacts
2.2. Develop place-based initiatives to support community adaptation to climate change	2.2.1 Lead initiatives for communities to co-design local solutions to support preparedness and resilience in at-risk groups

POLICY THAT SUPPORTS ACTION ON CLIMATE CHANGE

<ul style="list-style-type: none">• The Victorian Climate Change Act 2010• Renewable Energy Road Map 2015• The Energy Efficiency and Productivity Statement 2015• City of Casey Biodiversity Strategy• City of Casey Sustainability Plan• City of Casey Community Emergency Resilience Plan 2017 – 2021• City of Casey Municipal Emergency Management Plan• City of Casey Municipal Fire Management Plan• City of Casey Emissions Management Plan 2018 – 2022• City of Casey Integrated Transport Management Plan	<ul style="list-style-type: none">• City of Casey Integrated Water Management Plan• City of Casey Mosquito Management Plan• City of Casey Green Wedge Management Plan• City of Casey Environmentally Sustainable Design Building Policy• City of Casey Community Facilities Framework• City of Casey Waste Management Plan• City of Casey Pandemic Plan• City of Casey Environment Strategy (draft)• City of Casey Climate Change Action Plan (TBD)• City of Casey Domestic Wastewater Management Plans (TBD)
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HEALTH DOMAIN 3: FAMILY VIOLENCE AND GENDER EQUALITY

LONG TERM OUTCOME SOUGHT

Reduced family violence and increased gender equality

HOW WE WILL MONITOR CHANGE

Family violence – number and rate per 100,000 population of family violence incidents by local government area (*Crime Statistics Victoria*)

Perception of safety - percentage of adults (gender disaggregated) that felt safe walking alone in their local area after dark (*Victorian Population Health Survey*)

Paid employment – percent females, aged 20-64 years in paid employment (*ABS*)

Income disparity – median weekly income, females aged 15-64 years, male aged 15-64 years (*ABS*)

Unpaid work at home - median hours unpaid work performed at home, aged 20-79 years (gender disaggregated) (*ABS*)

Sole parents – percent of sole parents who are female (*ABS*)

Poverty – living in poverty (gender disaggregated) (*ABS*)

HOW WE WILL MAKE A DIFFERENCE

STRATEGIC OBJECTIVE	STRATEGIES
3.1 Embed a culture of non-violence, respect and gender equality across Council and the community	3.2.1 Improve the local evidence base and monitoring of data related to gender equality and health
3.2. Drive regional leadership and advocacy on gender equality and family violence prevention	3.2.1 Lead a strategic approach to family violence prevention and gender equality

POLICY THAT SUPPORTS ACTION ON FAMILY VIOLENCE AND GENDER INEQUALITY

<ul style="list-style-type: none"> • The National Plan to Reduce Violence against Women and their Children 2010 – 2022 • Gender Equality Act 2020 • Ending Family Violence: Victoria's Plan for Change • The Free From Violence – Victoria's Prevention Strategy • The Victorian Public Health and Wellbeing Act • Safe and Strong: A Victorian Gender Equality Strategy • Roadmap for Reform: Strong families, Safe children 	<ul style="list-style-type: none"> • Victoria's 10-year Mental Health Plan • Victorian Public Health and Wellbeing Plan 2019-2023 • Education State Early Childhood Reform Plan: Ready for kinder, ready for school, ready for life • Women's Sexual and Reproductive Health Key Priorities 2017-2020 • Good Health Down South 2018 -2021 • City of Casey Gender Equality and Prevention of Family Violence Strategy (TBD)
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HEALTH DOMAIN 4: HEALTHY EATING AND FOOD SECURITY

Increased healthy eating and food security

HOW WE WILL MONITOR CHANGE

Fruit and Vegetable - proportion (%) of adult (18+ years) population, by compliance with NHMRC fruit and vegetable consumption guidelines (*Victorian Population Health Survey*)

Sugar sweetened soft drinks – percentage of adults who consumed sugar-sweetened soft drinks every day (*Victorian Population Health Survey*)

Take-away meals or snacks consumption - proportion (%) of adult population who eat take-away meals or snacks (*Victorian Population Health Survey*)

Overweight - proportion (%) of adult (18+ years) population, who were overweight (pre-obese or obese) (*Victorian Population Health Survey*)

Food Security – percentage of adults who ran out of food and could not afford to buy more in the last 12 months (*Victorian Population Health Survey*)

HOW WE WILL MAKE A DIFFERENCE

STRATEGIC OBJECTIVE	STRATEGIES
4.1 Support access to local, healthy, culturally appropriate, and affordable fresh food	4.1.1 Support the development and implementation of policies and programs that promote food security in at-risk groups
	4.1.2 Strengthen the capacity of the emergency food relief sector to provide food that is fresh, healthy, and culturally appropriate
4.2 Support community members to make healthier food and drink choices	4.2.1 Support community skills and knowledge in healthy food preparation
	4.2.2 Support access to healthy food and drink options in public settings including schools and early childhood services, sport and recreation, events and workplaces

POLICY THAT SUPPORTS ACTION ON HEALTHY EATING AND FOOD INSECURITY

- | | |
|--|--|
| <ul style="list-style-type: none"> Victorian Public Health and Wellbeing Plan 2019 - 2023 City of Casey Urban Rural Interface Design Framework | <ul style="list-style-type: none"> City of Casey Community Gardens Policy |
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HEALTH DOMAIN 5: MENTAL WELLBEING AND SOCIAL INCLUSION

LONG TERM OUTCOME SOUGHT

Improved mental wellbeing and social inclusion

HOW WE WILL MONITOR CHANGE

Psychological distress - proportion (%) of adult (18+ years) population, by level of psychological distress (*Victorian Population Health Survey*)

Anxiety or depression - proportion (%) of adult (18+ years) population, diagnosed with anxiety or depression (*Victorian Population Health Survey*)

Self-reported health - proportion (%) of adult (18+ years) population, by self-reported health status (*Victorian Population Health Survey*)

Life Satisfaction - proportion (%) of adult (18+ years) population, by satisfaction with life (*Victorian Population Health Survey*)

Volunteering – participation in unpaid voluntary work (*ABS*)

Hospital emergency presentations and admissions for mental health conditions (*various*)

HOW WE WILL MAKE A DIFFERENCE

STRATEGIC OBJECTIVE	STRATEGIES
5.1 Develop place-based initiatives that support social inclusion and community participation of at-risk groups	5.1.1 Support communities to co-design innovative programs, events, and activities

5.2 Embed a culture of respect, inclusion and celebration of diversity in Council and the community	5.2.1 Design community facilities and spaces to promote accessibility, connection, and inclusion
	5.2.2 Support the integration of the principles of access and inclusion into the policies and programs of Council, Council partners and community organisations
5.3 Support partnerships to address the underlying drivers of mental ill-health in Casey community	5.3.1 Develop a regional partnership response to the recommendations of the Royal Commission into Victoria's Mental Health System

POLICY THAT SUPPORTS ACTION ON MENTAL HEALTH AND SOCIAL INCLUSION

<ul style="list-style-type: none"> • Victorian LGBTIQ Strategy (draft) • Victorian Public Health and Wellbeing Plan 2019-2023 • Royal Commission into Victoria's Mental Health System 2021 • Social Housing and Homelessness Funding and Policy. • City of Casey Diversity, Access and Inclusion Policy 2016-2020 • City of Casey Inclusive Casey Strategic Framework 2018-2021 • City of Casey Family Violence Strategy • City of Casey Gender Equality Action Plan 2018-2021 • City of Casey Aboriginal Strategic Framework 2018-2021 • City of Casey Volunteer Participation Policy 	<ul style="list-style-type: none"> • City of Casey Accessibility Framework for Action 2018-2021 • Casey's Future – A Plan for Children, Young People and Families 2017-2021 • City of Casey Arts and Cultural Development Strategy 2018-2022 • City of Casey Arts Acquisition Policy • City of Casey Events Policy • City of Casey Child Safety Policy • City of Casey Homelessness Principle • City of Casey Neighbourhood Houses and Community Learning Centres Policy • City of Casey Culturally Inclusive Service Guide
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HEALTH DOMAIN 6: PHYSICAL ACTIVITY AND ACTIVE LIVING

LONG TERM OUTCOME SOUGHT

Increased physical activity and active living

HOW WE WILL MONITOR CHANGE

Physical activity - proportion (%) of adult (18+ years) population, by physical activity status
(*Victorian Population Health Survey*)

Sedentary behaviour - Proportion of adult population, by time spent sitting on an average weekday
(*Victorian Population Health Survey*)

Active Transport – modes of travel, walkability (AOU), distance to public transport (AUO)

HOW WE WILL MAKE A DIFFERENCE

STRATEGIC OBJECTIVE	STRATEGIES
6.1 Develop a range of inclusive physical activity opportunities	6.1.1 Co-design innovative programs and initiatives that support participation of those least likely to be physically active
	6.1.2 Promote local opportunities for participation in all forms of physical activity

6.2 Plan and develop neighbourhoods to support people to be physically active in their daily life	6.2.1 Co-design with the community inclusive open space, playgrounds, and nature play spaces
6.3 Enhance access to health services to support healthy and active living for all community members	6.3.1 Engage with community members and sector partners to co-design service referral pathways and identify advocacy agenda

POLICY THAT SUPPORTS ACTION ON ACTIVE LIVING

<ul style="list-style-type: none"> • Sport 2030 National Sports Plan (Sport 2030) • Victorian Public Health and Wellbeing Plan 2019-2023 • Sport and Recreation Victoria (SRV) Active Victoria 2017-2021 • VicHealth Physical Activity Strategy 2018-2023 • City of Casey Sport and Physical Activity Strategy 2021-2025 • City of Casey Sport Cycling Strategy • City of Casey Leisure Facilities Development Plan (2014-2018) and Policy 2017 	<ul style="list-style-type: none"> • City of Casey Walk and Ride in Casey Strategy 2019-2041 • City of Casey Open Space Strategy 2015 • City of Casey Activity Centres Strategy 2019 and Integrated Transport Strategy • Casey Aquatic Facilities Strategy 2019-2041 • City of Casey Diversity, Access and Inclusion Policy 2016-2020 • City of Casey Gender Equity Action Plan 2018-2021
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IMPLEMENTATION, EVALUATION AND GOVERNANCE

Implementation

The Strategy will be implemented through annual partnership action plans over the next four years. The Action Plan will bring to life the integrated strategic framework outlined above by providing direction on annual collaborative projects to respond to the key health challenges in Casey as well as projects that will enable a whole-of-organisation impact in public health.

An internal Development and Implementation Group, made up of key leaders in the Community Life Division, will work to ensure there are opportunities for strategic alignment between Council departments, support ongoing community engagement and develop structures across Council that will ensure the success of the work across the life of the Strategy.

The community will play an ongoing and active role in the implementation and evaluation of the Strategy. This will be done through Councils existing community reference groups and targeted engagement to ensure all members of Casey's diverse community have a voice in the development of local projects and programs.

Implementation of the *Health and Wellbeing Strategy* will be supported by place-based equity and cultural diversity toolkits developed by Council to ensure that the objectives and principles are embedded across Council work areas and are sustainable.

Monitoring and Evaluation

Monitoring of long-term health and wellbeing outcomes in Casey will be done using indicators and measures identified for each of the health domains. Trending of these indicators over time,

benchmarked to state and regional data, will be publicly available on a Council health and wellbeing data dashboard. Work will also be undertaken to identify gaps in health data and better understand the issues at a local level. Data will be updated on the dashboard as it becomes available through validated and reliable state data sets.

Short and medium-term impact of project activities, identified in the annual action plans, will be evaluated to assess changes occurring in line with the project objectives and to identify any unintended effects. An annual review of project activities and outputs from the action plan will be undertaken to monitor how effectively projects are being implemented and to make changes accordingly and inform the next annual action plan.

Evaluation methodology for projects will be developed collaboratively within partnership groups responsible for project implementation. A final evaluation will take place at the end of four years to review the policy, identify key achievements, areas of community change and opportunities for the future. Evaluation findings will be shared with the community.

Governance

A Health and Wellbeing Strategy Leadership Group has been established to provide advice to Council on public health and wellbeing matters. The group has oversight of the development of the Strategy and includes senior managers from within Council and from government and public health partners including Department of Families, Fairness and Housing, Department of Health, enliven, Monash Health and Women's Health in the South East.

The leadership group will continue to meet bi-annually during the life of the strategy to oversee implementation, share information and experiences, and identify opportunities.

CONTACTING COUNCIL

City of Casey

03 9705 5200

NRS: 133 677 (for the deaf, hearing or speech impaired)

TIS: 131 450 (Translating and Interpreting Service)

caseycc@casey.vic.gov.au

PO Box 100, Narre Warren VIC 3805

casey.vic.gov.au

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Customer Service Centres

Cranbourne Customer Service Centre Cranbourne Park Shopping Centre, Shop 156, South Gippsland Highway, Cranbourne

Narre Warren Bunjil Place, 2 Patrick Northeast Drive, Narre Warren